BULLETIN OF WASHINGTON UNIVERSITY

St. Louis, Missouri

School of Medicine

October 9, 2012
Calendar

Calendar 2012-13

2012

June
15 Friday: Clinic orientation for new third-year students.
18 Monday: Academic year begins for third- and fourth-year classes.
22 Friday: Deadline for registration and initial payment of tuition for the third- and fourth-year classes.

July
3 Tuesday: Independence Day holiday begins at 5 p.m.
4 Wednesday: Independence Day observance.

August
14 Tuesday: Orientation, matriculation and initial fee payment for the first-year class.
20 Monday: Academic year begins for the first- and second-year classes.
24 Friday: Deadline for registration and initial payment of tuition for the second-year class.

September
2 Sunday: Labor Day holiday begins at 5 p.m.
3 Monday: Labor Day observance.

November
21 Wednesday: Thanksgiving Day holiday begins at 5 p.m.
22 Thursday: Thanksgiving Day observance.
23 Friday: Holiday for all classes.

December
21 Friday: Winter recess begins at 5 p.m. for all classes.

2013

January
7 Monday: Classes resume for all students.
11 Friday: Deadline for payment of the balance of tuition for all classes.
20 Sunday: Martin Luther King Jr. Day holiday begins at 5 p.m.
21 Monday: Martin Luther King Jr. Day observance.

March
29 Friday: Spring break begins at 5 p.m. for first- and second-year classes.

April
4 Thursday: Spring break begins at 5 p.m. for third- and fourth-year classes.
8 Monday: Classes resume for all students.

May
5 Sunday: Academic year ends at 5 p.m. for graduating students.
17 Friday: Academic year ends at 5 p.m. for the second-year class.
Commencement.
26 Sunday: Memorial Day holiday begins at 5 p.m.
Monday: Memorial Day observance.
Friday: Academic year ends at 5 p.m. for the first-year class.
    Academic year and clinical clerkships end at 5 p.m. for students in clinical clerkships.

Please note: Beginning and ending dates of each academic term will be published with individual class schedules.

Schedule of Clerkship and Elective Intervals 2012-13

Final examinations for clinical clerkships are administered at the end of each clerkship. Exact date, time and location are announced by the coursemaster.

Weeks/Dates
1-4:      June 18, 2012 — July 15, 2012
5-8:      July 16, 2012 — August 12, 2012
37-40:    March 11, 2013 — April 7, 2013
41-44:    April 8, 2013 — May 5, 2013

*Clinical clerkships end May 31, 2013.
Admissions and Educational Program

Admissions and Educational Program

Mission Statement for Washington University

The mission of Washington University is the promotion of learning — learning by students and by faculty. Teaching, the transmission of knowledge, is central to our mission, as is research, the creation of new knowledge. Faculty — composed of scholars, scientists, artists, and members of the learned professions — serve society by teaching; by adding to the store of human art, creativity, understanding, and wisdom; and by providing direct services, such as health care.

Our goals are:
• to foster excellence in our teaching, research, scholarship, and service;
• to prepare students with the attitudes, skills, and habits of lifelong learning and with leadership skills, enabling them to be useful members of a global society; and
• to be an exemplary institution in our home community, St. Louis, as well as in the nation and in the world.

To this end we intend:
• to judge ourselves by the most demanding standards;
• to attract people of great ability from all types of backgrounds;
• to encourage faculty and students to be bold, independent, and creative thinkers;
• to provide the infrastructure to support teaching, research, scholarship, and service for the present and for future generations.

School of Medicine Mission and Vision Statements

Our Mission

Washington University School of Medicine will lead in advancing human health through outstanding clinical care, innovative research and the education of tomorrow’s leaders in biomedicine.

Our Vision

In leading the advancement of human health, Washington University School of Medicine will:
• Cultivate excellence, collegiality, and diversity
• Attract the most talented people and enable their development
• Lead the evolution of change in biomedicine
• Enhance our intellectual and technological environment to foster exceptionally creative science and education
• Develop and maintain excellent clinical programs to provide outstanding care
• Observe the highest standards of ethics and integrity
• Apply advances in science and medicine to the betterment of humanity

Approved June 24, 2008 by the Executive Faculty

Objectives of the Educational Program for Medical Students

Washington University School of Medicine provides students with a supportive, stimulating and challenging environment in which to acquire a thorough foundation in scientific medicine and develop
skills, professional attitudes and personal commitments necessary for the practice of medicine at the highest possible level of excellence. In addition, the medical school fosters a commitment to collegiality, respect of individuality, community involvement and leadership through many extracurricular organizations and activities supported by the school. The educational program is designed to ensure that each graduating student will demonstrate the following:

- Knowledge of core concepts and principles of human biology.
- Knowledge of the scientific foundations of medicine and medical practice including disease pathogenesis and treatment, illness prevention and health maintenance.
- Proficiency in applying the scientific method to the practice of medicine including the processes of problem identification, data collection, hypothesis formulation and the application of deductive reasoning to clinical problem-solving.
- Knowledge of human behavior and an understanding of the impact of ethnic and cultural characteristics, socioeconomic factors, and other social factors on the practice of medicine.
- Proficiency in obtaining an appropriate medical history, performing a physical examination, and performing basic procedures necessary for the practice of medicine.
- Cognitive skills essential to the formulation of clinical questions, critical evaluation of scientific and clinical data, and effective application of this data to clinical problem-solving.
- Efficient and effective utilization of educational resources and proficiency in acquisition and assimilation of new information and practices.
- Recognition that there is uncertainty in clinical decision-making.
- Recognition that information and practices in clinical medicine can become obsolete and should be modified and refined based on new (evidence-based) information.
- Effective oral and written communication skills with patients and their families, members of the academic and medical communities and other members of the community at large.
- Commitment to provide compassionate care for all people.
- Dedication to inquiry and to life-long learning through self-education and self-assessment and active participation as teachers of patients, colleagues and members of the community.
- Appreciation of the essential role of biomedical research in the advancement of medicine and a commitment to the spirit of collaboration and support of basic science and clinical research efforts.
- Dedication to high standards of professional integrity and ethical behavior in clinical practice and biomedical research.

**Description of Undergraduate Medical Education Program by Year**

**First Year**
The first-year curriculum focuses on the acquisition of a core knowledge of human biology, as well as on an introduction to the essentials of good patient care. Diversity among matriculants in undergraduate background and in approaches to learning is recognized and fostered. The courses are graded Pass/Fail, and a variety of didactic means are made available including lectures, small groups, extensive course syllabi, clinical correlations and a Lotus Notes computerized curriculum database. The Practice of Medicine I uses regular patient interactions and integrative cases to teach students to skillfully interview and examine patients, as well as the fundamentals of bioethics, health promotion/disease prevention, biostatistics and epidemiology. An optional summer research program between the first and second year provides an opportunity for students to explore various areas of basic science or clinical research.

**Second Year**
The second-year curriculum is focused on human pathophysiology and pathology. Through lectures, small group discussions, laboratory exercises and independent study, students acquire broad, detailed knowledge of mechanisms of disease pathogenesis, clinopathological relationships and fundamental principles of therapy. The Practice of Medicine II course continues students’ introduction to the fundamentals of patient care and emphasizes organizing and interpreting clinical information to form a problem list, differential diagnosis and treatment plan. Students also learn how to accurately document and concisely present clinical information. Supervised clinical experiences and small group discussions further engender development of the professional attitudes and high ethical standards required for the third-year clinical clerkships.
Third Year

The overall goal of the third year is implementation of fundamental interactive clinical skills necessary for the practice of medicine at the highest possible level of excellence. Students achieve this goal by participating in intensive, closely supervised training experiences in the core clinical clerkships involving inpatient and ambulatory settings and interactions with patients who present a spectrum of emergent, urgent, routine and chronic clinical problems. Through these experiences, students exhibit growth and maturation in their abilities to take medical histories, perform complete physical examinations, synthesize findings into a diagnosis, formulate treatment plans and document and present information in a concise, logical and organized fashion. During the clinical clerkships, students learn to use the biomedical literature and other educational resources in the service of their patients and in self-directed learning. Students also use their personal experiences and rapidly expanding knowledge of human behavior and ethnic, cultural, socioeconomic and other social factors to develop their own personal standards of compassionate, respectful and ethical behavior in the practice of medicine.

Fourth Year

The overall goals of the fourth year are to consolidate, enhance and refine the basic clinical skills developed during the clinical clerkships and to explore specialty areas within the field of medicine. This is accomplished by providing each student with optimal preparation for selecting and pursuing graduate medical education opportunities in his/her chosen field of medical practice and/or research. Students may select from a broad array of clinical rotations and research experiences and may arrange extramural experiences.

History

The education of physicians at Washington University began in 1891. Under an ordinance enacted April 14, 1891, establishing a Medical Department of Washington University, the St. Louis Medical College (an independent medical college in St. Louis) was brought under the wing of the well-established University. The faculty of the college eagerly agreed to the union, stating "Most of the great medical schools of the world have always been integrant departments of universities, and the examples which America furnishes give added testimony to the fructifying influence of the contact of students and teachers of professional schools with the workers in universities." Eight years later, the Missouri Medical College (another independent college in the city) also joined Washington University, and thus the two most famous medical colleges in the city were merged with the University.

In 1909, Abraham Flexner began a survey of 155 medical schools in the United States and Canada for the Carnegie Foundation for the Advancement of Teaching. The survey created a national sensation. Some schools collapsed, others pooled their resources, while still others reorganized. The Medical School of Washington University did not escape criticism. In the report Flexner made to Henry Smith Pritchett, Ph.D., president of the Carnegie Foundation for the Advancement of Teaching and former professor of astronomy at Washington University, he said that one of two courses must be adopted: "The department must be either abolished or reorganized."

Dr. Pritchett mailed the report to Robert S. Brookings, a St. Louis merchant who was president of the Board of Directors of Washington University. Brookings was shocked and immediately went to New York to see Flexner, demanding proof that the conditions were as bad as described. Both returned to St. Louis and the two men went through the School. In less than two hours, Brookings was convinced that drastic action was necessary if the School was to be one of the foremost institutions of medical education and research. The meeting in 1909 of Brookings and Flexner was of unsurpassed significance in the history of the Washington University School of Medicine, for it led to the complete reorganization of the School and the establishment of the present Medical Center. Abraham Flexner inspired the dream of a model medical school; Robert Brookings accepted the challenge, and with the energy and vision which characterized all his enterprises, made the dream a reality.

No time was lost in making changes. The Bulletin of the Medical School for July 1910 made the following statement: "The Corporation of the University, becoming convinced that in no other direction could greater service be rendered than through a great, modern medical school, determined to reorganize the
School and to place it in the front rank of American medical institutions. It has called to the heads of a number of leading departments the ablest men it could secure."

When Robert A. Barnes died in 1892, he left a will which directed the trustees of his estate to use $840,000 for the erection and equipment of a hospital "for sick and injured persons, without distinction of creed, under the auspices of the Methodist Episcopal Church, South." Investigation by the trustees into the cost of building a modern hospital convinced them that the sum was not large enough to build an efficient, fireproof building, and they therefore invested the trust. By 1912 the value had increased to $2 million, a sum which permitted the building of a hospital and left an endowment greater than the original fund.

At the same time the trustees were studying hospital construction, Robert Brookings was studying medical schools. It was apparent to everyone concerned that the two projects, the building of a medical school and the construction of a modern hospital, were so interrelated that the purpose of each would be more successfully fulfilled by an affiliation. A medical school would provide a highly trained staff and would assure the most modern methods and superior laboratory facilities for the hospital. A teaching hospital would give patients superior care and, at the same time, provide the essential clinical experience consistent with modern medical teaching methods.

In the spring of 1912, construction was begun on the medical school and hospital buildings which today form the nucleus of the present center. The laboratories were moved from their old quarters in downtown St. Louis into the new buildings on Euclid Avenue and Kingshighway Boulevard during the summer of 1914, and late in the fall of the same year the activities of the Washington University Hospital were transferred to Barnes Hospital. Concomitantly, the St. Louis Children’s Hospital, then located on Jefferson Avenue, became affiliated with the School of Medicine and moved to its new quarters in the Medical Center.

On April 28, 29 and 30, 1915, exercises were held to celebrate the completion of this group of buildings designed to promote the practice, the teaching and the progress of medicine. The dedication ceremonies marked what Dr. William H. Welch of The Johns Hopkins University called "one of the most significant events in the history of medical education in America." Robert S. Brookings, the one man most responsible for the reorganization, voiced the hope that "our efforts will contribute, in some measure, to raising the standard of medical education in the West, and that we will add, through research activities, our fair quota to the sum of the world's knowledge of medicine." These prophetic words have been realized.

In the ensuing years, the Medical Center has continued to grow, and now its facilities are among the best in the world. With the increase in size of the physical plant there has come a substantial increase in the number of the faculty; the expansion has been made without compromise to the standards that marked the early development of the Medical Center. As a result, significant achievements in both research and clinical areas have been steadily recorded.

Faculty

Washington University School of Medicine has one of the finest faculties of any medical school in the nation. Recognized for their distinguished achievements in original research, 10 faculty members are among the fellows of the prestigious National Academy of Sciences; 24 belong to its Institute of Medicine. Seventeen Nobel laureates have been associated with the School of Medicine.

During fiscal year 2011, 143 members of the faculty held individual and/or institutional career development awards. Some individual faculty members may hold multiple awards:

106 from National Institutes of Health (including direct-pay and pass-through awards)
1 from AGA Foundation for Digestive Health and Nutrition
1 from Agency for Healthcare Research and Quality
1 from Alpha One Foundation
1 from American College of Surgeons
1 from American Federation for Aging Research
The School of Medicine has 15 faculty members with Method to Extend Research in Time (MERIT) status, a special recognition given to only a few NIH grantees, which provides long-term, uninterrupted financial support to investigators who have demonstrated superior achievement during previous research projects.

In 2011-12, the School employed 1,712 full-time, salaried faculty members in its 20 preclinical and clinical departments. The clinical departments are further strengthened by 1,319 voluntary and adjunct faculty members, a group of physicians who practice their medical specialties in St. Louis and are members of one or more of the staffs of the hospitals in the Washington University Medical Center.

Students

The School of Medicine attracts a student body of exceptional quality. The 2011 entering class of 121 students was selected from a pool of 4,045 applicants. The School is a national institution with 48 states plus the District of Columbia and 11 countries represented in the current enrollment.

In 2012, the School conferred the MD degree upon 95 individuals. In addition, four students received the MD/MA degrees, three students received the MD/MSCI degrees, and 25 students graduated with the MD/PhD degrees. Graduating students who participated in the 2012 National Residency Matching Program matched in programs recognized for high quality and selectivity. In the Alphabetical List of Students area of the Register of Students section, the graduates are listed by name, hometown, undergraduate and graduate schools attended and year of degree, type of postgraduate residency program, name of hospital and the city in which it is located.

The student body of the School of Medicine numbers 604 medical students. Programs also are conducted for 722 students who are pursuing graduate degrees in communication sciences, clinical investigation, occupational therapy, physical therapy, psychiatric epidemiology or genetic epidemiology. The Division of Biology and Biomedical Sciences has extensive graduate training programs for 610 students seeking the Doctor of Philosophy degree in areas of Biochemistry; Computational and Systems Biology; Developmental, Regenerative and Stem Cell Biology; Evolution Ecology and Population Biology; Human
and Statistical Genetics; Immunology; Molecular Biophysics; Molecular Cell Biology; Biochemistry; Molecular Genetics and Genomics; Molecular Microbiology and Microbial Pathogenesis; Neurosciences; and Plant Biology.

**Teaching Facilities**

The 164-acre Washington University Medical Center, spread over portions of 17 city blocks, is located along the eastern edge of Forest Park in St. Louis. Along the western edge of the park is the 169-acre Danforth Campus of the university. All campuses (North, West, Danforth and Medical) are connected by the MetroLink light rail system. The Danforth Campus and the Medical Campus are also connected by the Washington University Gold MetroBus. Students, faculty and staff can access both of these modes of transport with a free U-Pass, obtained from the Transportation Office, along with their Washington University identification badge.

The medical center was incorporated in 1962. It now consists of Washington University School of Medicine, Barnes-Jewish Hospital, St. Louis Children’s Hospital, Barnard Hospital and Central Institute for the Deaf and is affiliated with BJC HealthCare. Two integral units of the medical center are the world-famous Mallinckrodt Institute of Radiology (MIR) and the Center for Computational Biology.

The medical center generates an annual economic impact of nearly $4.4 billion for the St. Louis area, according to an economic model maintained by the St. Louis Regional Commerce and Growth Association. With more than 21,000 employees, the combined medical center institutions are among the largest employers in the metropolitan area.

Unprecedented growth has occurred at the medical center over the past 14 years. At the School of Medicine alone during the past five years, more than $162 million has been expended on renovation and new construction. Capital improvements and strategic purchases have added approximately 1 million square feet of space to the medical school during this same period. In the most recent fiscal year, more than $106 million of capital improvements were made at the School. Recently completed is the BJC Institute of Health at Washington University School of Medicine, which added approximately 245,000 square feet of lab, vivarium and support space and more than $130 million of capital improvements.

In the last 10 years, School of Medicine expansion has included the Genome Sequencing Center (GSC) Data Center; the Northwest Tower; the school's first dedicated teaching facility, the Farrell Learning and Teaching Center; the Specialized Research Facility — East; the Southwest Tower/Charles F. Knight Emergency Center; the Center for Advanced Medicine; the McDonnell Pediatric Research Building; two parking garages; and the acquisition of the Central Institute for the Deaf buildings.

The **BJC Institute of Health at Washington University School of Medicine** was built to support the Washington University BioMed 21 initiative. Phase 1 construction is now complete and consists of approximately 675,000 square feet. It is an eleven- and six-story building (the building is also structured to add an additional ten stories above the six story portion of the building). Four of the top five floors, totaling 215,000 square feet, are wet labs to support the five research centers associated with BioMed 21 along with lab space for Pathology and Immunology, Obstetrics and Gynecology, and Pediatric Surgery. There is also a 30,000-square-foot vivarium in the lower level. BJC HealthCare will eventually occupy the first five floors, which are programmed for dietary services, cafeteria, pharmacy and clinical labs.

The **GSC Data Center** (2008) is a state-of-the-art data center located across Newstead Avenue from its parent department in the 4444 Forest Park Building. A 14,000-square-foot building houses a 3,000-square-foot data room capable of populating 120 high-speed blade center racks and disk racks. This facility will allow the GSC to expand their research capability in the demanding world of sequencing grants and projects for years to come. A 16,500-square-foot expansion of this facility, funded by an ARRA grant, is currently under way and will be completed in 2012.

The eight-story **Northwest Tower** (2006) resides above the seven-level Children’s Hospital Garage. This new 190,000-square-foot building provides faculty office space.

The **Farrell Learning and Teaching Center** (2005), a 110,000-square-foot, six-story facility, located
at the corner of Scott and Euclid avenues, is the home for all of the School of Medicine teaching labs; ER, patient room and OR simulation training rooms; small-group and seminar rooms; and all individual student study areas. A lecture hall, case-study hall and café are on the first floor of the building.

The Specialized Research Facility — East (2004) is a 56,000-square-foot barrier facility supporting several research study programs.

The Center for Advanced Medicine (2001), at the corner of Euclid and Forest Park avenues, is a shared facility between the school and BJC. This building brings all of the medical center's clinics together under one roof. The School of Medicine occupies 243,400 square feet in the Center for Advanced Medicine and 75,000 square feet on three floors in the new Southwest Tower. Located in the heart of the Center for Advanced Medicine is the 66,150-square-foot Alvin J. Siteman Cancer Center. The Siteman Cancer Center is the only NCI-designated comprehensive cancer center in the region.

The McDonnell Pediatric Research Building (2000) added 230,000 square feet of state-of-the-art research facilities — four and a half floors for the Department of Pediatrics, three floors for the Department of Molecular Microbiology, and one-half floor for the Department of Medicine — on the corner of Euclid Avenue and Children’s Place. This building includes a Barnes & Noble bookstore with a coffee shop on the ground level.

In addition, major renovations to existing buildings continue, with emphasis on research facilities. The Department of Genetics, together with the Department of Developmental Biology, recently started the Center for Genome Sciences, with a wet lab renovation of 30,000 square feet on the fifth floor of 4444 Forest Park. The Department of Biochemistry added a Nuclear Magnetic Resonance (NMR) Spectrometer in a small addition to Cancer Research Building. The Department of Ophthalmology remodeled their wet labs and offices on the 1st, 10th, 11th and 12th floors of McMillan Hospital Building. The Department of Biochemistry and Molecular Biophysics renovated research labs on half of the second floor and the Department of Medicine renovated research labs on half of the seventh floor of the McDonnell Medical Sciences Building. A major renovation of the Maternity Hospital was recently completed for the Department of Obstetrics. Floors two through six are completely renovated into new office space for Obstetrics faculty and administration. The recently acquired building at 4533 Clayton Ave. has been renovated into office space for the departments of Anesthesiology, Radiology and Obstetrics.

Ongoing improvements to the campus infrastructure are being made through the Public Realm Project, which is focused on landscape, street lighting and streetscape enhancements.

The School of Medicine is divided into two segments. Clinical departments are predominantly located on the west side of the Medical Center, adjacent to hospital and patient areas. Preclinical departments are to the east. Research and instructional endeavors occupy the greater portion of the facilities, with more than 1.8 million gross square feet devoted to these activities. In the aggregate, the medical school occupies nearly 6 million gross square feet of space on this campus.

The focal point of the preclinical teaching activities is the McDonnell Medical Sciences Building, the center of activity for entering medical students. This building, with 300,000 square feet of research laboratories, was made possible by James Smith McDonnell III, a generous benefactor of Washington University. Rising nine floors above ground, it contains administrative offices and two lecture halls on the first floor. Three floors of wet lab space were completely renovated in the last five years. Offices and research laboratories for the seven basic science departments are located on the upper floors. Modern centralized animal quarters are housed in the basement.

The North and South Buildings, in which the work of several Nobel laureates has centered, have been renovated extensively. Along with the Cancer Research Building, they continue to provide space for laboratories, offices and some departmental facilities.

The East Building houses an MRI facility, a cyclotron, computer installations and other components of the Mallinckrodt Institute of Radiology. The East Building also houses several administrative office suites.

A network of pedestrian bridges provides the ability to move freely among the major facilities, enhancing the interaction of all medical center institutions and benefiting research and patient care.
Other facilities owned or operated by Washington University include:

The 45,160-gross-square-foot Eric P. Newman Education Center accommodates nondegree professional education for the medical center. The education center provides auditoriums, classrooms, meeting space and lecture halls to support and enhance a comprehensive education program.

The five-story Biotechnology Center supports laboratories for the departments of Psychiatry, Medicine, Neurology, and Pathology and Immunology.

McMillan Hospital Building houses offices and research laboratories for the departments of Neurological Surgery, Neurology, Ophthalmology and Visual Sciences, and Otolaryngology.

The Edward Mallinckrodt Institute of Radiology (MIR) is internationally recognized for excellence in teaching, research and clinical services. Housed in its own 13-story building, MIR has satellite facilities in Barnes-Jewish Hospital, St. Louis Children’s Hospital, the Clinical Sciences Research Building, the East Building, the Scott Avenue Imaging Center, the Center for Advanced Medicine and the Charles F. Knight Emergency Center. Services also are provided at Barnes-Jewish West County Hospital and Barnes-Jewish St. Peters Hospital and at the Washington University Orthopedics and Barnes-Jewish Hospital Outpatient Orthopedic Center.

With consolidation of psychiatric patient care services in the West Pavilion, the eight-story Renard Hospital provides additional office and laboratory space for the Department of Psychiatry.

Maternity Hospital provides offices for the departments of Obstetrics and Gynecology and Ophthalmology and Visual Sciences. A Perinatal Center and some Psychiatry clinical research are located in this building.

The West Building contains administrative offices and research laboratories for the Department of Pathology and Immunology and research labs for the Department of Medicine.

Wohl Hospital Building provides offices and laboratories for the Department of Medicine and the Department of Surgery.

The resident clinics in Wohl Clinic are administered by Barnes-Jewish Hospital. The lower five floors contain clinical space and space for translational research. The first floor is home to the Chromalloy American Kidney Dialysis Center. The upper five floors are devoted to research facilities for several departments of the School of Medicine.

The 294,302-gross-square-foot building at 4444 Forest Park houses administrative offices of various medical school departments plus the Program in Physical Therapy, the Program in Occupational Therapy and a major research facility for the Department of Genetics and the Genome Sequencing Center, including the new Center for Genomics and Human Genetics.

The 4511 Forest Park Medical Building houses administrative offices and research labs for the Department of Radiation Oncology. The third-floor clinic and office area has recently been renovated into wet lab research space.

The 136,977-gross-square-foot, seven-story East McDonnell Specialized Research Facility is a maximum-barrier research facility to accommodate higher brain function research and transgenic studies.

The 10-story Clinical Sciences Research Building (CSRB) and North Tower Research Addition, 201,349 gross square feet, consolidates medical school specialized research into one structure. The top three floors of the addition house wet lab research space.

Founded in 1911, the Bernard Becker Medical Library is one of the oldest and most comprehensive medical libraries west of the Mississippi. The library serves as an information services hub for the Washington University Medical Center and extends its services and resources to the global health science
The facility, completed in 1989, integrates biomedical information resources and information technology and provides access to skilled librarians and bioinformaticists. The eight-level, 114,000-square-foot structure has capacity for more than 300,000 volumes. The biomedical resource collection includes 27 subscribed databases, 5,984 full-text e-journals and 14,171 e-books. The library also holds 6,563 print journals, 80,681 print book titles and 1,191 audiovisual items.

The library’s Translational Research Support Division provides specialized knowledge, customized programs and services, and unique information resources to support Washington University’s broader goals of connecting basic research to patient care. The division includes a bioinformatics support program to provide instruction, consultation services and support for specialized software and databases for the bioinformatics, genomic and basic science research community. Its community outreach and consumer health information program focuses on ways to foster consumer health literacy and seeks opportunities to partner with the School of Medicine, medical center groups and local organizations to improve health literacy. The division also includes a scholarly communications program to support authors and researchers on a wide range of issues including publishing options, public access mandates, copyright and author rights, assessment of research impact and dissemination of research findings.

The Health Information Resources Division provides a broad range of biomedical information resources and training services covering clinical point of care, evidence-based medicine and information management. Through this division, the library focuses on integrating information management into the curricula of the various educational programs and promoting the effective use of information resources in the school’s clinical mission. Librarians in this division focus on each of the school’s divisions, departments or programs to meet their specific information needs. Circulation services, interlibrary lending and document delivery also fall within the scope of services managed by the Health Information Resources Division.

Special Collections (Archives and Rare Books) is a unique and important unit of the library’s resources. The Archives preserve and make accessible 878 archival collections, comprising institutional records, manuscripts, visual items and oral histories that document the medical center’s institutional history, ongoing progress and many significant contributions of its faculty. Among the manuscript collections are papers of William Beaumont, Joseph Erlanger, E.V. Cowdry, Evarts Graham and Carl Cori. There are nine distinct rare book collections containing 13,976 books available for scholarly use. These acclaimed collections include the Bernard Becker Collection in Ophthalmology, the CID-Max Goldstein Collection in Speech and Hearing, the H. Richard Tyler Collection in Neurology and the Paracelsus Collection of the St. Louis Medical Society.

The Bernard Becker Medical Library takes pride in providing the latest biomedical information and services to the Medical Center. For detailed information about the library’s programs and services, visit https://becker.wustl.edu.

The library is open to the general public Monday through Friday, 7:30 a.m. to 6 p.m. Library hours for affiliated users are:

Monday-Thursday: 7:30 a.m. – midnight  
Friday: 7:30 a.m. – 10 p.m.  
Saturday: 8:30 a.m. – 6 p.m.  
Sunday: noon – midnight

Telephone numbers:  
Circulation Services: (314) 362-7080  
Information Services: (314) 362-7085  
Interlibrary Loan: (314) 747-0029  
Archives and Rare Books: (314) 362-4236

Barnes-Jewish Hospital has a premier reputation in patient care, medical education, research and community service, and is the only adult teaching hospital of Washington University School of Medicine, ranked among the top medical schools in the country. The 9,703 Barnes-Jewish team members include
professional nurses, technicians, service and support personnel, plus more than 1,763 physicians and 801 residents, interns and fellows. Barnes-Jewish is licensed for 1,158 beds and in 2011 had 54,282 inpatient admissions, along with 85,994 emergency department visits. Barnes-Jewish Hospital is the first adult hospital in Missouri to receive Magnet recognition, the highest award given by the American Nurses Credentialing Center. Barnes-Jewish Hospital has been consistently ranked on the "Honor Roll" of America's Best Hospitals by U.S. News & World Report since 1993.

For over 130 years, St. Louis Children's Hospital has been at the forefront of pediatric medicine, with physicians, nurses and staff who dedicate their lives to the care of children. The hospital provides a full range of health services to children and their families throughout its 300-mile service area, as well as nationally and internationally. Children's Hospital offers comprehensive services in every pediatric medical and surgical specialty, including newborn medicine, cardiology, orthopedic surgery, neurosurgery and one of the nation's largest pediatric transplant programs. St. Louis Children's Hospital is one of only 12 hospitals on the prestigious U.S. News & World Report 2012 Honor Roll of America's Best Children's Hospitals. In 2010 the hospital received its Magnet re-designation from the American Nurses Credentialing Center (ANCC), the nation's highest honor for nursing excellence.

St. Louis Children's Hospital provides an array of community outreach services, including three pediatric mobile health vans, injury prevention programs, educational classes on parenting and child development, as well as patient and parent support groups. The hospital also operates the 454-KIDS Answer Line, a free child health information service and physician referral line staffed by pediatric registered nurses and referral specialists.

BJC Healthcare is one of the largest nonprofit health-care organizations in the United States, delivering services to residents primarily in the greater St. Louis, southern Illinois and mid-Missouri regions. With net revenue of $3.6 billion, BJC serves urban, suburban and rural communities and includes 13 hospitals and multiple community health locations. Services include inpatient and outpatient care, primary care, community health and wellness, workplace health, home health, community mental health, rehabilitation, long-term care and hospice.

Through a collaboration among the Barnard Cancer Institute, Barnes-Jewish Hospital and Washington University, medically indigent patients with cancer or diseases of the skin receive care at no cost to them from Washington University physicians at the Alvin J. Siteman Cancer Center and Barnes-Jewish Hospital. Barnard Hospital also houses the Washington University Clinical Research Unit, part of the Institute for Clinical and Translational Sciences (ICTS) Center for Applied Research Sciences (CARS), a support center for Washington University clinical investigators.

Founded in 1914 as a place where teachers, hearing and speech professionals and parents work together to help children who are deaf and hard of hearing, CID — Central Institute for the Deaf is an internationally recognized center for deaf education focused on preparing children to attend general education schools in their communities with their hearing peers. In the CID school, teachers use listening and spoken language to help deaf children learn to listen, talk and read with proficiency without the use of sign language.

CID's acoustically enhanced "quiet school" features the Joanne Parrish Knight Family Center, serving children and their families from birth to 3. CID pre-K and primary school programs serve students ages 3 to 12. CID schoolchildren have come from 48 U.S. states and 28 other countries.

CID services for professionals include consulting services and in-service training for schools and school districts, continuing education workshops and educational tools that have been used to help children in all U.S. states and at least 33 countries throughout the world.

CID is financially independent from, but closely affiliated with, CID at Washington University School of Medicine, which continues to operate CID-developed adult clinic, research and academic programs that benefit children and adults with hearing loss. The university acquired these programs in September 2003 along with state-of-the-art facilities at the CID campus, 4560 Clayton Ave. CID continues to provide faculty and practicum sites for the university's graduate degree programs in deaf education and audiology. CID teachers and pediatric audiologists continue to work closely with its speech and hearing scientists in studies involving children who are deaf and hard of hearing.
The Alvin J. Siteman Cancer Center at Barnes-Jewish Hospital and Washington University School of Medicine is world-renowned for its basic science, translational research, patient care and outreach. The Siteman Cancer Center, which holds more than $160 million in extramural funding for cancer research, is organized into eight research programs (Cancer and Developmental Biology, Tumor Immunology, Hematopoietic Development and Malignancy, Cellular Proliferation, Oncologic Imaging, Prevention and Control, Translational and Clinical Research, Breast Cancer Research). The Siteman Cancer Center also provides 14 shared resource facilities to its 362 research members. Shared resource facilities include: Biologic Therapy Core Facility; Biomedical Informatics Core; Biostatistics Core; Clinical Trials Core; Embryonic Stem Cell Core; Hereditary Cancer Core; Flow Cytometry Core; High-Throughput Screening Core; Imaging Response Assessment Core (IRAC); Molecular and Genomic Analysis Core; Proteomics Core; Small Animal Cancer Imaging Core; Health Behavior, Communication and Outreach Core; and Tissue Procurement Core. Siteman is integrated with The Genome Institute at Washington University, the Institute for Public Health and the Mallinckrodt Institute of Radiology. The Siteman Program for the Elimination of Cancer Disparities (PECaD), in partnership with the community, addresses racial, ethnic, socioeconomic and other disparities in cancer-related education, care and research.

Other hospitals. The following hospitals and facilities also are associated with the School of Medicine, and Washington University physicians treat patients at these locations:
- Barnes-Jewish West County Hospital
- Barnes-Jewish St. Peters Hospital
- Christian Hospital Northeast
- Missouri Baptist Medical Center
- Veterans Administration Medical Center
- Shriners Hospital for Children
- Parkland Health Center
- Progress West HealthCare Center
- Phelps County Regional Medical Center
- Southeast Missouri Hospital

Research Activities

Grants and contracts totaling more than $545 million supported faculty research efforts at the School of Medicine during the fiscal year ending June 30, 2011. Substantial additional support was provided directly to faculty investigators by the Howard Hughes Medical Institute. Gifts and grants from 11,862 private sources, including alumni, individuals, foundations, corporations and other organizations, totaled $114.2 million.

During the Washington University fiscal year ending June 30, 2011, the School of Medicine received $372.3 million from the National Institutes of Health, coming in 678 separate grants. This amount includes direct-pay and pass-through awards.

The many firsts at the School of Medicine include:
- Served as a major contributor of genome sequence data to the Human Genome Project.
- Developed a genetic test that detects whether an individual will develop a form of thyroid cancer and would benefit from thyroid removal — the first surgical prevention of cancer based on genetic test results.
- Developed screening tests used worldwide to diagnose Alzheimer’s disease.
- Created the first positron emission tomography (PET) scanner, a device that images the brain at work.
- Helped pioneer the use of insulin to treat diabetes.
- Proposed the now-common practice of taking aspirin to help prevent heart attacks.
- Performed the world’s first nerve transplant using nerve tissue from a cadaver donor.
- Developed a blood test that quickly and safely identifies whether a patient needs invasive treatment for a heart attack.
- Decoded the entire genome of a cancer patient and used the results to alter the course of treatment, which put the cancer into remission.
Ongoing research includes:

• Participating in the National Children’s Study, the largest U.S. study of child and human health ever conducted.
• Seeking new ways to diagnose and treat stroke as part of a national network of state-of-the-art stroke treatment centers.
• Decoding the genomes of hundreds of cancer patients to identify mutations underlying the disease.
• Leading an international research collaboration to study inherited forms of Alzheimer’s disease.
• Developing and using nanoparticles for molecular imaging and targeted drug delivery for cancer and heart, lung and vascular diseases.
• Mapping the major circuits in the human brain to understand normal brain function and connectivity errors involved in alcoholism, autism and schizophrenia.
• Exploring the potential link between a person’s weight and the community of microbes that live in the gut.
• Searching for clues in the brain and spinal cord to help physicians diagnose Alzheimer’s disease before symptoms develop.
• Leading research, teaching and community engagement to improve population health through Washington University’s Institute for Public Health.

BioMed 21

Launched in 2003, BioMed 21 creates a multidisciplinary and translational-research imperative for basic scientists and clinician-researchers from many medical disciplines.

BioMed 21 reorganizes the life sciences at Washington University to address the biggest questions about disease: their origins, how they affect us and how we can cure them. Its goal is to reshape the university culture to rapidly convert the knowledge of the genetic blueprint of human beings into effective, individualized treatments.

To successfully make those discoveries and develop those therapies, BioMed 21 advances on many fronts:

• It aims to collect and dedicate resources, including NIH support and gifts from friends and supporters. Recent grants include:
  – $50 million grant to enhance clinical and translational research
  – $14 million in two grants for neuroscience research
  – $16 million grant for nanomedicine research

• It defines new spaces to house promising research and educational programs, including:
  – 240,000 square feet of new research space in the new BJC Institute of Health at Washington University School of Medicine in the center of the medical campus
  – the Farrell Learning and Teaching Center, an important teaching component of BioMed 21
  – a 40,000-gross-square-foot facility designed to spur development of mouse models for human diseases
  – a 16,000-square-foot data center to meet the massive computing needs of The Genome Center
  – 15,000 square feet of space added to the previously established Center for Genome Sciences & Systems Biology to support new investigators

• In addition to the Center for Sciences & Systems Biology, it establishes five new Interdisciplinary Research Centers (IRCs) housed in the BJC Institute of Health at Washington University School of Medicine. The IRCs are central in promoting scientific and educational innovations across school boundaries. IRCs have the primary goal of promoting innovative interdisciplinary, inter-departmental research and education in the biological and medical sciences. The mission of the IRCs is to assemble talented faculty and students to address key and emerging scientific problems, and to understand fundamental biological processes with broad implications for human health.
  – The BRIGHT Institute (Bridging Research with Imaging, Genomics and High-Throughput)
  – Center for the Investigation of Membrane Excitability Disorders — The EXCITE Center
  – Center for Women's Infectious Disease Research (cWIDR)
The curriculum is an evolving product of prolonged and continuing study, by both faculty and students, of the present and probable future course of medical science and medical practice, and of the ways in which medical education can be kept abreast of this course. Our students enter medical school with diverse backgrounds and interests and upon graduation undertake a wide variety of careers. The curriculum provides the basic knowledge and skills essential for their further professional development. Modern medical education can no longer hope to be comprehensive; it must be selective. Yet students must develop facility in the understanding and use of several related technical languages: those of anatomy, chemistry, physiology and clinical medicine. They must share responsibility for the care of the patient. They also must learn how these areas of endeavor are interrelated, how the organization and needs of society influence the methods of providing medical care, and how new knowledge is acquired and old knowledge re-evaluated.

The curriculum includes a core experience based upon a sequence of courses that introduces students to the many domains and disciplines of medicine. The principles, methods of investigation, problems and opportunities in each of the major disciplines of medical science and medical practice are presented in such a way as to help students select the career best suited to their abilities and goals.

In the final year of the medical school curriculum, the required elective program helps students to decide where major interests lie. It also enables them to benefit from the wide range of specialized knowledge and skills found in the faculty and lays the foundation for lifelong learning and application of principles. The elective program permits students to select, according to their desires, the areas they wish to explore or to study in depth.

**Table of Courses/Course Masters 2012-13**

**First Year**

First-year courses are taught during the 38-week academic year.

**Course No./Course Title**

M75 503 Cell and Organ Systems Biology  
Paul C. Bridgman, PhD, 362-3449 (Histology)  
Robert S. Wilkinson, PhD, 362-2300 (Physiology)

M05 501B The Human Body: Anatomy, Embryology, Imaging  
Glenn C. Conroy, PhD, 362-3397
Selectives

**M04**  
- General Selectives  
  David Windus, MD, 362-7122

**M04**  
- Medical Humanities  
  Stephen S. Lefrak, MD, 454-7116

A selective is 10 clock hours in duration. Examples of selective offerings from last year include:

- 598H Advanced Interdisciplinary Bioethics Seminar—Ethical Issues in Human Reproduction
- 582 Alzheimer's Disease in the Clinic and the Lab
- 5881 Analysis of Clinical Data
- 520H Art and Medicine
- 587Z Beyond the Diagnosis: Social Perspectives on Mental Health
- 537 Cardiovascular Control Mechanisms
- 587V Clin Anat & Physio Sherlock Holmes' Way
- 587X Clinical Challenges in Health Literacy & Health Communication
- 5017 Clinical Correlations in Neurosciences
- 5351 Complementary and Alternative Medicine
- 530 Contemporary Molecular Immunology
- 500C Developmental Biology and Disease
- 538H Doctors on Film
- 5302 Frontiers in Leukemia
- 586H Health and Human Rights
5885 Health Street: Hands-On Comm Based Res-I
587L International Health
5878 Introduction to Clinical Neurosurgery
587W Introduction to Dentistry and Oral Medicine
5013 Introduction to Emergency Medicine-I
5016 Introduction to Emergency Medicine-II
581H Introduction to Medical Anthropology
587S Introduction to Newborn Medicine
524H Major Religious Traditions
5009 Medical Spanish
5061 Medicine of Laughter
5667 Microcirculation
588H Music and Medicine
5875 Olin Grand Rounds
516H Patient, Physician and Drama
582H Philosophy of Medicine
587A Physician as Health Protector and Patient Advocate
587N Public Health
587U Saturday Neighborhood Clinic
587T SPOTS (Sun Protection Outreach Teaching by Medical Students)
587D Students Teaching AIDS to Students (STATS)
528H Terminal Illness and Death
580H The Healer's Art
5876 Topics in Orthopaedic Surgery
533 Tropical Medicine
5863 Underserved Areas: Urban, Rural, Abroad
587G WUMP — Washington University Medical Plunge

Second Year

Second-year courses are taught during the 36-week academic year.

Course No/Course Title

M25 611B Cardiovascular Disease
Dana R. Abendschein, PhD, 362-8909

M25 614 Dermatology
David Sheinbein, MD, 454-8622

M35 632 Diseases of the Nervous System
Allyson Zazulia, MD, 362-7177

M55 660B Clinical Topics in Otolaryngology
Brian Nussenbaum, MD, 362-6599

M25 615A Endocrinology and Metabolism
William E. Clutter, MD, 362-8094

M25 620A Gastrointestinal and Liver Diseases/Nutrition
Deborah C. Rubin, MD, 362-9039

M25 625A Hematology and Oncology
Scot G. Hickman, MD, 289-6308

M25 605A Infectious Diseases
Nigar Kirmani, MD, 454-8214
M45 635B Obstetrics/Gynecology  
D. Michael Nelson, MD, PhD, 362-1016

M60 665 Pathology  
Erika C. Crouch, PhD, MD, 454-8462

M65 640 Pediatrics  
Amanda Emke, MD, 454-6299  
Erika Hayes, MD, 454-6299

M25 607 The Practice of Medicine II  
Megan Wren, MD, 362-3480  
- Clinical Skills  
  Alan Glass, MD, 935-9626  
- Ethics and Health Policy  
  Rebecca S. Dresser, JD, 454-7116  
- Health Promotion/Disease Prevention  
  Julie McManemy, MD, MPH, 454-2341  
- Interpreting Illness  
  Stephen S. Lefrak, MD, 454-7116  
- Medicine Patient Sessions  
  Alan Glass, MD, 935-9626  
- Neurology Patient Sessions  
  Allyson Zazulia, MD, 362-6378  
- Ophthalmology  
  Morton E. Smith, MD, 362-3480  
- Patient-Physician Communication  
  Anne Glowinski, MD, 286-2217  
- Radiology  
  Catherine Appleton, MD, 454-7405  
- Scientific Method of Clinical Medicine and Research  
  Jay F. Piccirillo, MD, 362-7394

M70 670A Principles of Pharmacology  
Tom Ellenberger, DVM, PhD, 362-0287

M85 676A Diseases of the Nervous System: Psychiatry  
Melissa Harbit, MD, 362-2440

M25 612B Pulmonary Diseases  
Michael B. Lippmann, MD, 289-6306  
Adrian Shifren, MD, 454-8764

M25 613B Renal and Genitourinary Diseases  
Stanley Misler, PhD, MD, 454-7719  
Steven Cheng, MD, 362-7211

M25 606A Rheumatology  
Richard D. Brasington, Jr., MD, 454-7279

**Third Year**

Clinical Clerkship (Third) Year is a 48-week academic year.

**Course No./Course Title**

**Required Clerkships:**
M95 790 Integrated Surgical Disciplines Clerkship (12 weeks)
John Kirby, MD, 362-8029

M25 710 Medicine Clerkship (12 weeks)
Thomas M. De Fer, MD, 362-8050

M35 720 Neurology Clerkship (4 weeks)
Robert Naismith, MD, 362-3998

M45 730 Obstetrics/Gynecology Clerkship (6 weeks)
Tammy Sonn, MD, 362-3126

M65 760 Pediatrics Clerkship (6 weeks)
Michele Marie Estabrook, MD, 454-6299
Colleen Wallace, MD, 454-6299

M25 707 The Practice of Medicine III
Greg Polites, MD, 286-2546
Megan E. Wren, MD, 362-8050

M85 770 Psychiatry Clerkship (4 weeks)
Fay Y. Womer, MD, 362-2469

Selective Clerkships: (choice of one block)

M25 714 Ambulatory: Emergency Medicine Clerkship (4 weeks)
Mark Levine, MD, 362-6743

M26 713 Ambulatory: Family Medicine Clerkship (4 weeks)
Heather Fell Sateia, MD, 747-0279

M85 771 Ambulatory: Psychiatry for Generalists Clerkship (4 weeks)
Fay Y. Womer, MD, 362-2469

M90 701 General Radiology Clerkship (4 weeks)
Matthew Parsons, MD, 362-5950
Michele Miller-Thomas, MD, 362-5950

M25 740 Dermatology Clerkship (4 weeks)
Lynn Cornelius, MD, 454-8622

M25 750 Geriatrics Clerkship (4 weeks)
David B. Carr, MD, 286-2706

M60 702 Laboratory Medicine Clerkship (4 weeks)
Charles S. Eby, MD, 362-3186

M25 730 Physical Medicine and Rehabilitation Clerkship (4 weeks)
Neringa Juknis, MD, 454-7757

M90 740 Radiation Oncology Clerkship (4 weeks)
Joseph R. Simpson, MD, PhD, 362-8567

M65 750 Surgical Pathology Clerkship (4 weeks)
Samir El-Mofty, MD, 362-2681
Fourth Year

Elective (Fourth) Year is a 44-week academic year.

To qualify for the Doctor of Medicine degree at Washington University School of Medicine, fourth-year students are required to participate in a minimum of 36 weeks of electives (full-time clinical or research courses). Two-thirds of the minimum required time for the elective year must be taken exclusively in residence in the Washington University School of Medicine elective course program. A complete listing of fourth-year elective offerings at Washington University School of Medicine is available through the Office of the Associate Dean for Medical Student Education. Students may participate in clinical electives of four weeks duration. If a student takes a research elective, that elective must be of at least six weeks duration.

A maximum of 12 weeks of credit is allowed for full-time elective coursework taken at other academic institutions. These may be clinical or research electives. Students desiring credit for work to be done at other institutions must petition the Associate Dean for Medical Student Education. Absolutely no credit will be granted for electives undertaken prior to approval from the appropriate administrative committees.

Credit may be given for elective work done at any point in the standard four-year Doctor of Medicine degree program as long as participation conforms to current elective guidelines, and a) the student is a duly registered, full-time student for a minimum of three years and nine months, including scheduled vacation time, and tuition is paid for four complete academic years; or b) if transferring into the third-year class, the student is a duly registered, full-time student for a minimum of 22 months and tuition is paid for two complete academic years.

Students are encouraged to take lecture-seminar elective courses, but such offerings are optional. Clock hours for the year total 1,386 (36 weeks). Remuneration for work done while participating in electives for credit is prohibited.

Liability Insurance

Washington University provides general liability insurance for all students or practicums while participating in required clinical experiences. In addition, Washington University voluntarily provides a defense and indemnification benefit for matriculated students who are candidates for the MD degree at the School of Medicine (WUSM).

The benefit is provided to WUSM students for defense and indemnification of claims arising out of activities which are part of academic programs and only while a student is acting in his or her capacity as a medical student enrolled in the undergraduate medical program at the School of Medicine. This policy is subject to terms, conditions, limitations and exclusions, and each request for defense/indemnification will be decided on a case-by-case basis at the sole discretion of the university.

Defense/indemnification will not be provided for any criminal acts, acts committed while under the influence, acts in violation of law, or where the injury or damage resulted from intentional malicious conduct or wrongdoing, or in the event that the action or proceeding is brought by or on behalf of Washington University. This indemnification does not cover any liability which is insured elsewhere, but it may be in excess of any amount payable under any other such insurance.

Any incident, either actual or alleged involving patient injury which could lead to a claim, which you have knowledge of must be reported immediately to the Risk Management Office of the School of Medicine, (314) 362-6956.
If you have any questions about Washington University's professional liability program, please feel free to call the Risk Management Office.

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Lectureships and Visiting Professorships

Several established lectureships enable the School to bring to the Medical Center each year distinguished guests who contribute significantly to the richness of student life.

**Ben T. Abelson Memorial Lectureship in Pediatric Hematology-Oncology.** Established by Mrs. Ben T. (Ann) Abelson, the first lecture was held on January 8, 1988.

**Harry Alexander Visiting Professorship.** Established in 1964 by former house staff and friends of Dr. Harry Alexander to provide an annual visiting professor in the Department of Medicine.

**Alpha Omega Alpha Lectureship.** Given each year by a faculty member of the students’ selection.

**Daniel R. Biello Memorial Lectureship.** Established in 1986 by friends, students and colleagues of Dr. Daniel R. Biello to provide an annual lectureship devoted to advances in radiology and nuclear medicine.

**George H. Bishop Lectureship.** Supported by funds made available by friends interested in the advancement of neurology.

**Daniel Bisno, MD, Memorial Lecture on Ethics in Ophthalmology.** Established in 2001 by David C. Bisno, MD, in memory of his father.

**Estelle Brodman Lectureship Fund.** Established in 1981 by friends and colleagues of Dr. Brodman in honor of her distinguished contributions to the School of Medicine.

**The James Barrett Brown Visiting Professorship in Plastic and Reconstructive Surgery.** Created in 1969 by patients, friends, colleagues and former students to honor Dr. Brown.


**H. Marvin Camel Lectureship.** Established in 1999 by family, friends and colleagues to honor Dr. H. Marvin Camel’s retirement.

**Glover H. Copher Lectureship in Cancer.** Founded in 1971 with endowment provided by Dr. Copher and friends.

**The Carl F. and Gerty T. Cori Visiting Professorship.** Established in 1985 in honor of Nobel Laureates Carl and Gerty Cori by the Edward Mallinckrodt, Jr. Foundation, colleagues, faculty and former students.

**Philip R. Dodge Lectureship.** Established in 1987 by friends and colleagues to provide an annual lectureship in the Department of Pediatrics.

**Professor and Dean Jay M. Enoch and Rebekah Enoch Endowed Lecture on Vision Science in Ophthalmology.** Established in 2005 in gratitude to Dr. Bernard Becker. The lecture is meant to keep faculty abreast of new and emerging developments in Ophthalmology.

**Joseph Erlanger Lectureship.** Established in 1989 by the Department of Cell Biology and Physiology to honor Dr. Erlanger.
I. Jerome Flance Visiting Professorship. Established in 1977 by former students and friends of Dr. Flance to provide annually a visiting professor in the Division of Pulmonary Diseases.

Julia Hudson Freund Lecture in Oncology. Established in 1982 by S.E. Freund in memory of his wife to provide a visiting lectureship in clinical oncology in the Division of Oncology. This was endowed in 2002 by the Harry and Flora D. Freund Memorial Foundation.

Harvey A. and Dorismae Hacker Friedman Lecture on Aging. Established in 2001 to honor the Friedmans for their instrumental role in helping to create the Center for Aging and for their ongoing leadership and support.

Edwin F. Gildea, Jr. Lectureship in Psychiatry. Established in 1978 by friends, colleagues and former students of Dr. Gildea.

Joseph J. Gitt Visiting Professorship in Clinical Neurology. Established in 1971 by his family and friends to honor Dr. Gitt.

Graham Colloquium. A gift from Mr. and Mrs. Evarts Graham, Jr., in 1963 to encourage opportunities for students to expand their views on social, philosophical, artistic and political topics.

The Evarts A. Graham Lecture. Established in 1985 by the Washington University Alumni of the Phi Beta Pi medical fraternity to honor the memory of Dr. Evarts A. Graham.

Samuel B. Guze Lectureship. Established in 1990 by friends and colleagues to honor Dr. Guze.

Carl Gayler Harford Lectureship. Established in 1977 by the family of one of Dr. Harford’s patients in gratitude for his contributions to teaching clinical medicine and virology.

Alexis F. Hartmann, Sr. Lectureship. Established in 1960 by friends interested in pediatrics to provide an annual lecture in Dr. Hartmann’s honor.

Alex H. Kaplan Visiting Professorship/Lectureship. Established in 1986 by Dr. and Mrs. Alex H. Kaplan to support a visiting psychoanalyst.

Michael and Irene Karl Lectureship in General Internal Medicine. Created in 1983 by Mr. and Mrs. Meyer Kopolow to provide an annual lectureship in honor of Drs. Michael and Irene Karl.


Charles Kilo, MD Lectureship in Internal Medicine. Established in 1998 by Mrs. Ola H. Blodgett to pay tribute to the expert and compassionate care provided by Dr. Charles Kilo.

David M. Kipnis Lectureship in Molecular Biology and Pharmacology. Established in 1998 to provide an annual lecture in honor of Dr. Kipnis.


Stanley J. Korsmeyer Memorial Lecture. Established by colleagues, family and friends in 2005 in memory of Dr. Stanley J. Korsmeyer, a renowned cancer cell researcher and former Washington University School of Medicine faculty member.

Kroc Visiting Lectureship Program. Established in 1985 by The Kroc Foundation in honor of Ray A.
and Robert L. Kroc.

**Paul E. Lacy Lectureship in Pathology.** Established in 1987 by The Kilo Diabetes and Vascular Research Foundation in honor of Dr. Lacy’s many contributions to pathology and diabetes research, and to recognize his collaboration over the years with the co-founders of The Kilo Foundation.

**William M. Landau Lectureship.** This lectureship was established in 1995 by friends, family and colleagues of Dr. Landau.

**Irwin Levy Memorial Fund.** Supports the Dr. Irwin Levy Visiting Lectureship in Neurology, which was established in 1978 by Mr. and Mrs. Meyer Kopolow.

**Oliver H. Lowry Lectureship.** Established in 1978 by friends, colleagues and former students of Dr. Lowry.

**H. Relton McCarroll, Sr. Visiting Professorship in Orthopaedic Surgery.** Created in 1972 by patients, friends and former students in honor of Dr. McCarroll.

**Edward Massie Lectureship in Cardiovascular Disease.** Established in 1981 by Edward J. Simon, MD, Bernard Shanker and other grateful colleagues and patients.

**G. Leland Melson II Lectureship.** Established in 1993 in memory of Dr. Melson by his friends and colleagues.

**J. Neal and Lois Middelkamp Lectureship.** Established in 2001 by Dr. J. Neal and Lois Middelkamp to support a pediatric lectureship in infectious diseases and advances in pediatric education for medical students, residents and pediatricians, all life-long interests of Dr. Middelkamp.

**The Dr. and Mrs. William B. Mill, Jr. Lectureship.** Established in 2001 in the Department of Radiation Oncology by Dr. and Mrs. William B. Mill, Jr. This was given in recognition of the career accomplishments of Carlos A. Perez, MD, and the impact he had on the professional development of Dr. Mill.

**Carl V. Moore Lectureship.** Established in 1973 by friends and patients of Dr. Carl V. Moore.

**Carl A. Moyer Visiting Professorship of Surgery.** Established in 1978 by The Harry Freund Memorial Foundation to support an annual lecture in honor of Dr. Moyer’s contribution to surgery.

**National Kidney Foundation — Saulo Klahr, MD Lectureship.** Established in 1991 by the Kidney Foundation to honor Dr. Klahr, past president of the National Kidney Foundation and the John E. and Adaline Simon Professor and Vice Chair of the Department of Medicine at Washington University.

**Joseph H. Ogura Lectureship.** Established in 1977 by friends and colleagues of Dr. Ogura as a tribute to his numerous scientific accomplishments and contributions to the School of Medicine and graduate medical education, and his commitment to patient care.

**Carlos A. Perez Endowed Lectureship in Oncology.** Established in 2002 in the Department of Radiation Oncology by Dr. Perez’s friends, colleagues and current and former trainees in grateful recognition for his inspiration, guidance and leadership.

**Dr. Roy H. Petrie Lectureship.** Established in 2000 with gifts from various donors in memory of Roy H. Petrie, MD.

**Rose and Samuel Pollock Surgical Lectureship.** Established in 1976 by Dr. Joseph H. Pollock in memory of his parents.

**The Probststein Oncology Lectureship.** Established in 1985 by Mr. and Mrs. Norman K. Probststein in appreciation of professional services provided by William Fair, MD, former head of the urology division of the Department of Surgery, and Carlos Perez, MD, professor emeritus of radiology and head of radiation oncology at the medical center’s Mallinckrodt Institute of Radiology.
James A. Purdy Endowed Lectureship. Established by Elekta Oncology Systems, Ltd. in 2002 to honor Dr. James Purdy for his contributions to the field of Radiation Oncology.

Eli Robins Lectureship in Psychiatry. Established in 1977 by friends, colleagues and former students of Dr. Robins.

Peggy Sansone Memorial Lectureship. Created in 2002 by Anthony F. Sansone, Jr. and the Peggy Sansone Special Angel Foundation to promote the exchange of ideas and scientific information on the topic of depression and the role of spirituality in personality development, happiness and mental health. The lecture is a memorial to Mr. Sansone’s wife, Peggy Sansone.

Julio V. Santiago Leadership. Established in 1999 by the Department of Pediatrics as a lasting tribute to Julio V. Santiago, MD, for his long-standing contributions to the areas of diabetes, endocrinology and metabolism.

The Rena Schechter Memorial Lectureship in Cancer Research in the Department of Medicine. Established in 1996 by Dr. Samuel E. Schechter to create a lectureship in cancer research in memory of his wife, Rena Schechter.

Dr. Alexander and Helena Schonfeld Lectureship. This lectureship was established in 1994 by Mrs. Helena Schonfeld, in honor of her son, Gustav Schonfeld, Professor of Medicine at Washington University School of Medicine.

Henry G. Schwartz Lectureship. Created in 1983 by former residents and colleagues from the neurosurgery department to honor Dr. Schwartz.

Wendell G. Scott Memorial Lectureship. Established in 1972 by friends and colleagues of Dr. Wendell G. Scott.

Major G. Seelig Lectureship. Established in 1948 in the field of surgery by friends of Dr. and Mrs. Seelig.

Philip A. Shaffer Lectureship. Founded in 1957 by friends of Dr. Shaffer in recognition of his accomplishments in biochemistry.

Earl E. and Wilma Shephard Orthopaedics/Otolaryngology Memorial Lecture. Established in 1994 through a bequest by Dr. and Mrs. Shephard.

Frank O. Shobe Lectureship. Established in 1986 by friends of Dr. Shobe to honor him as a physician and teacher.

Donald C. Shreffler Genetic Lectureship. Established in 1995 by Mrs. Donald C. Shreffler as a memorial to her husband.

Eduardo Slatopolsky Lectureship. Established in 1988 by Mr. and Mrs. William Wolff in honor of Dr. Slatopolsky’s 25-year association with the School.

Carl and Sue Smith Lecture in Pediatrics. Established in 2007 by Dr. Carl Smith, School of Medicine Professor of Pediatrics, with a focus on pediatric lab medicine.

C.R. Stephen, MD, FFARCS, Fund for Lecture and Clinical Research in Anesthesiology. Established in 1986 by former students, residents, faculty and friends in honor of Dr. Stephen, first Head of the Department of Anesthesiology.

Sterling Drug Visiting Professorship in Pharmacology. Established in 1986 to honor Ernst Zander, MD, former medical director of Sterling Drug, Inc.

Arthur W. Stickle Lectureship in Pediatric Ophthalmology. Established by Arthur and Emily Stickle
in 1995 with their generous gift in recognition of Dr. Stickle's medical training in the Department of Ophthalmology and Visual Sciences and his special professional contribution to the field of pediatric ophthalmology.

**Strunk Family Lectureship in Asthma.** Established in 2005 by Dr. Robert C. Strunk and his family to provide lectures in the area of pediatric asthma.

**The Richard A. and Betty H. Sutter Visiting Professorship in Occupational and Industrial Medicine.** Established in 1985 by Dr. and Mrs. Sutter to encourage opportunities for students, faculty, other physicians and the St. Louis community to expand the understanding and practice of occupational medicine.

**Jessie L. Ternberg Pediatric Surgery Visiting Lectureship.** Made possible from a fund established in 1977 by Mr. Meyer Kopolow to honor Dr. Ternberg.

**Robert J. Terry Lectureship (1939) and Visiting Professorship (1982).** Established by alumni and Charles S. Terry, his son, respectively, "for the purpose of fostering greater appreciation of the study of anatomy."

**Donald L. Thurston Memorial Lectureship.** Established in 1988 by his wife, Dr. Jean Holowach Thurston, and his colleagues and friends, the lectureship is devoted to the history of biomedical advances.

**Leonard J. Tolmach Lectureship.** Established in 1995, this lectureship was endowed by friends and colleagues to honor the legacy of Dr. Tolmach. The lecture theme is radiation biology in clinical radiation oncology.

**Mildred Trotter Lectureship.** Established in 1975 by friends and former students of Mildred Trotter to bring a distinguished woman scientist to the School of Medicine each year.

**Rudolph A. Tuteur Pulmonary Lectureship.** This lectureship is endowed by family, friends, patients and colleagues of the Tuteur family to memorialize Rudolph A. Tuteur. The goal of this annual fall event is to promote further understanding of problems associated with chronic pulmonary disease from which he suffered.

**Dr. Todd Wasserman Visiting Lectureship in Radiation Oncology.** Established in 2004 by Dr. Wasserman and funded by MedImmune, Inc. and friends and colleagues of Dr. Wasserman.

**Course Evaluations**

Systematic course evaluation is performed for each year of the curriculum by faculty peers, teaching faculty and students. This system permits problem identification, ensures timeliness of feedback, promotes discussion of new teaching methodologies, allows curriculum inventory, recommends changes in course offerings and provides better integration of the curriculum. These reviews are guided through a Curriculum Evaluation Committee (CEC) process for each of the preclinical years of instruction (i.e., CEC I = first year; CEC II = second year), and another CEC to evaluate both clinical years of instruction (i.e., CEC III = third and fourth years).

The Office of Medical Student Education (OMSE) oversees the course evaluation system, which is coordinated by Heather Hageman in OMSE, (314) 362-5433. The collected data are forwarded to the respective coursemasters, the Committee on Medical Education and the Academic Affairs Committee.
Adviser System

Student academic advising occurs within two broad programs.

1. Advisers: First year students select faculty advisors from a listing of volunteer faculty from their same academic society from both basic science and clinical faculty. Faculty meet and discuss with their group career paths and how to select among them. Many students particularly in first and second year, are interested in opportunities for clinical shadowing. Faculty meet with students 3-4 times a year as a group, but welcome more contact from students individually. These meetings are usually social and off-campus.

2. Career (fourth-year) Advisers: Each third-year student selects a fourth-year adviser from a list of potential faculty advisers. In most cases, the adviser is a faculty member in the field in which the student will be seeking a residency appointment. The career advisers have responsibility for reviewing the student’s choice for fourth-year electives and making appropriate recommendations for the structure and content of the elective year. In addition, fourth-year advisers serve as valuable resources for information about residency programs.

In addition to the advising programs described, students seek informal advising from faculty with whom they have had contact, either through classroom work, research or clerkships. Students also have faculty contact through membership in the academic societies.

Degree Programs

Washington University School of Medicine offers several programs and combined degree programs: a regular four-year MD program, a five-year MD program, the combined MD/MA program, the combined MD/MSCI program and the combined MD/PhD program. MD students may also elect to complete the MPH degree while enrolled in the MD program.

Doctor of Medicine (four-year program)
Doctor of Medicine (five-year program)
Doctor of Medicine and Master of Arts MAMD
Doctor of Medicine and Master of Science in Clinical Investigation
Doctor of Medicine and Doctor of Philosophy
Master of Population Health Sciences

The Washington University Graduate School of Arts & Sciences awards a doctoral degree offered by the Division of Biology and Biomedical Sciences.

Doctor of Philosophy
**Doctor of Medicine**

By conferring the MD degree, the University certifies that the student is competent to undertake a career as a doctor of medicine. It certifies further that, in addition to medical knowledge and skills, the graduate possesses qualities of personality — compassion, emotional stability and a responsible attitude — essential to an effective professional life.

**Four-Year Program**

A course of medical education for the MD degree ordinarily consists of a minimum of four years of study. Students recommended for the Doctor of Medicine degree must be of good moral character, they must have completed an entire academic course of instruction as matriculated medical students, they must have passed all required subjects or the equivalent and have received satisfactory grades in the work of the full academic course, and they must have discharged all current indebtedness to the University. The School requires that students planning to practice clinical medicine take the USMLE Step 1 and Step 2 examinations. All students must take and pass the School's Comprehensive Clinical Examination (CCX) prior to graduation.

At the end of the final academic year, students who have fulfilled these requirements will be eligible for the MD degree.

**Five-Year Program**

In addition to the regular four-year program leading to the MD degree and the MD/MA degree program, students are permitted to spend one additional year in an academic program in a medical or medically related field. In exceptional circumstances, a further additional year may be permitted. The student may receive a stipend but may not be considered an employee of the University. The program must be arranged with an academic adviser and is subject to the approval of the Associate Dean for Student Affairs. The **Student Research Opportunities** brochure provides additional important information about participating in this program. Students enrolled in the five-year program must maintain coverage through Student Health while in St. Louis.

**Doctor of Medicine and Master of Arts**

The objective of the MD/MA program is to provide one full year of individual, full-time, in-depth research experience for medical students in preparation for a career in academic medicine. Program participants absent themselves from medical school and spend 12 months working on basic biomedical research or hypothesis-driven clinical research in the lab of a faculty member. Degree requirements include a presentation before a research advisory committee, submission of a publication-quality manuscript and participation in a research ethics seminar.

No academic credit toward the MD degree will be given, but research may be continued as senior elective for credit. Fellowship stipends and other support are available through the Howard Hughes Medical Institute (basic science research), Doris Duke Foundation (clinical research), National Institute of Diabetes and Digestive and Kidney Diseases (GI, hepatology, endocrinology, nutrition, nephrology and hematology research), and the Clinical Research Training Center – Predoctoral Program (clinical research). Students unable to qualify for one of these awards may also apply for support from the dean of the medical school. Funding amounts may vary, and some of these sources have deadlines in early January. Please contact the MD/MA program administrator at (314) 362-7190 or visit the website at [http://mamd.wustl.edu](http://mamd.wustl.edu) for details.
**Doctor of Medicine and Master of Science in Clinical Investigation**

Since 2006, the School of Medicine has offered a Master of Science in Clinical Investigation (MSCI) to young investigators committed to pursuing academic careers in clinical research. The MSCI program provides high-quality, multidisciplinary courses, mentorship and research training. The MSCI is available to postdoctoral scholars, junior faculty, and predoctoral students. Postdoctoral scholars and junior faculty must be within the medicine and allied health professions, conducting clinical research at Washington University or with an affiliated program. Predoctoral students in Medicine, Psychology, Biology & Biomedical Sciences, Social Work, Audiology, Physical Therapy, Occupational Therapy, and related disciplines in the Graduate School of Arts & Sciences who have completed or are enrolled in the intensive Predoctoral Interdisciplinary Clinical Research Training Program are also eligible. For further information, email Jill Little at jlittle@dom.wustl.edu or visit http://crtc.wustl.edu. As the MSCI requirements are rigorous and are performed in addition to the doctoral degree requirements, interested students should contact the program coordinator or director before beginning their structured clinical research training program to ensure that the additional training meets the needs of the individual student, and that all requirements can be completed.

**Doctor of Medicine and Doctor of Philosophy**

Washington University offers a combined MD/PhD degree program that uses the resources of the Graduate School of Arts & Sciences, the School of Engineering and the School of Medicine under the auspices of the Medical Scientist Training Program (MSTP). The purpose of the program is to train individuals in medicine and biomedical research to prepare them for careers as physician scientists. The program was inaugurated in 1969 and is one of the oldest and largest in the country. The program, normally completed in seven years, has been highly successful; more than 80 percent of those who have completed postgraduate training are actively involved in research programs at leading institutions.

All students in the program receive financial support in the form of stipends (currently $28,000 per year), health coverage, disability and life insurance, and full tuition remission for both the MD and PhD phases of training.

Only students who have spent the equivalent of at least two semesters in laboratory research should apply to the Medical Scientist Training Program. Applicants must meet the requirements for admission to both the School of Medicine and the graduate program of their choice. The Graduate Record Examination is not required. Students planning to concentrate in disciplines related to the chemical or physical sciences should have completed mathematics through calculus, physics and physical chemistry, and advanced organic chemistry. A course in differential equations also is recommended. For those students whose major interests are in the more biological aspects of medical science, the quantitative requirements for chemistry are less extensive, but a strong background in mathematics, chemistry and physics is still important. Although most individuals enter the program as first-year students, applications will be accepted from students in their first or second year at this medical school. The program matriculates approximately 25 new students each year, which represents one-fifth of the entering medical school class.

The program consists of three parts: 1) two years of an enhanced medical curriculum, 2) at least three years of original research toward a thesis to satisfy the requirements for the PhD degree, and 3) at least 15 months of clinical training based on a student’s career goals. Both degrees are awarded concurrently at the completion of the program.

While the Medical Scientist Training Program includes all medical courses required for the MD degree, it incorporates a high degree of flexibility for individuals through a wide range of electives and graduate courses, some of which may be taken during the first year of the medical curriculum. Every effort is made
to individualize each student’s curriculum based on previous background and current interests. The medical and PhD curricula are integrated, which permits students to take PhD course work in lieu of certain medical school course work. In this way, students may substantially meet the course work requirements of the PhD program during the first two medical school years.

The MSTP Committee monitors the performance of each student, and a high scholastic standing as well as a commitment to research is expected.

Students normally spend between three and five years in the Graduate School of Arts & Sciences or the School of Engineering satisfying the following requirements:

1) Completion of required graduate course work;
2) Successful performance in qualifying examinations;
3) Execution of original research suitable for a dissertation;
4) Defense of the thesis; and
5) Completion of a one-semester teaching assistantship.

The PhD degree may be obtained in the Program in Biomedical Engineering, the Division of Biology and Biomedical Sciences or in other research-oriented departments such as Anthropology or Physics. The largest contingent of MSTP students is trained under the auspices of the Division of Biology and Biomedical Sciences. The division, now in its 39th year, is a leader in interdisciplinary biomedical education. Member departments of the division include all clinical and preclinical departments of the medical school, as well as the Departments of Biology and Chemistry. These departments jointly provide training in the following interdisciplinary programs:

Biochemistry
Computational and Systems Biology
Developmental, Regenerative and Stem Cell Biology
Evolution, Ecology and Population Biology
Human and Statistical Genetics
Immunology
Molecular Biophysics
Molecular Cell Biology
Molecular Genetics and Genomics
Molecular Microbiology and Microbial Pathogenesis
Neurosciences
Plant Biology

The MSTP also permits students to undertake doctoral studies in other disciplines, provided that the resulting thesis is a rigorous, hypothesis-based body of work that is medically relevant.

A series of weekly seminars featuring physician scientists is held for MD/PhD students. These seminars are aimed at stimulating student interest in clinical medicine, increasing awareness of major research problems in clinical medicine and exposing students to diverse career paths in academic medicine.

MD/PhD students attend an annual weekend retreat during which students present their research. The retreat also features discussions led by experts on topics selected by students.

To keep students in the PhD phase of training up to date on their clinical skills, monthly opportunities are offered for clinical interactions. Students are matched individually with a clinical mentor in the specialty of their choice. These interactions include going on rounds and attending conferences.

A special two-week non-graded tutorial for MD/PhD students facilitates their transition into the clinical phase of training.

MSTP students are required to complete a minimum of 15 months of clinical training. Opportunities exist to meet part of the requirement while engaged in PhD training. Students may opt to extend clinical training up to 22 months. The intensive clinical training is the last formal requirement for the MD degree. Both the PhD and MD degrees will be granted at the conclusion of clinical training.
Application Procedure: Individuals interested in applying to the Medical Scientist Training Program must complete the MD-PhD section on the AMCAS and the Washington University School of Medicine secondary application. The MSTP requires letters of recommendation from the research mentor(s) of all applicants.

Individuals wishing additional information about the program may contact:

Medical Scientist Training Program
Washington University School of Medicine
Campus Box 8226
660 S. Euclid Ave.
St. Louis, MO 63110-1093
(800) 852-4625
http://www.mstp.wustl.edu

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**Master of Population Health Sciences**

The Master of Population Health Sciences (MPHS), offered by the School of Medicine, is designed as a 10-month, full-time degree program for clinicians, clinical doctorates and medical students seeking training in clinical research methods. Part-time study is also available. Its quantitative curriculum emphasizes the role of epidemiology and biostatistics in approaching clinical effectiveness and outcomes research. The MPHS does not require a research thesis/capstone. Instead, the program uses applied course work to focus on the long-term application of skills. Using topics relevant to their careers and interests, the applied course work allows MPHS students to practice the art of developing research study protocols, performing systematic reviews, designing epidemiologic studies and much more. MPHS students deepen their learning by choosing one of four concentrations: Clinical Epidemiology, Health Services, Quantitative Methods or Psychiatric and Behavioral Health Sciences. For more information, visit http://www.mphs.wustl.edu.

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**Doctor of Philosophy**

The Division of Biology and Biomedical Sciences offers doctoral programs in Biochemistry, Computational and Systems Biology, Developmental, Regenerative, and Stem Cell Biology, Evolution, Ecology and Population Biology, Human and Statistical Genetics, Immunology, Molecular Biophysics, Molecular Cell Biology, Molecular Genetics and Genomics, Molecular Microbiology and Microbial Pathogenesis, Neurosciences, and Plant Biology. These educational activities are organized on an interdepartmental basis by the faculty of all clinical and preclinical departments of the School of Medicine, as well as the departments of Biology and Chemistry in the School of Arts & Sciences. All degrees are awarded through the Washington University Graduate School of Arts & Sciences. Additional information about division programs may be obtained by contacting:

Graduate Studies Office
Washington University School of Medicine
Campus Box 8226
660 S. Euclid Ave.
St. Louis, MO 63110-1093
(800) 852-9074
Applying for Admission

For updated information, check our Admissions home page: http://medadmissions.wustl.edu/.

Admission Requirements for the Study of Medicine

Policy for International Students

Application Procedure

Background Checks and Screening for Controlled Substances

Full-Tuition Scholarships

Third-Year Class Transfer Program

Admission Requirements for the Study of Medicine

Entrance requirements to the School of Medicine include:

1. Evidence of superior intellectual ability and scholastic achievement;
2. Completion of at least 90 semester hours of college courses in an approved college or university;
3. Completion of the Medical College Admission Test of the Association of American Medical Colleges; and
4. Evidence of character and integrity, a caring and compassionate attitude, scientific and humanitarian interests, effective communication skills, and motivation suitable for a career in medicine.

Chemistry, physics and mathematics provide the tools for modern biology, for medicine and for the biological basis of patient care. Thus, a firm grounding in these subjects is essential for the study of medical sciences. Entering students are expected to have accomplished at least the equivalent of one-year courses at the undergraduate level in physics and biology; mathematics through calculus, including integral equations and differential equations; and chemistry, including one year of general or inorganic chemistry and one year of organic chemistry. Course work in biochemistry is encouraged although not required. In addition one semester of biochemistry can be substituted for one semester of organic chemistry. Similarly, one semester of statistics can be substituted for one semester of calculus. In selected instances, one or more of these prerequisites may be waived by the Committee on Admissions, but applicants are strongly advised to pursue their interests in these and in other areas of science.

A major goal of undergraduate college work should be development of the intellectual talents of the individual. This often involves the pursuit of some area of knowledge in-depth, whether in the humanities, social sciences or natural sciences. At the same time, a diversity of background is encouraged in order to provide a necessary foundation for the development of cultural awareness, sensitivity and competence. Specific courses, other than the few in the natural sciences, are not prerequisites because a great variety of courses and life experiences may prepare students for the many roles they may play in their medical careers.
Policy for International Students

The admission decision at Washington University School of Medicine is based on academic and personal merit and not on the ability of the student to pay the costs of education. However, individuals who are not citizens of the United States of America or who do not hold U.S. Permanent Resident Visa status are not eligible for financial aid due to regulations covering many programs used by the School to fund financial assistance. Therefore, in order for the School to complete the required documents which are necessary for issuance of a visa, the student must document, by a date and in a manner designated by the School, that the necessary amount of funds, as established by the School, is available to pay the costs of education (tuition and living expenses) for the anticipated period of enrollment, normally four years. Documentation of the required amount of financial resources may be by a letter of credit or by deposit of funds in an escrow account with a bank designated by the School.

Application Procedure

General information for prospective medical students and how to apply can be found at http://medschool.wustl.edu/admissions http://medadmissions.wustl.edu.

Washington University School of Medicine participates in the American Medical College Application Service (AMCAS) of the Association of American Medical Colleges. AMCAS provides a centralized system for applying to any participating medical school with only one application and one set of official transcripts of academic work.

The AMCAS Application for Admission, common to all participating medical schools, is available online at https://www.aamc.org/students/applying/. Applicants are urged to file their applications as early as possible.

Applicants to the first-year class must submit their AMCAS application no later than December 1 of the year prior to that in which they want to matriculate. On receipt of the application from AMCAS, the Office of Admissions contacts the applicant regarding the additional steps to be taken to complete the application. These include completing a supplemental application via the Internet at http://wumsapply.wustl.edu, submission of letters of recommendation and payment of a nonrefundable Application Service Fee of $65. These materials must be received no later than December 31. Applicants can check the status of their application via the Internet at the http://wumsapply.wustl.edu web site. Once the application is complete, the Committee on Admissions evaluates it.

Selected applicants are invited for a personal interview, as well as a tour of the School of Medicine and the Washington University Medical Center. This visit provides extensive opportunities for the applicant to meet and talk with students and faculty members.

If an applicant is planning a trip to the St. Louis area, it is appropriate to contact us by e-mail (wumscoa@wustl.edu) to inquire if an interview has been authorized. The inquiry should be submitted at least three weeks in advance of the anticipated travel. The Office of Admissions is open weekdays from 8:30 a.m. to 5 p.m. Central Time.

Admission decisions are made by the Committee on Admissions on a rolling schedule beginning October 15. Applicants are notified as soon as a final decision has been made on their application, but by April 15, every applicant should be notified whether he or she is accepted, on the waiting list or not accepted.

Upon notification of acceptance for admission to the School, the applicant is required to file a Statement of Intent to Matriculate within two weeks. Three options are presented: 1) accept the offer of admission and submit the $100 acceptance deposit; 2) accept the offer of admission, submit the $100 deposit and
request financial aid materials; or 3) decline the offer of admission. The $100 acceptance deposit reserves a place in the class and is applied to the tuition charge at the time of matriculation. If an accepted applicant withdraws from the class with written or e-mail notification to the Admissions Office prior to May 15, the deposit is refunded. The School of Medicine abides by the traffic rules regarding application timelines as established by AMCAS. Accepted applicants who are non-compliant with AMCAS traffic rules and medical school deadlines may have their acceptance into the class rescinded.

Background Checks and Screening for Controlled Substances

Students entering the School of Medicine who will have contact with patients are required to have criminal background checks and screening for controlled substances (THC-cannabis, cocaine, opiate, amphetamine, PCP-phencyclidine) in order to qualify for participation in patient care activities at Washington University School of Medicine-affiliated facilities. Drug screening usually will be conducted during student orientation prior to the start of classes. Incoming, prematriculant students, or visiting students will be disqualified to study at the School of Medicine if they do not consent to background checks, if they have significant positive findings on the background checks, or if they have illicit substances detected on drug screening without a bona fide medical indication. Disqualified prematriculant students and disqualified visiting students will be precluded from matriculation and will not be registered as students in the School of Medicine.

In addition, no final action will be taken on an application until the Admissions Committee has received satisfactory statement(s) [“Dean’s Certification” form(s)] from each college or university at which the applicant has completed a program of study. The certification form(s) inquire whether the applicant was subject to disciplinary charges or actions and must be completed by institutional official(s) with access to the applicant’s disciplinary records. The certification inquires about past, current, pending or future disciplinary charges or actions.

Full-Tuition Scholarships

Please see Financial Information/Financial Assistance section.

Third-Year Class Transfer Program

Each year, Washington University School of Medicine accepts a limited number of transfer students into its third-year class depending on the availability of positions. Transfer applications are accepted from well-qualified second-year students who are enrolled in good standing and eligible to continue in their LCME-accredited U.S. medical schools. Applicants must also have a compelling personal reason for requesting transfer and must have the full approval of the dean of their current school. Accepted students are required to successfully complete the USMLE Step 1 examination.

Transfer application forms for admittance into the third-year class are available after October 1 for the following academic year. The deadline for submission of applications is March 31. Those applicants selected for interview will be invited to visit the Washington University Medical Center. Applicants will be notified of the decision of the Committee on Admissions by May 15 or when a position becomes available. Inquiries should be directed to:
Financial Information

Cost of Education

Financial Assistance

Cost of Education

For the first-year class matriculant, tuition and estimated expenses for the 2012-13 academic year are listed below. Students who enter in 2012 will benefit from a tuition stabilization plan, which provides that their annual tuition of $52,020 will be constant for up to five consecutive years. The stabilized rate will expire five academic years after matriculation. Therefore, students whose medical education is interrupted for any reason for more than one year will be charged the rate of the class they rejoin. Appeals of this policy should be submitted in writing to the registrar. The items listed below provide an estimate of the expenses for a single student in the 38-week first-year class. The total of these figures suggests a basic minimum budget of approximately $69,373. Allowances for entertainment, travel, clothing and other miscellaneous items must be added to this estimate.

Tuition (includes Student Health Service and Microscope Lending Plan): $52,020
Books, supplies and instruments: $1,606
Housing and food: $11,385
Travel and personal: $4,362

Student Health Service

The Student Health Service provides comprehensive health care, including hospitalization, for all full-time students in the School of Medicine upon completion of orientation. All full-time students are covered in the prepaid dental plan through Assurant Employee Benefits. Dental premium paid for by WUSM Student Health Service. Long-term group disability insurance is provided for medical students. All full-time students in the School of Medicine are covered by a $10,000 life insurance benefit, with the option to convert to an individual portable policy prior to graduation.

Microscope Lending Plan

Microscopes that meet the technical requirements set by the faculty are provided at no additional charge to each student in the first- and second-year classes. The plan saves students the high cost of microscope purchase and makes available to them a superior quality instrument.

Financial Assistance

The ability to finance a medical education at Washington University does not influence the student
selection process. As all students accepted for admission have proven scholastic ability, financial assistance is awarded solely on the basis of documented financial need which cannot be met by student and family resources. Students who consider themselves financially independent of their parents must arrange for loans to replace the amount of support parents are analyzed to have the potential to contribute. The School of Medicine’s Office of Financial Aid (Box 8059) will assist students in making these arrangements.

In responding to the Admissions Committee’s offer of admission, an accepted student may request financial aid application materials. The Financial Aid Office acknowledges the student’s intent and provides instructions for completing the FAFSA. Everyone applying for financial aid must complete a Free Application for Federal Student Aid (FAFSA) and designate Washington University School of Medicine, School Code #G24620, as a recipient. Medical school financial aid application documents and detailed instructions will be made available after January 1.

The financial aid application materials solicit information about the applicant and parents, including a detailed description of resources and liabilities. If an applicant’s parents are separated or divorced, the financial information is required from both biological parents (excluding income and assets of their spouse, if remarried). If the applicant is married, similar information is required of the spouse. The School expects the applicant to complete and submit the financial aid documents within two weeks from the date the applicant receives them. Official copies of both biological parents’ individual U.S. Income Tax Returns and the applicant’s official IRS transcripts complete the data required for financial aid consideration.

While "permanent residents" of the United States are eligible for most federal financial aid programs, need-based financial aid from Washington is only awarded if the applicant and both biological parents can provide official, audited documents with the same detailed information as provided on a U.S. income tax return. All information is held in strict confidence.

Financial aid awards are credited toward payment of tuition and fees. Proceeds from loans may be disbursed directly to the borrower. The loan portion of an award will be funded through the resources of the School of Medicine or through the federal Stafford Loan program. All loans awarded by the committee are free of interest while a student is enrolled in the School. Financial aid awards are made for a given academic year. Students may reapply for financial assistance in succeeding years if they remain in good academic and personal standing, and if there is continued financial need. Awards made to a student may vary from year to year, depending upon the student’s needs and upon the availability of funds to the Committee. Students are responsible for filing applications for renewal of awards in the spring of each year.

The committee holds that students receiving assistance have an obligation to notify the committee in writing if their financial situation changes, for example, through employment or receipt of a scholarship not anticipated at the time the application was submitted.

First- and second-year students are urged not to accept employment during the academic year. A number of fourth-year students find employment in hospitals within the Medical Center. The personnel office provides assistance to students’ spouses seeking employment.

**Full-Tuition Scholarships**

In 1978, the School of Medicine established a scholarship program that based selection on merit rather than financial need. As one of the first merit scholarship programs for medical students, the Distinguished Student Scholarship Program has recognized and rewarded academic excellence and personal achievement for 31 years. And, to honor outstanding alumni of Washington University, the Medical Center Alumni Association created in 1989 the Distinguished Alumni Scholarship Program. In 1998, the Barnes-Jewish Hospital Medical Staff Association committed to funding one full-tuition, four-year scholarship to a student in each entering class. Beginning with the 2002-2003 academic year, one additional "named" scholarship was made available through the generosity of a donor.

Most merit-based scholarships are awarded to students in the first-year class and are subject to annual renewal. Recipients of these scholarships are expected to maintain academic excellence. If a scholarship
is not renewed, the student may file for financial aid from the School. For scholarship recipients who document financial need above the full-tuition scholarship, additional funds are available to provide support up to the total cost of education. Scholarship recipients may not concurrently participate in the School’s Medical Scientist Training Program, the Armed Forces Health Professions Scholarship Program, or the National Health Service Corps Scholarship Program.

Now known collectively as the Distinguished Scholars Program, its aim is to attract and enroll the most outstanding students in the School of Medicine, thus enriching the scholarly environment and broadening the scope of learning for all students. Scholarship recipients are selected on intelligence, character, personal accomplishments and goals, motivation for medicine, aptitude for science, leadership potential, communication skills and diversity of life experience. Scholarships awarded under this Program include the Barnes-Jewish Hospital Scholars, Danforth Scholars in Medicine, Distinguished Alumni Scholars (DAS), Distinguished Faculty Scholars (DFS), and Distinguished Student Scholars (DSS).

**Barnes-Jewish Hospital Medical Staff Association Scholarship**

One full-tuition, four-year scholarship will be awarded to a student in each entering class beginning in 1999. Selection of the Barnes-Jewish Hospital Medical Staff Association Scholar is the same as for the Distinguished Student Scholarship.

**Danforth Scholars in Medicine**

Named in honor of William H. and Elizabeth Gray Danforth, the chancellor and first lady of the University from 1971 to 1995, the Danforth Scholars Program is a tribute to their legacy of exemplary leadership and service.

**Distinguished Alumni Scholarships**

Up to four full-tuition scholarships are awarded annually to members of the entering first-year class. The application procedure and selection process are the same as for the Distinguished Student Scholarships. Since 1989, Distinguished Alumni Scholarships have been named in honor of:

Walter F. Benoist, MD  
Leonard Berg, MD  
Grace E. Bergner, MD  
Laura Bierut, MD  
Ellen F. Binder, MD  
Stanley J. Birge, MD  
Eugene M. Bricker, MD  
Keith H. Bridwell, MD  
Elmer B. Brown, MD  
J. William Campbell, MD  
David B. Clifford, MD  
Jennifer W. Cole, MD  
Justin J. Cordonnier, MD  
Michael Crowder, MD, PhD  
John D. Davidson, MD  
Louis P. Dehner, MD  
Robert C. Drews, MD  
Bradley Evanoff, MD, MPH  
Ronald G. Evens, MD  
Lewis C. Fischbein, MD  
I.J. Flance, MD  
James W. Fleshman, MD  
Mark E. Frisse, MD  
Bernard T. Garfinkel, MD  
Deborah J. Gersell, MD  
Jerome J. Gilden, MD  
David Goldring, MD
Steven L. Teitelbaum, MD  
Jessie L. Ternberg, PhD, MD  
Bradley T. Thach, MD  
Mildred Trotter, PhD  
Stanley Wald, MD  
Stuart Weiss, MD  
Alison J. Whelan, MD

Distinguished Alumni Scholarship Program honorees 2012-13:

John N. Constantino, MD ’88  
Harvey S. Glazer, MD ’76  
Scot G. Hickman, MD ’70  
M. Alan Permutt, MD ’65

**Distinguished Faculty Scholars**

The Distinguished Faculty Scholar Program provides merit-based scholarships (full-tuition for four years) to students who demonstrate their commitment to bringing diverse people together and to enhancing service to disadvantaged groups. In addition, it links each of the scholarship recipients with a member of the faculty who has contributed to the diversity of the medical school. This faculty member will serve as a mentor to the scholarship recipient.

These awards are for students who have:
- challenged themselves and excelled academically;
- demonstrated leadership;
- engaged in or shown a commitment to community service;
- demonstrated their commitment to bringing diverse people together (as, for example, by having been involved in diversity initiatives in their schools or communities); and,
- demonstrated a commitment to serving historically underprivileged populations, and/or demonstrated achievement and determination in the face of personal challenges.

**Distinguished Student Scholarships**

Full-tuition Distinguished Student Scholarships are awarded annually to selected members of the entering first-year class based on meritorious academic and personal accomplishments. Final selection of scholarship recipients is made by a committee of the faculty based on demonstrated superior intellectual achievement as well as an assessment of the applicant's character, attitude, motivation and maturity.

**Standards for Satisfactory Academic Progress for Financial Aid Eligibility**

Federal law and regulations require that all students receiving financial assistance from Federal Title IV funds maintain satisfactory academic progress. The policy presents the standards adopted by the Washington University School of Medicine and applies to all students.

In order to maintain satisfactory academic progress, the maximum time frame of full-time enrollment for completion of each program is as follows:

Four-year MD program: 6 years  
Five-year MD program: 7-1/2 years  
MA/MD program: 7-1/2 years (or 9 years if a 2-year MA is pursued)

Periods of non-enrollment are NOT counted in the measurement of satisfactory academic progress but all
periods of attendance, regardless of whether the student received Title IV aid, are counted.

This policy is applied in the context of each individual student's enrollment status in order to accommodate the student who does not enroll on a full-time basis. For example, if a student enrolls in a four-year program, the full-time student would meet the 150 percent maximum after six years of full-time enrollment, and the half-time student is expected to complete in twelve years. If a student vacillates between full-time and half-time enrollment, that student would have a maximum time frame between six and 12 years, and the maximum time frame for that student would be continuously adjusted.

Academic requirements for the MD degree include the satisfactory completion of the curriculum designated by the faculty. The progress of each student working toward an MD degree is monitored carefully by the Committee on Academic Evaluation of Students (CAES). Refer to the Assessing Academic Achievement area of the Admissions and Educational Program section.

A student failing to meet the standards of progress as determined by the Committee on Academic Evaluation of Students shall be placed on financial aid probation. While on probation the student may receive financial assistance for one trimester, semester or equivalent time period. At the conclusion of this period, the student must have achieved compliance with each standard. A student who does not achieve compliance with each standard by the conclusion of the probationary period is suspended from financial aid eligibility. The Office of Student Financial Aid must notify a student of implementation of probationary status and/or suspension.

A student shall be reinstated for financial aid eligibility at such time as that student has completed satisfactorily sufficient coursework to meet the standards of progress. A student on financial aid probation or suspension may appeal that status by indicating in writing to the Director of Student Financial Aid the existence of mitigating circumstances which should result in reinstatement of financial aid eligibility. Each appeal will be considered on its merit by the Committee on Student Financial Aid.

The Director of Student Financial Aid shall have primary responsibility for enforcement of this policy. The director shall provide in writing to each student at the time of initial enrollment a copy of this policy. The director shall ascertain at the time of each disbursement of funds and prior to certification of a financial aid application that the student is in compliance with the policy.

**Scholarship Funds**

Helen M. Aff-Drum Scholarship Fund. Established in 1988 to provide scholarship support to financially deserving medical students.

American Medical Association — Education and Research Foundation Medical Student Assistance Fund. Begun in 1983, donors' gifts supplement the Foundation's gift to support excellence and contribute to the Distinguished Student Scholarships and Distinguished Alumni Scholarships Program.


Isak and Breine Ascher Scholarship Fund. The late Dr. Eduard Ascher, MD, '42, established this scholarship through a trust to memorialize his parents, who were lost in the Holocaust during World War II. He chose Washington University School of Medicine because of their willingness to "give a chance" to an Austrian refugee.

Dr. William Monroe Baker Fund. Established in 1988 under the will of Miss Lola Braxton in memory of Dr. Baker to provide scholarship assistance to worthy students who would be otherwise unable to obtain a medical education.

Barnes-Jewish Hospital Medical Staff Association Scholarship. Established in 1998 by the Barnes-Jewish Hospital Medical Staff Association to provide financial assistance to students based on academic excellence.

Floyd A. and Rita Sue Barnett Scholarship Fund. Established in 1994 from a trust agreement (1989) of
Floyd and Rita Sue Barnett for scholarships for students who are academically well-qualified and financially deserving.

Dr. Frederick Barry Scholarship. Established in 2009 through the estate of Dr. Frederick Barry for medical student education.

The Dr. Joseph A. and Helene H. Bauer Scholarship Fund. Created in 1987 by Dr. and Mrs. Joseph A. Bauer to provide scholarship support to academically well-qualified and financially deserving medical students.

Albert G. Blanke, Jr. Endowed Scholarship Fund. Established by a generous gift in 1982, the fund provides scholarship assistance for deserving students in the School of Medicine.

Warren Bowersox, MD Scholarship. Established in 2005 by Mrs. Warren Bowersox in memory of her husband, who was a member of the MD class of 1943-March, to support scholarships for first-year medical students.

Isabel Valle Brookings Scholarship Fund. Established in 1957 by Isabel Valle Brookings (Mrs. Robert S.) for scholarships and loans in the School of Medicine.

Jane Stewart and Robert S. Brua, MD Scholarship Fund. Established in 1996 through the generosity of Dr. Brua.

Ruth Elizabeth Calkins Scholarship Fund. Established by Dr. Delevan Calkins in honor of his granddaughter.

Gilbert L. Chamberlain, MD Scholarship Fund. Created in 1971 by Dr. Gilbert L. Chamberlain to be used to aid worthy students in acquiring their medical education.

Cecil M. Charles — Nu Sigma Nu Medical Student Scholarship Fund. Established by the Nu Sigma Nu Medical Fraternity in memory of Dr. Charles.

T. H. Cheng, MD Endowed Scholarship in Medicine. Established in 2007 by Dr. Tien Hsin Cheng, MD ’76, for deserving medical students with financial need.

Dr. Larry T. Chiang Endowed Scholarship. Established in 2003 to endow a scholarship fund for medical students from China who have demonstrated experience with or commitment to serving or working with historically underserved or underprivileged populations; demonstrated experience with or commitment to bringing diverse people together or in bridging divides among them; experience overcoming substantial educational or economic obstacles; community involvement; experience confronting challenging social, economic, educational, cultural or other life circumstances; first generation of family to attend college; from rural or inner-city areas; high academic achievement and promise; leadership potential. Besides academic achievement, criteria include positive attitude and determination to succeed.

Class of 1945 Scholarship Fund. Established by the alumni from the class of 1945 in honor of their 45th reunion.

Class of 1954 Scholarship Fund in Memory of Daniel Nathans. Established in 2000 by the alumni from the class of 1954 in memory of their classmate, Daniel Nathans, who was awarded the Nobel Prize in Medicine in 1978. Members of the Nathans family also contributed to the establishment of the fund.

Class of 1956 Scholarship Fund. Established in 1996 by members of the class of 1956 in honor of their 40th reunion.

Class of 1959 Reunion Scholarship Fund. Established in 2008 by members of the Class of 1959 in honor of their 50th reunion.

Class of 1961 Scholarship Fund. Established in 2001 by the members of the class of 1961.
Class of 1964 Scholarship Fund. Established in 1993 by the alumni from the class of 1964 to support scholarships.

Class of 1968 Scholarship Fund.Established in 1998 by the alumni from the class of 1968 in honor of their 30th reunion to support student scholarships.


Class of 1971 Scholarship Fund. Established in 1999 by members of the class of 1971 in honor of their 25th reunion.

Class of 1972 Scholarship Fund. Established in 1999 by members of the class of 1972 in honor of their 25th reunion.


Class of 1974 Scholarship Fund. Established in 2002 by members of the class of 1974 for their 25th reunion and to honor the memory of their classmate, Jonathan Mann.


Class of 1978 Scholarship Fund. Established in 2002 by members of the class of 1978 in honor of their 25th reunion.

Class of 1979 Scholarship Fund. Established in 2003 by members of the Class of 1979 in honor of their 25th reunion.


Class of 1982 Scholarship Fund. Established in 2006 by members of the Class of 1982 in honor of their 25th reunion.


Grace Strong Coburn Scholarship Fund. Created in 1962 through the bequest of Mrs. Grace Strong Coburn for scholarships in the School of Medicine.

Jack W. Cole, MD Scholarship. Established in 2002 by Mrs. Ruth Kraft Cole, in memory of her late husband, a 1944 graduate of WUSM, and to recognize Dr. Cole’s deep appreciation for the education he received. Preference will be given to a student pursuing a career in academic medicine.

T. Griswold Comstock Scholarships. Established under the will of Marilla E. Comstock for students who would otherwise be unable to obtain a medical education.

Clark and Mildred Cox Scholarship. Established in 1998 with a donation from the Clark Cox Trust for scholarships for women.
Arpad Csapo, MD Memorial Scholarship Fund. Established in 1982 by Elise Csapo in memory of her husband, and by his friends and colleagues to provide assistance for students who have shown promise in fields relating to reproductive medicine.

William H. and Elizabeth Gray Danforth Scholars Program. Established in 1998 in honor of Chancellor Danforth’s retirement. The Scholar recipients must demonstrate outstanding academic promise and a record of community service that reflects Dr. Danforth’s values and actions.

Harriet Arey and John D. Davidson Scholarship. Established in 2000 by Harriet Arey and John D. Davidson for scholarships in the School of Medicine.

Davie Family Scholarship. Established by Joseph Davie, MD ’68, and his family to support scholarships for deserving medical students.

Paul and Ruth DeBruine Scholarship. Established in 1994 by Dr. and Mrs. Paul DeBruine in honor of his 35th medical school reunion to provide scholarship support to academically well-qualified and financially deserving medical students.

Distinguished Faculty Scholarship. These scholarships are for students who have challenged themselves and excelled academically, demonstrated leadership, engaged in or shown a commitment to community service, demonstrated their commitment to bringing diverse people together, and enhanced service to disadvantaged groups. In addition, it links each of the scholarship recipients with a faculty mentor who has contributed to the diversity of the medical school.

Dr. Charles Drabkin Scholarship Fund. Created in 1964 to provide financial assistance to medical students.

Hazel B. Duncan Scholarship. This fund was established in 2003 through the bequest of Hazel B. Duncan, NU26.

Eichner-Dominguez Family Scholarship. Established in 2005 by Lora Eichner, MD ’93, and her husband, Mr. Frank Dominguez, to make it easier for students to attend medical school.

Dr. and Mrs. Max Elliott Scholarship. Established in 2000 by Dr. Elliott, MD ’64, to assist medical students.

Robert B. Fickel, DDS Scholarship Fund. Received in 1990 and given in memory of Dr. Fickel’s uncle, W. H. Fickel, MD ’12. Awards are made to students after their first year of study.

Carl Fisch Scholarship Fund. Created in memory of Dr. Fisch by his daughter, Marguerite F. Blackmer. Provides support to students who demonstrate financial need.

Flance Medical Scientist Traineeship. Established in honor of faculty member and alumnus I. Jerome Flance, MD ’35 by the Harry Edison Foundation for support of a student in the Medical Scientist Training Program.

Ann Randolph Flipse, MD Scholarship Fund in the School of Medicine. Established in 2007 by Dr. Ann Randolph Flipse to support deserving medical students with a preference for students whose undergraduate degree was in English, history, philosophy, music, arts or a graduate degree in the humanities.

George F. Gill Scholarship Fund. Instituted in memory of a former clinical professor of pediatrics.

Helen H. Glaser Scholarship for Women Medical Students. Established in 1999 by Robert J. Glaser, MD, emeritus trustee and former faculty member, in memory of his wife, Helen H. Glaser, MD ’47.

Anne T. and Carl Goetsch Scholarship. This fund was established in 2003 through the bequest of Dr. Anne T. Goetsch, MD ’41, HS44, and Dr. Carl Goetsch, HS43, to support medical students.

Norman M. and Eleanor H. Gross Scholarship Fund. Established in 2001 through a bequest from Mr. Gross
for financially needy medical students.

Paul H. and Lila L. Guttman Student Aid Fund. Established in 1976 to provide financial assistance to qualified medical students.

Paul O. and Nancy P. Hagemann Scholarship Fund. Established by Dr. and Mrs. Hagemann to assist academically well-qualified students with documented financial need.

Donald R. and Mary N. Harkness Family Scholarship. Established in 2004 by Drs. Donald and Mary Harkness, both MD'58, in memory of their daughter, Laurel, MD'86.

Lee B. and Virginia G. Harrison Memorial Student Fund. Established in 1996 for scholarships for students who intend to pursue a career in internal medicine or family practice. Dr. Harrison was a 1927 graduate of the School of Medicine.

Harvielle-Bailey Scholarship. Established in 1970 under the will of Miss Isabel Bailey Harvielle as a memorial to Dr. Charles Poplin Harvielle and Dr. Steele Bailey, Jr., alumni of the School.

Ronald C. and Nell W. Hertel Endowed Scholarship for the School of Medicine. Established in 1995 and endowed in 2005 in memory of Mrs. Nell Hertel to provide financial aid to medical students.

Raymond F. Holden, Jr. and Gertrude K. Holden Scholarship. Established in 2009 by the Estate of Dr. Raymond F. Holden, Jr., MD '33, to provide scholarship support to medical students.

Dr. and Mrs. Charles Y. (Yueh-Gin Gung) Hu Scholarship Fund. Established in 2002 to provide a scholarship to a medical student of Chinese descent who has demonstrated experience with or commitment to serving or working with historically underserved or underprivileged populations; demonstrated experience with or commitment to bringing diverse people together or in bridging divides among them; experience overcoming substantial educational or economic obstacles; community involvement; experience confronting challenging social, economic, educational, cultural or other life circumstances; first generation of family to attend college; from rural or inner-city areas; high academic achievement and promise; leadership potential. Besides academic achievement, criteria include positive attitude and determination to succeed.

Dr. Grace Huse Memorial Fund. Provides scholarship awards for deserving Washington University medical students.

Justan Icks Scholarship. Established in 2008 by John Grayson, MD'57, to support students with high academic achievement.

Jackson Johnson Scholarship Fund. Provided through a bequest in 1930 from Jackson Johnson.

Dr. Lorraine A. Johnsrud Scholarship Fund. Established in 1983 as a memorial to Lorraine from her classmates, friends and family to assist deserving medical students in the funding of their medical expenses.

Henry J. Kaiser Family Foundation — Medical Century Club Scholarship Fund. Following the foundation's generous gift in 1980 for medical student scholarships, the Medical Century Club accepted the challenge to raise new scholarship funds to match an additional gift from the foundation.

Jay and Ronnie Kaiser Endowed Scholarship. Established in 2004 by Dr. Jay, MD '72, and Mrs. Ronnie Kaiser in appreciation of the financial aid Dr. Kaiser received as a student and to provide support for medical students.

George D. Kettelkamp Scholarship Fund. Established in 1969 by Mrs. Kettelkamp in memory of her husband, an alumnus of the School of Medicine.

Saulo Klahr, M.D. Endowed Scholarship. Established in 2010 by Mrs. M. Carol Klahr in memory of her husband, Dr. Saulo Klahr, a WUSM professor of kidney disease for 46 years, to provide scholarship
support to medical students.

M. Kenton King, MD Scholarship Fund. Created by the Executive Faculty to honor Dr. King at the time of his retirement in 1989 as Dean of the School of Medicine after having served in that position for 25 years.

Albert F. Koetter, MD Scholarship Fund. Established in 1978 by Mrs. Stella Koetter Darrow in memory of her father, an alumnus and former faculty member of the School of Medicine. At least one full-tuition scholarship is awarded annually on the basis of academic achievement and financial need.

Nicholas T. Kouchoukos, M.D. '61 and Judith B. Kouchoukos Scholarship. Established in 2011 by Dr. Nicholas T. and Mrs. Judith B. Kouchoukos, to provide scholarship support to medical students.

Anne L. Lehmann Scholarship Fund. Established in 1983 to grant continued scholarship support to medical students.

Life Insurance Medical Scholarship Fund. Created in 1972 from residual funds in the Life Insurance Medical Research Fund, scholarship support is now awarded to students in the MD degree program.

Maude L. Lindsey Memorial Scholarships. Created in 1976 to assist students in the School of Medicine.

John R. Lionberger, Jr. Medical Scholarship Endowment Fund. Created in 1982 by Dr. John R. Lionberger to be used to aid worthy students in acquiring their medical education.

E.A. Marquard Memorial Student Scholarship. Established in 1994 from the E. Alfred Marquard Memorial Student Loan Fund to provide scholarships for deserving and needy financially deserving medical students.

Alma Mavis Scholarship Fund. Created in 1988 under the will of Alma Mavis to assist students intending to practice family (general) medicine.

Eliza McMillan Scholarship Fund. Provides assistance to young women in any of several schools of the University to secure an education.

Medical Center Alumni Scholarship Fund. Awarded on the basis of academic achievement and financial need.

Edith and Martin Meltzer Scholarship in the School of Medicine. Established in 2004 by the Meltzer Family Foundation to honor Dr. Gerald Meltzer's (MD'63), parents, who established the foundation.

Roy B. and Viola Miller Memorial Fund. Created in 1963 through the bequest of Roy B. Miller to provide scholarships for medical students and for post graduate students engaged in study and research in the medical sciences.

Warren Seward Miller and Dorothy Jackes Miller Endowed Scholarship Fund. Established in 2008 by Hildreth H. Spencer, PhD, in memory of her aunt and uncle, the Millers, with a preference for students pursuing the specialty of internal medicine.

The Warren S. and Dorothy J. Miller Scholarship Fund. Established in 1982 through the bequest of Dorothy J. Miller to provide scholarships for any students engaged in studies leading to the degree of Doctor of Medicine and especially for those students with an aptitude and desire for the general practice in internal medicine.

Joseph J. and Ernesta G. Mira Scholarship Fund. Established in 1988 by Dr. and Mrs. Mira to provide assistance to students from the Alton, Illinois area, including the counties of Madison, Jersey, Calhoun, Greene and Macoupin.

John and Ruth Musselman Medical Scholarship. Established in 1997 by the John & Ruth Musselman Medical Scholarship Trust to provide scholarships to deserving students.
Mr. and Mrs. Spencer T. Olin Fellowships for Women. Provides for annual financial support to female graduates of an undergraduate institution in the United States in any of several disciplines. Application deadline is February 1.

Spencer T. and Ann W. Olin Medical Fellowships. Created in an effort to help fill the continuing shortage of physicians who pursue careers in biomedical research, the awards are primarily for students in the Medical Scientist Training Program.

Dr. Roy W. Osterkamp Memorial Scholarship. The fund was established in 2003 by Mrs. Linda Osterkamp Desloge and Mrs. Lila Osterkamp Haberberger, in memory of their father, Dr. Roy W. Osterkamp, DE36. Preference will be given to a student pursuing a career in a medical field related to dental medicine.

F. Thomas Ott (MD ’65) and Mary Miller Ott (MSN ’68) Scholarship. Established in 2010 by Dr. F. Thomas and Mrs. Mary Miller Ott to provide scholarship support to medical students.

Dr. Sidney F. and Dora K. Pakula Scholarship Fund. Established in 2001 by Dr. and Mrs. Lawrence C. Pakula in memory of Dr. Pakula’s parents to support student scholarships.

William B. Parker Scholarship Fund. Established in 1976 by the School of Medicine in honor of William B. Parker’s 51 years of service to the School.

William A. Peck, MD Scholars in Medicine. Established in 2002 to recognize Dr. Peck’s 14 years of service to the Medical Center and Washington University community. University trustees, faculty, staff, alumni and friends honored Dr. Peck with gifts to this scholarship.

Phi Beta Pi — Charles Ruggieri Scholarship Fund. Established in 1985 by the Washington University Alumni of the Phi Beta Pi medical fraternity to honor Charles Ruggieri and to assist deserving medical students enrolled in Washington University School of Medicine with the funding of their undergraduate medical education.

Philpott Family Scholarship Fund. Established in 1995 by the Philpott family to provide support for medical students with financial need and excellent academic achievement.

The George M. (MD ’32) and George K. (MD ’64) Powell Medical Student Scholarship Fund. Established in 1984 by Mrs. George M. Powell in grateful appreciation for the medical education provided to her husband and son by Washington University School of Medicine, which so positively affected the lives of the Powell families.

Henry and Louise Reller Scholarship. To be given to medical students in the name of the parents of Louise Reller.

Lyman K. Richardson, MD Scholarship Fund. Established in 1993 by Mrs. Ellen Richardson to provide scholarship support to medical students.

Samuel Jennings Roberts Scholarship Fund. Created to provide scholarships for any students engaged in study leading to the degree of Doctor of Medicine.

Robert Allen Roblee Scholarship Fund. Established in 1948 through the gift of Mrs. Joseph H. Roblee for students in the School of Medicine.

Thomas W. and Elizabeth J. Rucker Scholarship Fund. Created in 1956 under the will of Eugenia I. Rucker, in memory of her mother and father.

J. Max Rukes Scholarship Fund. Established in 1987, the fund provides scholarship support to deserving medical school students who are doing research in endocrinology or the chemistry of metabolism.


Robert G. and Maxine W. Scheibe Scholarship. Established in 1999 by Robert G. Scheibe, a 1960
Washington University graduate who also received his medical degree here in 1964 and his wife, Maxine, who is a 1966 graduate of the Washington University School of Nursing.

William H. and Ella M. Schewe Fund. Established to provide financial assistance to worthy students in the medical school.

Dr. David Schlessinger Scholarship. Created in 2006 by Dr. Dan Longo in honor of his mentor, Dr. Schlessinger, who was a Professor of Molecular Microbiology, Professor of Genetics and Professor of Microbiology at Washington University School of Medicine.

Scholars in Medicine Program. Established in 1999 with gifts from individual donors to create scholarships to support medical students in the name of the donor.

School of Medicine Scholarship Fund. Created in 1970 to provide financial assistance for medical students.

Edna Schrick, MD Scholarship Fund. Established in 1992 by Dr. Schrick to provide scholarship support to female medical students.

Mordecai E. Schwartz Endowed Scholarship. Established in 2006 by Dr. Mary R. Schwartz, Dr. David Cech and Alexander I. Schwartz in memory of their father, who was committed to the training of future physicians.

Edward L. Schweich Scholarship. Established in 2010 by Mr. and Mrs. Henry L. Schweich, in memory of Edward L. Schweich, for medical student scholarship support.

Senior Merit Scholarship. Established by an anonymous alumnus of the School of Medicine, it provides a full-tuition scholarship to a senior student who has earned a distinguished record of academic and personal achievements during the first three years in the medical school.

Charlie W. Shaeffer, MD Scholarship Fund. Established in 2008 by Charlie Shaeffer (MD64) and his wife, Claire, for medical students, based on academic merit and/or financial need.

Dr. John B. Shapleigh Scholarship Fund. Established in 1926 with the bequest of Dr. John B. Shapleigh and supplemented by contributions from Mrs. Shapleigh and Miss Margaret Shapleigh.

Alexander Balridge Shaw Scholarship Fund. Created in 1958 through the bequest of Roy A. Shaw in memory of his father, Dr. Alexander Balridge Shaw.

William T. Shearer and Lynn Des Prez Diversity Scholarship. Created by William T. Shearer, MD ’70, and his wife, Lynn Des Prez. Scholarships are awarded to medical students from underrepresented minorities with preference given to African-American students who have demonstrated experience with or commitment to serving or working with historically underserved or underprivileged populations; demonstrated experience with or commitment to bringing diverse people together or in bridging divides among them; experience overcoming substantial educational or economic obstacles; community involvement; experience confronting challenging social, economic, educational, cultural or other life circumstances; first generation of family to attend college; from rural or inner-city areas; high academic achievement and promise; leadership potential. Besides academic achievement, criteria include positive attitude and determination to succeed.

Dr. Edward Hiroshi Shigeoka Scholarship Fund. Created in 1988 by Dorothy F. Shigeoka in memory of her husband, Dr. Edward Hiroshi Shigeoka, to help disadvantaged and deserving students pursue their careers in medicine.

Ernie Simms Scholarship Fund. Founded in 1984 by friends, colleagues and former students of Professor Simms in recognition of his contributions to scholarly research and teaching in the Department of Microbiology and Immunology.

Stanley B. Smith, MD Scholarship Fund. Established in 2001 in memory of Samuel and Dora Smith, Dr.
Smith’s parents, to support student scholarships.

Southern Medical Association Student Scholarship. Awarded to a third-year student in recognition of outstanding academic achievements of a physician-in-training.

Beulah B. Strickling Scholarship Fund. Established in 1960 with a bequest from Mrs. Beulah B. Strickling.

Marleah Hammond Strominger Scholarship. Established in 1971 by the family and friends of Marleah Hammond Strominger. The recipient shall be a motivated student with need for financial assistance and shall come from a disadvantaged background.

Mary and Ernst Stuehrk Scholarship Fund. Established in 1987 to assist medical students with documented financial need.

Edwin H. and Virginia M. Terrill Scholarship Fund. Established in 1964 with the bequest of Dr. Edwin H. Terrill, an alumnus. It was Dr. Terrill’s hope that scholarship recipients would repay into the fund the amount of the award.


Mildred Trotter Scholarship Fund. For students with documented financial need, the fund was established in 1979 by Dr. and Mrs. Paul Guttman, and supplemented by former students of Dr. Trotter, as a tribute to her many years of teaching in the Department of Anatomy.

Hiromu Tsuchiya Scholarship Fund. Created to provide scholarships in the School of Medicine.

Tuholske-Jonas-Tuholske Medical Scholarship Fund. Established in 1974 by Rose T. Jonas in memory of her father, husband and brother. The recipient shall be a senior student preparing to enter the field of surgery, obstetrics and gynecology, or internal medicine.

Dr. Cornelia M. Van Prooyen Scholarship Fund. Established in 1987, the fund provides scholarship support and other financial assistance to female medical students.

George S. and Aspasia N. Vellios Scholarship Fund. Established by Frank Vellios, MD ’46, in honor of his parents. Scholarships are awarded to deserving medical students with financial need.

Louis H. Waltke and Marie Waltke Memorial Fund for Medical Education. Created in 1984 to provide scholarships and fellowships at the School of Medicine.

Dr. George S. Wilson Scholarship Fund. Established in 1988 with the bequest of Dr. George S. Wilson to provide scholarship support to medical students.

George and Irene Wolf Medical Scholarship Fund. Established by the donors to benefit students in the School of Medicine.

Dr. Mitchell and Elaine Yanow Scholarship Fund. Established in 2002 by the children of Dr. and Mrs. Yanow to honor the memory of their parents and to provide support for deserving medical students.

George Zografakis Memorial Scholarship Fund. Created by the family and friends of Dr. Zografakis, a distinguished faculty member in the Department of Surgery.

Loan Funds

Auer-Rosenfeld Memorial Loan Fund. Established by Mrs. Elizabeth Auer to be used for educational loans to students.

Dr. John C. Boetto Loan Fund. Established in 1993 by a bequest from Mrs. Josephine D. Boetto as a
memorial to her son to provide loans for deserving medical students.

Otto W. Brandhorst Loan Fund. Created in 1985 by the estate of Fern Crawford. This fund supports loans to students in the School of Medicine.

Dr. Harold A. Budke Loan. Established in 1998 to provide financial assistance to needy and deserving medical students.

Harold A. Budke, M.D., Loan Fund II. Established in 2001 with a bequest from the estate of Etta Elise Wedemeyer to provide loans to needy and deserving female students who will practice family medicine, internal medicine or obstetrics-gynecology medicine.

Class of 1947 Loan Fund. Established in 1996 by members of the class of 1947 in honor of their 50th reunion.

Robert Emmet Connor Family Loan Fund. Established in 2000 by Dr. Connor, MD ’79, to provide “zero interest” loans to deserving medical students with need of an unforeseen or emergency nature.

Jess K. Goldberg Memorial Loan Fund by Ophelia H. Kooden and Violet G. Sachs. Created in 1970 to provide zero-interest loans for medical students in memory of the donors’ brother who passed away while attending medical school.

Health Professions Student Loan Fund. Established by federal legislation for medical students with a demonstrated financial need. Loans are available for long terms at favorable rates.

William Randolph Hearst Medical Scholars Loan Fund. In 1989, the Hearst Foundation provided funding for a new and innovative loan program which provides interest-free loans to students in their last year of study.

Ursula Hecker Loan Fund. Established in 1967 by a bequest from Ursula Lee Hecker for the use and benefit of worthy, deserving and needy medical students.

Kathy E. Holden Loan Fund. Established by Mrs. Roland Holden and the Roland and Ruby Holden Foundation in honor of her granddaughter, Kathy E. Holden, and in recognition of W. Edwin Dodson, M.D., to support loans to deserving medical students.

Horncrest Foundation — School of Medicine Loan Fund. In 1982, the trustees of the Horncrest Foundation approved a proposal on behalf of the School of Medicine to match up to a generous annual cap for five year loan funds solicited by the School. The campaign was extremely successful and now provides loan funds to students with documented financial need.

W. K. Kellogg Foundation Loan Fund. Provides financial assistance to medical students in need of such aid.

Gustel and Edith H. Kiewitt Scholarship Loan Fund. Provides loan funds for medical students.

Medical Scholars Loan Program. Established in 1985 by members of the William Greenleaf Eliot Society, this fund provides an interest-free source of long-term student loans. Annual contributions from alumni and friends support this perpetual and growing resource upon which current and future medical students will draw.

George W. Merck Memorial Loan Fund. Established in 1959 by The Merck Company Foundation, the original purpose of the loan was modified in 1983 to provide loans to graduating students which would help bridge the transition from student to resident physician.


Goldie H. Penn and Lloyd L. Penn, M.D. Student Loan Fund. Dr. Penn, MD ’33 established the fund in 1977
to aid well-qualified and deserving students.

Perkins Student Loan. A federal program (formerly National Direct Student Loan) to provide loans to students with financial need. Permits repayment over an extended period at a favorable interest rate.

Dr. William C. and Elva Pratt Loan Fund. Established in 1982 for medical students with demonstrated financial need.

G. H. Reinhardt Memorial Scholarship Loan Fund. Established in 1947 through the bequest of G. H. Reinhardt.

Aline Rixman Loan Fund. Created in 1940 by William Rixman in memory of his wife, the fund is used to alleviate unexpected financial emergencies of medical students.

James L. and Dorothy Rouner Loan Fund. Established in 1997 by Dr. James and Mrs. Dorothy Rouner to be used for medical students pursuing a career in primary care–general internal medicine.

Caroline O. Schlesinger Loan Fund. Established in 1969 to provide financial support for medical students.

School of Medicine Student Loan Fund. Established to make loans to students with documented financial needs.

Washington University Medical Center Alumni Association Loan Fund. Provides emergency loans to medical students.

The Alan A. and Edith L. Wolff Loan Fund. Established in 1993 by Mrs. Edith L. Wolff to provide loans to students with demonstrated financial need who are in their final year of study for the Doctor of Medicine degree.

Registration, Payment of Financial Obligations, Withdrawal and Refund Policy

For the convenience of our students, the Washington University billing system provides a central financial account against which most student expenses incurred at the University will be posted, including but not limited to tuition, dormitory charges, parking, library fines, etc. This policy, when referring to tuition and other charges, includes any and all charges posted to this account.

All payments of tuition and other University charges are due and payable on the dates specified in the published calendars of the programs in the School of Medicine. Failure of a student to register when required and pay tuition and other charges incurred on or before the date specified in the published calendar will result in a late fee of $50 to be added to the amount due. The late fee will be imposed seven (7) days after the due date if full payment has not been received. Tuition and other charges are usually payable twice a year, at registration time and again at the middle of the academic year as listed on the schedule on the academic calendar.

Any payment due from the student and not paid by the specified date will accrue interest at the usury rate in effect on the first business day of the month in which the payment is due. This fee will be imposed on any accounts not paid in full within 30 days of the due date. Any amount not paid when due plus accrued interest thereon must be paid in full within three months of the due date to avoid suspension from classes.

If a student fails to settle such unpaid amounts within three months of the original due date, the School will not release the student's academic record, grade reports or transcript pending settlement of the unpaid account. A student who has not satisfied all of his/her delinquent financial obligations to
Washington University (tuition, Olin Residence Hall rental, parking, etc.) one month before the end of the end of the academic year will not be allowed to progress to the next academic year, or be issued a diploma.

Students who rely on financial aid funds to meet their obligations should submit their applications for processing according to application deadlines published by the Office of Financial Aid. Deadlines allow for receipt of financial aid funds by payment due dates if applications are filed by the deadline. The Office of Student Financial Aid will assist students with loan applications and financial planning upon request.

A student who withdraws or takes a leave of absence from the School will receive a pro rata refund of tuition and appropriate fees. The refund will be based on the ratio of the class days enrolled (from the first day of classes to the termination date) to the total number of class days in the term for which tuition and fees were paid. It is understood that the date on which a student formally notifies the Registrar’s Office in writing of the decision to withdraw or take a leave of absence from the School of Medicine shall be regarded as the termination date, with no retroactive clause to be accepted. A prospective date will be accepted, however. If tuition and fees were paid entirely or in part by financial aid from the School, the refund will be applied first to the total repayment of the accounts from which financial aid was drawn, with any remaining refund balance given to the student. Financial aid received in excess of the costs of tuition and fees must be refunded by the student to the School on the same pro rata basis as calculated for the tuition refund outlined above. Examples of the application of the refund policy may be requested from the Registrar’s Office.

Assessing Academic Achievement and Professionalism

Committee on Academic and Professional Evaluation of Students (CAPES)

The Academic and Professional Evaluation of Students

Grading System

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Appeals Process for the CAPES Decisions

Committee on Academic and Professional Evaluation of Students (CAPES)

Responsibility of the Committee

Overall academic and professional evaluation of medical students at the Washington University School of
Medicine will be made by the Committee on the Academic and Professional Evaluation of Students (CAPES). The deliberations of the CAPES are generally positive in approach and are committed to the ultimate aim of assisting students to successfully complete the courses of study required by the School. The principle that careful selection of students will minimize attrition from the School is strongly endorsed by the CAPES. The CAPES has several important roles, including:

A. Approving promotion of students to a subsequent year of study;
B. Recommending to the Executive Faculty those students who have successfully completed all the prescribed requirements of the School and are qualified to receive the Doctor of Medicine degree;
C. Requiring entry of a student into an individualized program of study (ISP); and
D. Deciding upon matters of disciplinary action including instances of unprofessional behavior brought to the CAPES.

It is also the ultimate responsibility of the CAPES to decide whether each student meets the academic and ethical standards necessary to enter the profession of medicine.

The rules governing operation of the CAPES apply to students in the following categories:

A. Students who are engaged in the preclinical and clinical education requirements for the M.D. degree;
B. Students in dual degree programs including the M.A./M.D. and the M.D./Ph.D. (MSTP) program taking the pre-clinical or clinical portion of their M.D. education.
C. Students in all years of the Five-Year M.D. program.

Membership of the CAPES

A. Appointed and ex officio membership — There will be 12 voting faculty members of the CAPES, and members will be appointed for a four-year term by the Dean of the School of Medicine following nomination of suitable individuals by the department heads and Associate Deans. Initial appointments will be staggered for periods of one-, two-, three- or four-year terms.

A faculty member may be reappointed to serve on the CAPES. Membership will include both clinical and preclinical departments. In addition, the CAPES membership will include, in ex officio capacity, the Registrar (non-voting) and the Associate Dean for Student Affairs (non-voting). The Associate Deans for Medical Student Education, Admissions, Diversity Programs and the Director of the Student Health Service may attend the CAPES meetings as non-voting observers.

B. Guests — A course master who is not a member of the CAPES but who has submitted a Fail/Incomplete grade for a student which is to be discussed at a meeting of the CAPES will be present at the meeting to provide information concerning the student’s performance. Alternatively, a course master may send a designated representative or may submit additional information in writing. In the event that a course master or designated representative is not present or sufficient information has not been forwarded, final action for that student will be deferred until adequate information concerning the student’s performance is available. Similarly, when the committee is addressing issues of professionalism, the individual filing the professionalism concern form will be present for the meeting or in some instances may instead be allowed to submit information in writing.

C. Chair — A faculty member will be appointed by the Dean from within the CAPES committee to serve as chair. The term of the chair will be four years.

Meeting Frequency
The CAPES meetings must occur in a timely manner after final examinations or re-examinations (i.e., as soon as practical after grades are submitted to the Registrar). Generally grades will be submitted to the Registrar within 10 days of the completion of an examination or within four days of a re-examination. A meeting of the Committee also may be convened at any time such that timely review of student performance and action thereupon is provided.

Quorum for the CAPES Meetings
Seven voting members must be present to consider academic or disciplinary actions.

Procedures for Making Changes to this Document
Major revisions in this document will be approved by the Academic Affairs Committee.

The Academic and Professional Evaluation of Students

A. In order to continue their studies at the Washington University School of Medicine, students must demonstrate the ability to synthesize and apply knowledge and the capability of becoming a safe and effective physician. In addition, they must demonstrate the principles of professionalism including sound judgment, honesty and integrity, responsibility, a sensitivity and compassion for individual needs, and compliance with applicable laws, policies and regulations. Serious or repeated breaches of these principles will be referred to the CAPES for review. See the section called Guiding Principles of Professionalism.

B. It is the responsibility of students who feel that personal concerns, health problems, or any other factors may be adversely affecting their academic performance to bring such matters to the attention of the Director of the Student Health Service or the Associate Dean for Student Affairs for possible accommodations.

C. Students are required to take all examinations at the specified time. A student may be excused from this rule for extenuating circumstances at the discretion of the Associate Dean for Student Affairs, who will inform the course master. Extenuating circumstances are defined as sudden personal illness, extreme family circumstance, or significant professional obligation. Doctor appointments of a routine nature or vacation time are not considered to be extenuating circumstances for which students can be exempted from the regularly scheduled exam date. In the event of a student’s inability to attend a scheduled examination due to sudden illness, extreme family circumstance or significant professional obligation, the student is required to inform the Associate Dean for Student Affairs prior to the examination. If the issue is sudden illness, the student must also be evaluated by the Student Health Service. In the event that the student cannot reach the Associate Dean for Student Affairs, the student should contact the relevant course master.

At his or her discretion, the Associate Dean for Medical Student Education may occasionally approve an exam date change for the entire class if the need arises, but this is an exception, as the complete schedule is reviewed prior to the start of each academic year by course masters and student representatives.

D. At the conclusion of each academic year students receive a grade report which indicates the grade achieved in each course. When all the official grades have been received, the official transcript, in addition to listing courses and grades achieved, lists the grade distribution in each course (with the exception of selective and elective courses).

E. At the annual end-of-year CAPES meeting, the Committee will vote to recommend promotion of students who have successfully completed all the requirements of the current academic year to the studies of the subsequent year.
F. Prior to graduation, students are required to complete and pass all required coursework and examinations. Occasionally students are permitted to complete equivalent coursework at other institutions with the permission of the responsible department and written notification to the Registrar.

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Grading System

A. First Year
Courses in the first-year curriculum are evaluated on a Pass (P) or Fail (F) basis. For purposes of the official grade records of the School of Medicine, grades used for the first year are:

- P = Pass, indicating satisfactory performance
- F* = Fail
- E = Temporary grade, makeup of failed exam pending
- I** = Incomplete, temporary grade pending completion of course requirements, replaced with an F if not removed within one year
- L = Successful audit
- NG = Course credit earned, students not graded
- W = Withdrawal from a course
- Z = Unsuccessful audit

Failure of any examination which comprises a significant portion of the final grade (typically 20% or more) must be reported by the course master to the Associate Dean for Student Affairs. In the event of a failure of a single exam within the course, the course master may allow one attempt at remediation of this examination. The scheduling of a remedial examination will be agreed upon by the course master and student but in general should not extend beyond 30 days after the end of the course or academic year, whichever occurs first. Days of recess for Winter Break or Spring Break will not be counted in the 30 days. A grade of E will be submitted by the course master if the remedial examination is not accomplished within the course dates. This grade will stand on the academic record until it is replaced with a valid final grade of Pass or Fail. Grades of E that are not resolved within 30 days will be replaced with a grade of Fail (F). If the student successfully remediates the examination, and has otherwise passed the course, a Pass (P) will be recorded by the Registrar. A student may remediate only one examination in any course.

*Any grade of F remains on the student’s academic record. When the course is repeated or remediated the new grade will appear as a separate entry in addition to the failing grade.

**Incomplete (I) indicates that, because of a delay excused by the course master, the student has not completed the requirements to pass a course.

B. Second and Subsequent Years
For purposes of the official grade records of the School of Medicine, the following grades are used for subsequent years:

- H = Honors, reflecting a truly outstanding performance
- HP = High Pass, awarded for excellent/very good work
- P = Pass, indicating satisfactory performance
- F* = Fail
- E** = Temporary grade, makeup of failed exam pending
I*** = Incomplete, temporary grade pending completion of course requirements, replaced with an F if not removed within one year
Cr#/NCr# = Credit/No Credit for some second-year courses
L = Successful audit
NG = Course credit earned, students not graded
W = Withdrawal from a course
Z = Unsuccessful audit
*Any grade of F remains on the student’s academic record. When the course is repeated or remediated the new grade will appear as a separate entry in addition to the failing grade.
A failing grade for clinical clerkships will be recorded on the official educational record when a student fails the subject examination (defined as scoring at less than the 10th percentile as reported by the NBME) for the second time. A failing grade will be recorded when a student fails the clinical portion of the clinical clerkship or elective. In both events, the failing grade remains on the student’s official educational record. When the course is remediated the new grade will also appear on the student’s official educational record.
**In clinical clerkships which have a subject examination, students must score at or above the 10th percentile of the national pool of students taking the examination to pass the clerkship. If a student fails the subject examination once, the grade of E will be recorded. Upon successfully retaking the subject examination the new grade will replace the grade of E on the permanent academic record. If the shelf examination is failed a second time, the grade of F is recorded on the permanent academic record.
***Incomplete (I) indicates that, because of a delay excused by the course master, the student has not completed the requirements to pass a course.

C. Grade Reporting
Final grades will be submitted to the Registrar by course masters within ten (10) working days of the final examination or final class meeting for the first two years. For third and fourth years, grades are due within ten (10) working days of the receipt of standardized examination scores or the last day of the rotation if no examination is given. A web-based University system, WEBSTAC, provides timely access to grades for the first two years. Grades and evaluations of student clinical performance are submitted on a standardized form and are available for review in the Office of Student Affairs throughout the academic year. Final grades for the clinical clerkships and electives are recorded in the University student information system at the end of the academic year and are subsequently available on WEBSTAC, which is updated quarterly. A paper copy of final grades is available upon request from the Registrar’s Office.

D. Grade Point Average, Class Ranking and Grade Distributions
The School of Medicine does not calculate grade point averages. Hours of credit appearing on the transcript reflect clock hours scheduled for the course or clinical rotation. For the purpose of residency applications only, students are placed in the upper, middle or lower third of the class according to a formula which considers weighting of courses and each academic year. This ranking is not recorded on the permanent academic record and therefore does not appear on transcripts. It may appear in the student’s dean’s letter. At the conclusion of the academic year, when all the official grades have been received, the official transcript, in addition to listing courses and grades achieved, gives the grade distribution in each course with the exception of elective and selective courses.

E. Grade Appeals
A student who wishes to appeal his/her grade with the course master should file his/her request for review by completing the grade appeal form which includes the basis for the appeal. This should be filed within 30 days of the course completion. If reasons beyond the student’s control delay the resolution of the appeal past the 30-day deadline, the Registrar must be notified so that the final transcripts, grade distributions and class rankings for match can be held pending resolution of the matter. If this notice is not filed with the Registrar prior to the deadline, the new grade cannot be accepted. Students
participating in the residency match should also notify the office of career counseling that a grade appeal is in process. The resolution of the appeal will be noted on the grade appeal form and forwarded to the Registrar and Associate Dean for Student Affairs. A copy of the grade appeal form is available in the Registrar’s Office and is also included in this document.

**NO GRADE CHANGES ARE PERMITTED FOR THE ACADEMIC YEAR AFTER JULY 15.**

**Grade Appeal Form**

Please see Appendix A in the "Rules Governing Review of Student Performance" booklet.

**Individual Study Program**

The educational program is designed to assist the specialized needs of all medical students in an individualized and personalized manner. Tutorial assistance is available to any student at any time as detailed below. Occasionally students who have difficulty in handling the normal academic course load will enter an Individual Study Program (ISP), requiring five years to complete rather than four years. The following rules govern students engaged in an ISP:

A. The intent of an ISP is to optimize the prospect that the student will successfully complete the curriculum.

B. Entry into an ISP may occur in one of three ways: 1) a student may request an ISP, or after careful consideration of the student’s academic performance at intervals throughout the curriculum, the CAPES may either 2) recommend or 3) require entry into an ISP.

C. The specific program of any ISP (i.e. the content and sequences of courses) will be determined by the student and the Associate Dean for Student Affairs with input from relevant course masters and the CAPES. The specific recommendations of the CAPES will generally be adopted. The plan for execution of an ISP, once established, will be recorded in the student’s file in the Registrar’s office and a copy provided to the student.

D. Unless extenuating circumstances exist, ISP students are required to take the examinations for a particular course in their usual temporal relationship to the coursework. Requests for consideration of unusual circumstances should be recorded in the student’s file in the Registrar’s office.

E. In the event that a single Fail or Incomplete grade is recorded for a student after entry into an ISP, the CAPES will again review the student’s record. The consequences may include remediation, repeat of the course or dismissal.

F. At the completion of the time for their ISP, ISP students who have not successfully completed and received a grade of Pass or above in the usual courses of the first- and second-year curricula by the start of the second six-week period in the year of the clinical clerkship will be dismissed from enrollment in the School.

**Tutorial Assistance Program**

Students experiencing difficulty in any course may request tutorial assistance. Such requests should initially be directed towards the course masters and thereafter to the Associate Dean for Student Affairs.
Students who are repeating courses will be offered the opportunity for tutorial assistance. The CAPES may also require it. There is no charge to the student for tutorial assistance.

Indications for Review of Academic Performance

General

“Indications for Academic Review” refers to guidelines used at the School in the event that a student fails a course or fails to complete a course in the requisite time.

A. In the event of any initial failure of a course offered at the School, the student will meet with the Associate Dean for Student Affairs to formulate a plan to remediate such failure.

B. If the Registrar has recorded a Fail or Incomplete grade in two or more courses in a single year or cumulatively three courses between years, the student’s academic performance will be referred to the CAPES for review and determination of a course of action.

C. Refer to The Individual Study Program (ISP) section for guidelines pertaining to students engaged in an ISP.

D. When the performance of a student is referred to the CAPES for potential academic review, the following rules will apply:

1. No student may take more than three years to complete the coursework required for the first two years. The end of such a “three year” period, is defined as 36 months from the date of matriculation to the School. Time periods included in a “Leave of Absence” are not counted in these 36 months.

2. In the absence of extenuating circumstances, no student may take more than two academic years to complete the coursework required in the first year curriculum.

3. The maximum number of attempts to pass any individual course during enrollment in the School, including time in an ISP, will be three.

E. Throughout the enrollment of a student it is within the jurisdiction of the CAPES to terminate the enrollment of a student who has demonstrated serious academic failure or breaches of professionalism.

First Year

A. Failure of any examination which comprises a significant portion of the final grade (typically 20% or more) must be reported by the course master to the Associate Dean for Student Affairs. In the event of a failure of a single exam within the course, the course master may allow one attempt at remediation of this examination. A student may remediate only one examination in any course.

B. If a student has received a Fail/E grade in a single first-year course, the Associate Dean for Student Affairs will meet with the student to formulate a plan from the following options:

1. Take a re-examination in the course at a time prescribed by the course master. The scheduling of a remedial examination will be agreed upon by the course master and student but in general should not extend beyond 30 days after the end of the course or academic year, whichever occurs first. Days of recess for Winter Break or Spring Break will not be counted in the 30 days. A grade of E will be submitted by the course master if the remedial examination is not accomplished within the course dates. This grade will stand on the academic record until it is replaced with a valid final grade of Pass or Fail. Grades of E that are not resolved within 30 days will be replaced with a grade of Fail (F). If the student successfully remediates the examination, and has otherwise passed the course, a Pass (P) will be recorded by the Registrar. A student may remediate only one examination in any course.

2. Enroll in and successfully complete, at the level designated by the course master, a summer course at a different institution, such course being completed and passed by the beginning of classes for the second year.
3. A student who, for a single course, fails the re-examination taken to remediate a failed course or fails to successfully complete an approved summer course will be referred for the CAPES to review and propose a recommended course of action. The CAPES may require such a student to enter an ISP or may terminate enrollment. Alternatively, the CAPES may permit a re-examination. If this re-examination is failed enrollment will be terminated.

C. A student for whom the Registrar has recorded a Fail/Incomplete grade in two or more courses during the first year will be referred to the CAPES for determination of a course of action. The Committee may decide to require that the student enter an ISP, or to permit the student to take re-examinations, if a re-examination has not already been taken, in the courses for which Failed/Incomplete grades have been recorded. Such re-examinations will generally occur during the last week of the inter-academic year break. If such a re-examination is failed, the student may be required to enter an ISP or be dismissed from enrollment in the School.

D. The Associate Dean for Student Affairs may also request that the CAPES review performance of a student who has demonstrated poor academic performance, either by demonstrating poor academic performance in two or more courses at interval evaluations conducted throughout the course, or by failing two or more examinations within one course. In such instances the CAPES may recommend a course of action.

If Fail/Incomplete grades have been recorded for two or more courses or a single re-examination, the CAPES may require that a student enter an Individual Study Program or that enrollment in the School be terminated. If a student has failed three attempts to pass a course, enrollment will be terminated.

E. All first-year courses must be completed before the start of the next academic year.

Second Year

A. The Associate Dean for Student Affairs will meet with students in the following categories regarding taking a re-examination, according to the schedule listed under the next section (B):

1. a student for whom a Fail or Incomplete grade has been recorded in a single interval examination in a year-long course, OR

2. a student for whom a Fail or Incomplete grade has been recorded in one or two block-long courses.

B. Re-examinations in complete courses in Pathology or Clinical Medicine will generally be offered during the last week of the inter-academic year break, prior to entry into the third year. Re-examinations for students who have failed one or two block-long courses will be generally offered at a time determined by the course master and the Associate Dean for Student Affairs. All re-examinations must be offered to students and completed by them prior to the start of the next academic year.

Students who fail a re-examination of a single course will be referred to the CAPES to determine a course of action. The CAPES may decide that the student must enter an ISP. Alternatively, a re-examination may be offered. If the re-examination is failed, enrollment will be terminated.

C. Students in the second year for whom the Registrar has recorded Fail/Incomplete grades under the following categories will be referred to the CAPES for review and resolution of a recommended course of action:

1. one year-long course OR
2. three or more block-long courses OR
3. an interval examination in one year-long course and two block-long courses OR
4. an interval examination in two year long courses OR
5. students for whom the Registrar has recorded a Fail/Incomplete grade in any re-examination.

D. At review by the CAPES for students referred to above, the Committee may decide to permit the student to take re-examinations, if a re-examination has not already been taken, in the courses for which Failed/Incomplete grades have been recorded. Such re-examinations will generally occur during the
inter-academic year break. The CAPES may allow the student to defer beginning the clinical rotations so that re-examinations may be taken up to 6 weeks after the beginning of the usual cycle of clinical clerkships. Such extra time, used for study and preparation, will ordinarily mean that the student will not have the usual unscheduled time in the elective year. In the event that a Fail/Incomplete grade is recorded at a re-examination, the CAPES may require that a student enter an Individualized Study Program or that enrollment in the School of Medicine be terminated.

In the event that the CAPES decides not simply to permit re-examination, the CAPES may require that the student enter an Individualized Study Program as detailed below, or that enrollment in the School be terminated.

E. No student will be permitted to begin clinical rotations of the third year until all first- and second-year courses have been successfully completed.

**Cumulative Academic Review/Academic Warning**

Prior to promotion to the clinical year, the CAPES will review the cumulative academic record of each student brought forth by the Associate Dean for Student Affairs to determine whether the student’s academic performance justifies advancement to the clinical phase of the medical education without warning. Typically, three (3) remediated examinations and/or failing grades during the first two years of the curriculum would raise concerns about the student’s fund of knowledge and readiness to participate in clinical care of patients. Students with overall records indicating such serious academic failure may be dismissed, may be required to repeat specific preclinical course work or may be advanced to the third year with academic warning.

Upon written notification of advancement with academic warning into the clerkship year, the student must meet with the Associate Dean for Student Affairs

A. to review the planned clerkship schedule in order to consider schedule changes to facilitate successful clinical experiences;
B. to pursue available resources for academic intervention; and
C. to address any additional problems that may arise. It is recommended that these students seek tutorial assistance through each clerkship course master.

A third-year student who has received an academic warning after the first two years and then fails any component of a clinical clerkship may be dismissed from the school.

**Third and Subsequent Years**

A. Regarding performances beyond the second year, the Associate Dean for Student Affairs will meet with a student for whom a single Fail/Incomplete/E grade has been entered regarding the requirements stipulated by the relevant course master to remediate the grade entered. Options will generally include a re-examination or repeating all or a portion of the course. If a Fail/Incomplete grade has been entered following the prescribed remediation, the student will be referred to the CAPES to determine a course of action. When such a student is referred to the CAPES, the CAPES may permit a re-examination or repeating all or a portion of the course. If the course is failed a third time, enrollment in the School of Medicine will be terminated.

B. A student beyond the second year for whom the Registrar has recorded two or more failing grades in the clinical rotations or electives will be referred to the CAPES for review and proposal of a course of action.

C. Any student who fails to achieve a passing grade (defined as greater than or equal to 10th percentile as reported by the NBME) on any two or more subject (shelf) examinations conducted as part of the evaluation of clerkships will be referred to the CAPES for review and proposal for a course of action.

D. The Associate Dean for Student Affairs may also request that the CAPES review performance of a student who has demonstrated poor academic performance in two or more courses at interval evaluations conducted throughout the course when such performance has been reported to the Associate Dean. In such instances, the CAPES may recommend a course of action.

E. For students referred to the CAPES, the Committee may endorse or amend the remediation
recommendations of course masters from whom Fail/Incomplete grades have been entered. In the event that a student fails such a course of remediation, as defined by the course master and approved by the CAPES, the CAPES may require that the rotation be repeated or that enrollment of a student in the School be terminated. Students will generally be permitted three attempts to achieve a passing grade in any clerkship course. If three failing examination grades or final clerkship grades have been submitted for a course, enrollment will be terminated.

F. A student who advances to the clinical years with academic warning and who fails any component of a clerkship will be referred to the CAPES for action including possible termination.

See Cumulative Academic Review/Academic Warning.

Procedures Concerning Review of Academic Performance

Actions for Academic Review shall be referred to the CAPES for consideration by the Associate Dean for Student Affairs or Registrar’s office.

A. The Associate Dean for Student Affairs will convene a meeting of the CAPES. He/she shall notify the student in writing of the course(s) for which Academic Review is scheduled and the date and time at which the CAPES will address the matter.

B. The Associate Dean for Student Affairs, the Registrar, the course master(s) or their designated representatives, shall present the matter to the CAPES in a closed and confidential CAPES meeting.

C. For students referred for course failure, the CAPES meetings will have, in addition to the grade report forms for the course for which the student is referred to the CAPES, a complete record of the student’s academic performance and the student file.

D. Seven voting members must be present to consider items of academic disciplinary action (i.e., dismissal from enrollment or required entry into Individual Study Program).

E. All students to be considered at a CAPES meeting will be asked to be available to appear before the Committee to provide additional information relevant to the concern. If the student fails to be available to appear at the meeting, the Committee may postpone the meeting or may conduct the meeting and impose sanctions without the student present. Failure of a student to appear or provide information requested by the CAPES may result in the committee’s filing a professionalism concern form. Meetings may be rescheduled at the discretion of the CAPES Chair.

F. The student shall be permitted, upon request in advance of the CAPES meeting, to appear before the CAPES on his or her own behalf. At the student’s request, he or she may be accompanied by a member of the faculty or staff of the School of Medicine for guidance and support. Alternatively, again following request, the student may be accompanied by a fellow student enrolled in the School of Medicine.

G. A record of the CAPES meeting shall be preserved for purposes of review by the School of Medicine’s Appeals Committee, as necessary.

H. Action taken by the CAPES for poor academic performance may include dismissal. Sanctions short of dismissal from the school include but are not limited to warning, probation, defined penalty, and suspension. Additional consequences may include a program of remediation or additional oversight. The CAPES may also rule that the Dean’s letter/MSPE should include a citation regarding the matter. The CAPES decision shall be by simple majority vote unless the vote is for dismissal, in which case, a three-fourths majority will be required. The decision of the CAPES shall be communicated, in writing, to the student by the Registrar’s office.

I. After the meeting, the Associate Dean for Student Affairs will inform the student verbally of the decision of the CAPES. The Registrar will inform the student in writing of the result within ten working
Indications for Review of Professional Integrity

Matters involving possible breaches of professional integrity shall be brought to the attention of the Associate Dean for Student Affairs. The individual(s) raising the questions of possible misconduct shall present them in writing to the Associate Dean for Student Affairs by completing a Professionalism Concern Form providing other detailed written information as necessary. Individuals submitting such forms are reminded of the need for confidentiality regarding all matters of misconduct.

Behaviors inappropriate to the medical profession shall include, but are not limited to breaches of personal confidence and trust, including cheating or unauthorized use of materials during examinations; abuse, misrepresentations or other seriously improper conduct in relation to patients or colleagues including breaches of confidentiality; other misconduct; illegality; substance abuse; failure of judgment including that related to non-compliance in the treatment of any personal medical condition; and misrepresentation or failure in personal actions or in meeting obligations, so as to raise serious unresolved doubts about the integrity of the student to enter the practice of medicine. See Guiding Principles of Professionalism below.

Procedures Concerning Review of Professional Integrity

At the discretion of the Associate Dean for Student Affairs, in cases of serious or repeated breaches of professionalism raising concern about a pattern of behavior, the Associate Dean for Student Affairs will convene a meeting with the Associate Dean for Admissions or the Associate Dean for Medical Student Education to review the complaint and to decide whether further action is necessary.

If further inquiry is deemed necessary, the Associate Dean for Student Affairs and either the Associate Dean for Medical Student Education or Admissions will discuss the complaint with the student. If the two Associate Deans deem that further action is warranted, the Associate Dean for Student Affairs will follow the procedures below:

A. The Associate Dean for Student Affairs will convene a meeting of the CAPES. If the person bringing the complaint is a member of CAPES, he or she will not vote but may participate in the discussion. If the person bringing the complaint is not a member of CAPES, he or she will be asked to present the complaint and will then be excused. The CAPES chairperson will be responsible for overseeing the procedure of the meeting. The Registrar will attend the meeting to record the minutes. The CAPES shall, whenever possible, convene within one to two weeks after the initial meeting between the student and the Associate Dean for Student Affairs.

B. Seven voting members must be present to consider items of academic disciplinary action (i.e., dismissal from enrollment or required entry into Individual Study Program).

C. The purpose of the CAPES meeting is to provide fair and prompt review of the inquiry. The Committee is not positioned in an adversarial role against the student, but simply serves to review the evidence as presented and determine its decision regarding disciplinary action.

D. Prior to the meeting, the Associate Dean for Student Affairs will forward information concerning the matter to the Committee. In addition, the Associate Dean for Student Affairs will inform the student in writing regarding the time, date and place of the meeting. A copy of the complaint will be provided to the
student. Such notification shall also state that the proceedings are confidential, and that the student may bring a faculty member, staff member or fellow student of the School of Medicine for guidance and support.

Any student to be considered at a CAPES meeting will be asked to be available to appear before the Committee to provide additional information relevant to the concern. If the student fails to be available for the meeting, the Committee may postpone the meeting or may conduct the meeting and impose sanctions without the student present. Failure of a student to appear or provide information requested by the CAPES may result in the committee's drawing adverse conclusions. Meetings may be rescheduled at the discretion of the CAPES Chair.

E. The CAPES will consider evidence which tends to prove or disprove the alleged conduct. If the CAPES finds that the student engaged in misconduct, it may consider additional evidence of prior conduct, evidence as to the charged student’s character, the student’s academic record, or any other evidence which could assist the CAPES in determining an appropriate sanction. The Chair of the CAPES will rule on whether or not evidence or testimony will be considered. The CAPES has neither the advantages nor limitations inherent in a court of law. During the meeting the student will have access to the evidence presented and may present evidence and witnesses on his or her own behalf.

F. The decision as to whether the student committed the alleged act will be made solely on the basis of evidence and testimony presented at the meeting. Innocence of the student will be presumed. A CAPES member must find in favor of the student unless the member is persuaded that it is more likely than not that the student engaged in the misconduct alleged.

G. If the person who has submitted the Professionalism Concern Form which is being discussed by the CAPES is a member of the CAPES, that member will provide information about the professionalism issue to the CAPES, but will then recuse him/herself from voting.

H. Action taken by the CAPES for breaches of professional integrity may include dismissal. Sanctions short of dismissal from the school include but are not limited to warning, probation, defined penalty, suspension, fine and restitution. Additional consequences may include a program of remediation or additional oversight. The CAPES may also rule that the Dean’s letter/MSPE should include a citation regarding the matter. A simple majority will prevail, except when the motion is to dismiss from the school where three fourths majority will be required.

I. After the meeting and decision of the CAPES, the Associate Dean for Student Affairs will inform the student verbally of the result. The Registrar will inform the student in writing of the result within ten (10) working days.

J. The record of such proceedings will be held confidentially with access restricted to Committee members, the student involved, and members of the Administration involved in the proceedings.

K. All witnesses who appear before the Committee are assured that there will be no personal repercussions from their testimony.

L. Unless it is determined by the Associate Dean for Student Affairs that extraordinary circumstances exist, the student will be permitted to continue in the usual academic activities during the CAPES proceedings. However, if there is a reasonable basis for believing that the continued presence of the student on campus or in clinical rotations poses a substantial threat to the student, to patients or to the rights of others to engage in their normal University functions and activities, the procedure outlined under section B of Leave of Absence applies.

M. Should a student be referred to the CAPES for an issue(s) involving both academic performance and professionalism concerns, the procedures for Professionalism Concerns will be followed.
**Appeals Process for the CAPES Decisions**

The School of Medicine has the right and responsibility to assure that each student, during the time of enrollment, demonstrates levels of academic achievement and ethical stature appropriate to the practice of medicine. The School must also ensure provision of fairness in discharging those rights and responsibilities.

Within twenty (20) days of the date on which an Academic Disciplinary Action decision is rendered by the CAPES, the student may request, in writing to the Registrar, that the School of Medicine’s Appeals Committee review the record of the CAPES decision or that the Appeals Committee request that the CAPES consider additional information which was not previously presented to the CAPES. The letter to the Registrar should include the basis for the appeal as well as any new relevant information.

An Appeals Committee, composed of faculty members appointed by the Dean of the School of Medicine, shall be created to review appeal of decisions by the CAPES. Members of the CAPES Committee may not be appointed to the Appeals Committee. A quorum of this committee shall consist of five (5) members.

The Appeals Committee shall review the record of the CAPES decision solely to determine whether the pertinent CAPES procedures were followed and whether all relevant information was considered by the CAPES. If the appeal is based on a contention that all relevant information was not presented to the CAPES, the appeal must provide the Appeals Committee with adequate reason why the student did not present this information at the CAPES meeting in question. In all cases, the Appeals Committee shall not substitute its opinions of the merit of matter and appeal for those of the CAPES.

On all appeals the Appeals Committee may either remand the matter to the CAPES for reconsideration with its explanation for the remand, or deny the appeal. If the matter is remanded to the CAPES, all documents, minutes of the Appeals Committee meeting, and information submitted by or for the student in support of the appeal will be made available to the CAPES. The Appeals Committee shall provide its decision in writing to the Dean, the student, the CAPES, the Associate Dean for Student Affairs and the Registrar. The Appeals Committee shall determine whether the student may continue his or her curriculum pending its review of a CAPES decision.

Within twenty (20) days of the date of an Appeals Committee’s decision or referral back to the CAPES, the student may request, in writing, that the Dean of the School of Medicine review the decision of the Appeals Committee. The decision of the Dean shall be final.
Situated at the confluence of two great North American rivers — the Mississippi and the Missouri — the St. Louis region has been a favored destination since Lewis & Clark began their historic westward "Corps of Discovery" here in 1804.

Today, the pioneers of St. Louis are the engineers, scientists, business leaders, educators, artists and other innovative and creative professionals who are working at the forefront of a multitude of fields and endeavors. Thanks in large part to Washington University, other regional universities and key Fortune 500 corporations, St. Louis has developed into a national hub for important research and business development, especially in the fields of biotechnology and plant science.

Consistently ranked among the nation's most affordable and best places to live and raise a family, the St. Louis region offers many opportunities to watch or participate in a wide range of sports, recreational activities and cultural events. Not far from St. Louis' urban core are the beautiful rolling hills of the Ozark Mountain region and outdoor activities such as hiking, canoeing and spelunking in some of Missouri's more than 6,000 caves.

**Cultural Opportunities**

New St. Louisans discover the rich cultural life here in theaters, galleries, museums and festivals. The Saint Louis Symphony, among the finest in the nation, performs at historic Powell Hall. Symphony members bring their skills to the community through teaching and chamber concerts as well. In the downtown area, the rich St. Louis traditions in jazz, blues and ragtime music are continued in a number of lounges and clubs. The Community Music School of Webster University offers community music education to all ages, and COCA (Center of Creative Arts) is the largest multidisciplinary arts institution in the metropolitan area.

The Opera Theatre of St. Louis has been enormously successful, nationally and internationally, bringing English-language versions of the classics and presentation of contemporary operas to the stage. The Repertory Theatre of St. Louis has an extensive annual season, which includes experimental works and
traditional dramas. The Stages St. Louis Theatre Co., Kirkwood Theatre Guild, West End Players Guild, Act. Inc. and the Saint Louis Black Repertory Company enrich the dramatic offerings available in the immediate area. On campus, Edison Theatre offers the highest quality in national and international programs in theater, dance and music. For open-air summer entertainment, the Shakespeare Festival of St. Louis and The Muny, both in Forest Park, are prime destinations.

Broadway comes to St. Louis at the Fox Theatre, a renovation of a 1929 example of exotic cinema temple art. Galleries sprinkled throughout the area bring current visual arts to St. Louis, while antique shops remind us of the past. The St. Louis International Film Festival takes place every fall. Supplementing the standard movie fare available throughout the metropolitan area are two cinemas close to campus, the Hi-Pointe and the Tivoli, both offering excellent foreign and independent films.

When the Saint Louis Art Museum was built for the 1904 World’s Fair, much of the Washington University collection was housed in it. Ties with the Art Museum remain very close. Students in art and in business intern at the Art Museum, working in arts management and gallery organization. St. Louis also features Laumeier Sculpture Park, which displays large-scale sculptures by artists of international renown.

St. Louis has two major history museums as well: the Missouri History Museum in Forest Park and the Museum of Westward Expansion under the Gateway Arch.

**Recreation**

For recreation, St. Louisans may use any of the numerous parks that dot the metropolitan area. In Forest Park, which lies between the two Washington University campuses, are the Art Museum, The Muny, Missouri History Museum, the St. Louis Zoo, municipal golf courses, tennis and handball courts, a skating rink, and acres of paths, picnic areas, gardens and wooded groves. Tower Grove Park is in south St. Louis, and adjacent is the Missouri Botanical Garden, world famous for its research, collections and facilities.

Farther afield, St. Louis residents find outdoor adventure in the countryside beyond the city. In the Ozark Mountains, on the rivers of Missouri, on the lakes of neighboring Illinois, variety abounds. Camping, hiking, floating, rock climbing and caving are among the many possibilities within a few hours’ drive of St. Louis. For those who like to sail, there is Carlyle Lake in Illinois. And for those with rod and reel, Missouri streams are made to order.

The Washington University Athletic Complex provides outstanding resources to athletes at every level of ability. Open to all members of the University community, it includes an eight-lane, 25-meter pool, two gymnasiums, weight rooms, racquetball courts, outdoor tennis courts and a track complex. Built on the site of the 1904 Olympic Games, this facility offers recreational opportunities year-round for students, faculty and staff.

For the spectator, St. Louis is a great sports town. For more than a century, it has hosted one of the oldest traditions in baseball — the St. Louis Cardinals. Dizzy Dean and the Gashouse Gang, Stan Musial, Lou Brock, Ozzie Smith and Mark McGwire are all part of Cardinal history. The current Busch Stadium opened in spring of 2006 and played host to the 2009 All-Star Game.

St. Louis’ NFL Rams brought home the Super Bowl trophy in 2000, after being welcomed to the community in the fall of 1995. The St. Louis Blues hockey team moved here in 1967 and enjoys loyal fans. St. Louis also supports a number of semi-pro sports teams.

**Employment and University Ties with St. Louis**

St. Louis is a great place to work; job opportunities are varied and abundant. Many companies are distinguished for their excellent working conditions, and commuting is easier than in many other large cities.

Many major corporations are located here, as are a variety of retail, transportation and banking
organizations. Among the top firms are Ameren, Boeing, Edward Jones, Emerson Electric, Enterprise Rent-a-Car and Express Scripts. Many support services have grown up around these corporations — including law, accounting, data processing, advertising, public relations and design firms, as well as photographic and audio-visual studios.

Employing more than 20,000 people, the Washington University Medical Center (WUMC) is made up of the School of Medicine, the Alvin J. Siteman Cancer Center, Barnes-Jewish Hospital and St. Louis Children's Hospital. The medical center generates an annual economic impact of nearly $4.3 billion for the St. Louis area, according to an economic model maintained by the St. Louis Regional Commerce and Growth Association.

The John M. Olin School of Business at Washington University enjoys a rich and varied partnership with the business community. As a laboratory for internship opportunities, entrepreneurship study, and student practicums offered through Olin's Center for Experiential Learning, St. Louis plays an integral role in the education of business students. In turn, Olin creates value for area businesses by matching top Olin talent with pivotal positions in their firms.

Similarly, the School of Law has close ties with the St. Louis legal community and, through its clinical program, offers internships in private and local government offices and in state and federal courts. In addition, the law school is fortunate in the active and interested role of the local bar associations in the development of the school's special programs.

The George Warren Brown School of Social Work also is linked in many ways to the St. Louis social work community. Students find practicum assignments throughout the area, and both students and faculty do research and consult with local agencies.

A strong partnership exists between technology-based businesses and industries in St. Louis and the School of Engineering & Applied Science. There is a network of more than 80 faculty members associated with Department of Biomedical Engineering, representing numerous divisions of the university, including many from the School of Medicine.

In addition to their ties to local business, both the Danforth Campus and the School of Medicine at Washington University are dedicated to the support of K-12 education. Students from the medical school participate in a variety of outreach programs, including Students Teaching AIDS to Students (STATS), designed to teach awareness and responsible behavior to junior high school students; the Young Scientist Program, an interactive learning experience that brings high school students to the medical center; and health and preventive programs on drug and sex education.

In short, Washington University enjoys a special relationship with St. Louis.

**Interesting St. Louis Area Facts**

- St. Louis has many nicknames, including the "Gateway City," "Gateway to the West," "The Mound City," "St. Louie," "River City," and "The 'Lou."
- There are more free, world-class attractions in St. Louis than any place in the nation outside of Washington, DC.
- The Saint Louis Zoo was the first municipally supported zoo in the world and a pioneer in the use of open enclosures, placing animals in natural environments without bars.
- Some of the world's favorite foods were popularized and introduced to a wide audience at the 1904 World's Fair in St. Louis. The ice cream cone, iced tea and hamburgers all became food favorites there. It is said that the fair was the first place where hot dogs met French's mustard.
- The Eads Bridge over the Mississippi River, near the present site of the Gateway Arch, was the first arched steel truss bridge in the world. When it was first proposed, it was scoffed at as impossible to build. Completed in 1874, it is still in use today.
- In 1904, the first World Olympics in the United States and the Western Hemisphere was held in St. Louis at Washington University's Francis Field.
- The Cathedral Basilica of St. Louis contains the largest collection of mosaic art in the world.
- In 1876, St. Louis hosted the first national political convention west of the Mississippi.
- In 1927, a group of St. Louis businessmen gave financial backing to the first solo transatlantic
flight from New York to Paris. The pilot was Charles Lindbergh and the plane was named “The Spirit of St. Louis.”

• St. Louis' McDonnell Douglas Corporation, now Boeing, designed and built the space capsule that carried the first men into space in the 1960s.
• C.L. Grigg, a soft drink salesman, introduced a drink to St. Louisans in 1929 that would eventually become known as 7-Up.

Housing

Those who come to St. Louis to be associated with Washington University School of Medicine find apartments, houses, condos, lofts, and short-term housing that range in price from $680 to $2,000 per month, all in the immediate area. Apartment Referral Services, located on North Campus, maintains listings of housing appropriate for married and single students. For information, contact Apartment Referral Services at ars@wustl.edu, Campus Box 1016, 700 Rosedale Ave., St. Louis, MO 63112 or (314) 935-5092. You may also visit the web site at http://ars.wustl.edu. For information about Quadrangle Housing (Washington University-owned housing options), visit and http://www.offcampushousing.wustl.edu.

The Spencer T. Olin Residence Hall, (314) 362-3230, at 4550 Scott Ave. at the Washington University Medical Center, has accommodations for approximately 168 single men and women. The building was made possible by generous gifts from Spencer T. Olin, alumni and friends of the School of Medicine. Olin Hall is planned for the convenience of students in the medical or paramedical sciences and includes shared cooking facilities, a gymnasium, weight room and state-of-the-art workout facility, laundry room and penthouse with a recreational area and large-screen television with satellite system. Every effort is made to provide an atmosphere that not only aids residents in meeting their study obligations, but also recognizes their privileges as graduate students.

The rates for 2012-13 are:

Summer 2012 (May 19 – July 29)

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*Price per student

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<th>New Resident</th>
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<td>Single Room:</td>
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*Price per student

School Year: Mid August-Mid May (Nine Months)

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<th>Current Resident</th>
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Single Room: $4,320
Large Single: $5,181
Solo Suite: $6,294
Double Room: $2,909*
Double Suite: $4,320*

*Price per student

New Resident
Single Room: $4,525
Large Single: $5,428
Solo Suite: $6,593
Double Room: $3,048*
Double Suite: $4,525*

*Price per student

**Security**

Security at the School of Medicine is the responsibility of Protective Services. Uniformed Protective Services Officers are on duty 24 hours a day, seven days a week to provide for personal safety, reduce the opportunity for crime, apprehend law violators, provide crime prevention and awareness training and assist in enforcement of University rules and regulations. Armed Response Officers and unarmed Public Safety Officers are radio-dispatched. They respond immediately to telephone calls made to 362-HELP (4357). Officers patrol the campus on foot, on bicycles and in marked mobile units. Contract Agency guards staff a few fixed posts to supplement the in-house officers.

The Medical School access control program makes the campus easily accessible after hours and on weekends. Faculty, staff and students are issued a photo identification badge that identifies the wearer as a member of the medical school community. The badge has a magnetic strip that activates the computerized door lock entrances to the School’s buildings. These entrances have two-way intercoms for direct communication with Protective Services’ Communications Officers, as do direct-ring telephones located outside selected campus buildings and "Code Blue" emergency telephones on surface parking lots and in the garages.

Each year Protective Services publishes a summary of statistical information concerning campus crime, as required by federal law, on the medical school web page at http://wusmproserv.wustl.edu/. This information may be found under "Campus Crime Statistics 2009-2010-2011." A daily crime log, information on crime prevention tips and the many services and programs provided by Protective Services also appear on the web. For a printed copy of the annual security report, contact Washington University School of Medicine, Protective Services Department, Campus Box 8207, 660 S. Euclid Ave., St. Louis, MO 63110, or by calling (314) 362-0460.

**Parking and Transportation (U-Pass & WeCar)**

Hourly, daily and permit parking is available in the 2300-space School of Medicine Clayton Garage (corner of Clayton and Taylor avenues) and the 700-space School of Medicine Metro Garage (corner of...
Children’s Place and Taylor Avenue). There is also limited surface permit parking on the School of Medicine surface lots. As construction around the Medical Center increases, surface parking inventory decreases. The WUSM surface lots are in various locations around the Medical Campus with unreserved spaces on a first-come basis. School of Medicine surface parking permits are required Monday through Friday from 7 a.m. to 2 p.m. Surface permits are not required all day Saturday and Sunday and during the week between 2 p.m. and 7 a.m. Parking in patient or visitor spaces by faculty, staff or students is strictly prohibited at all times. Additional information, maps and fees are available at http://wusmparking.wustl.edu, by calling (314) 362-6824 or in our office in Becker Medical Library Lobby, 660 S. Euclid, from 9 a.m. to 3 p.m.

If you are interested in carpooling, vanpooling, Metro passes or coupon books, please contact the School of Medicine’s Transportation Services. For those who occasionally drive to the medical school, you can purchase a Prepaid Exit Pass (PEP) for either the WUSM Clayton or Metro Garage. The PEP can be purchased in advance via cash or check from WUSM Transportation Services in denominations of 5, 10 or 20 exits. Each card has bonus exits based on the number of exits purchased. The PEP is perfect for those who usually carpool, bike, walk or use Metro to get to campus.

Shuttle service is available for transportation from one site to another within the Medical Campus in accordance with specific shuttle schedules. If additional information, maps or shuttle schedules are needed, please visit http://wusmparking.wustl.edu, contact Transportation Services at (314) 362-6824 or stop by our office in Becker Medical Library Lobby, 660 S. Euclid, from 9 a.m. to 3 p.m.

If you are a registered full-time student of Washington University, Washington University School of Medicine, or a benefit-eligible employee of the same; you can register for a U-PASS online at http://parking.wustl.edu/upass.htm. There is no charge for the U-PASS. The U-PASS allows you to access the MetroBus and MetroLink system; however, you must show your valid Washington University ID in conjunction with a valid U-PASS to ride free. The Danforth Campus, West Campus, North Campus and Medical Campus all have MetroLink stations. The Medical Campus also has the Central West End MetroBus hub. Please note: Until an employee ID is fully approved, you will not be able to apply for a U-PASS. This can take from a few days to a few weeks!

For those needing a car to run an errand or for overnight, we have a car-sharing program called WeCar. Located on Lot E (off McKinley Avenue behind Olin Residence Hall), a WeCar is available for use for only $5/hour (there is a separate rate for overnight use). Go to http://parking.wustl.edu/wecar.htm, print the agreement and within three to six business days after membership approval, you will be issued your personal key fob and customer PIN number. Then go online and reserve a time!

**Lockers**

Student lockers with combination padlocks are on the third and fourth floors of the Farrell Learning and Teaching Center. Locker assignments are made by the Registrar’s Office for a nominal fee to cover the cost of the padlock. Only padlocks issued by the Registrar’s Office may be used.

**Mail**

First-class student mail sent to the School of Medicine will be put in student mailboxes. This will most probably serve as a temporary mailing address and be used only until students are settled in St. Louis. It is important that mail addressed and sent to the School of Medicine include both student status (WUMS = Washington University Medical Student) and year, as follows:
Student Health Service

Director: Karen S. Winters, MD
Information/Appointments: (314) 362-3523
Billing/Benefits: (314) 362-2346

For a complete description of benefits please visit http://wusmhealth.wustl.edu/.

The Student Health Service provides a complete service for full-time students registered in the School of Medicine. Services are provided through a self-funded program included in tuition costs. Services include professional care by staff internists and counselors, with referrals to other consultants. Services are available by appointment on site at 4525 Scott Ave., Suite 3420, Monday through Friday from 8 a.m. to 4 p.m. The Health Service has implemented an after-hour coverage monitored by Dr. Winters. Students may call 362-3526 after hours for non-urgent care. All medications, diagnostic tests, X-rays and consultations ordered by the physicians are covered 100 percent with a small co-payment, in the absence of private insurance. In addition, the Health Service offers full major medical benefits including labor and delivery. Emergency care is available at the emergency department of Barnes-Jewish Hospital.

There is a maximum lifetime benefit per student of $1,000,000. The student or his/her family is responsible for meeting the costs of hospital care in excess of those paid by the Student Health Service. There are no benefits for outpatient care or medication away from the Medical Center. The responsibility of the Student Health Service for hospitalization and emergency care will end 30 days after an individual ceases to be an officially enrolled student. The School of Medicine also offers a dental, disability and life insurance policy to all full-time students registered in the medical and allied professional schools of the Medical Campus. The Student Health Service offers easy access to medical and psychiatric care so that physical and emotional problems will not interfere with university life. Subsequent medical care is provided as long as full-time enrollment is maintained in the School of Medicine.

The Health Service pre-screens every incoming student prior to their arrival at the School to ensure all federal requirements have been met regarding communicable diseases. Entering students are required to have a medical examination within one year of matriculation and to show proof of immunity to measles (rubeola), rubella and mumps and a tetanus booster within 10 years. The Health Service tracks all immunizations during and prior to enrollment. Statements of Health for internships and practicums are provided.

Spouses, Dependents

Students frequently ask if they can purchase health coverage for their spouse and/or dependents through Student Health Services. Student Health Services is a benefit available to full-time students enrolled in the medical or allied professional schools only, and there is no provision for health coverage for spouse and/or dependents. For your convenience, Student Health has partnered with Destefano & Associates to assist your spouse/dependent with their insurance needs. For more information please contact Sharon Silver at (636) 230-2928. However, Student Health Services has arranged a few alternative options for you to review.

Dental Care
Benefits provided by Student Health Service for injury to a sound natural tooth only. Coverage for injury to a sound natural tooth is 100% of the first $300 of expenses, and 80% of the balance, not to exceed $1,000 as a result of any one accident. Student Health Services will provide a list of private dentists upon request.

In addition to the benefit provided by Student Health Service, all eligible full-time students registered in the medical and allied professional schools of the Medical Campus will be covered by a prepaid dental plan through Assurant Employee Benefits Heritage. All full-time students are covered automatically, with the coverage premium paid for by WUSM Student Health Service. There are no enrollment forms for the student to complete. However, you will NOT officially have coverage until a participating dentist is selected. To select a participating dentist, you may call Assurant Customer Service at (800) 443-2995 or visit their web site at www.assurantemployeebenefits.com. You must select a participating general dentist in Assurant’s Heritage network before you can use your benefits. This plan is available to your family members as well for the yearly premium; see Student Health Benefit office for details.

Counseling Services

Students at the Medical Center may have concerns over poor concentration, ineffective study habits, anxiety over their performance, low self-esteem, getting along with others, grief or depression. The psychiatry and clinical psychology staff members are available to help students cope with these concerns. Initial evaluations are made at the Student Health Service. Subsequent care may be at the Medical Campus or a designated physician’s office. Call 362-3523 for more information. All records are confidential and may not be seen by anyone without the student's written consent.

In addition, Student Health Service provides a Student Assistance Program (SAP) for all enrolled students and their immediate family members. This prepaid benefit is offered as a way to help our Students resolve issues that may have an impact upon their personal lives and their school performance.

The SAP provides confidential, professional assistance to full-time enrolled students and their family members to help resolve problems that are affecting their personal life or school performance. The program is managed by ENI, a nationally known professional consulting firm specializing in SAP services.

Students can contact ENI 24 hours a day, seven days a week to arrange a confidential appointment with an SAP specialist. SAP specialists have professional training and expertise in a wide range of issues such as academic problems, eating disorders, credit problems, adjusting to school, marriage and family problems, alcohol and drug abuse, emotional and psychological concerns, financial difficulties, stress and much more.

The SAP can be reached by calling (800) 327-2255 and selecting prompt #3.

Disability Insurance

All students are covered by group disability insurance. A student who is completely disabled for six consecutive months is eligible to receive $500 per month benefit. Coverage increases to $1,500 per month in the third year. Individual disability policies are issued to fourth-year students, increasing the total monthly benefit to $2,000. Individual policies are portable, guaranteed issue and can be increased after graduation up to a maximum $4,700 per month benefit. Call 362-2346 for more information.

Life Insurance

All eligible full-time students registered in the Washington University Medical School and allied professional schools are covered automatically, premium paid for by WUSM Student Health Service. An enrollment form listing your beneficiaries is required to complete enrollment. In brief, the term life insurance plan and AD&D plan for medical students and affiliated programs provided by Guardian is as follows: term life plan provides $10,000 of term life insurance and the AD&D plan $10,000 of accidental death and dismemberment protection. A detailed description of the plan is available at Student Health Services.
Upon graduation, you can convert the amount of your term life insurance to a participating whole life plan underwritten by Guardian.

**Dress Code**

While Washington University School of Medicine does not have a written dress code, it is expected that all students will dress in attire that is appropriate for a professional.

Appropriate attire in the clinical setting is especially important, not only because the student will be part of the team representing the medical profession to patients, but also because the student will be representing the School of Medicine.

Appropriate attire for male students on the clinical services includes man-tailored shirt and tie, trousers or slacks and closed toe shoes. Appropriate attire for female students includes a dress, a blouse, tailored shirt or sweater, slacks or skirt, and closed-toe shoes. Both men and women should wear a short white jacket with the appropriate hospital identification card clearly visible.

**Student Organizations**

Students at Washington University School of Medicine are active participants in medical student organizations on the local, state and national levels. The American Medical Student Association (AMSA), the Student National Medical Association (SNMA), the American Medical Women’s Association (AMWA), the Asian-Pacific American Medical Students Association (APAMSA), the Medical Student Section of the American Medical Association (AMA-MSS), the Missouri State Medical Association (MSMA), the Organization of Student Representatives (OSR) in the Association of American Medical Colleges (AAMC) and the Student Organized Community Clinic (SOCC) provide forums for addressing the educational, social and political concerns of medical students. The School of Medicine supports student participation in these national organizations and provides partial funding for travel and other expenses on an annual basis. Medical Student Government (MSG) represents the student interests, supports social and educational activities and expands the perspectives of the future graduates of the medical school.

**Academic Societies**

To foster communication between students and faculty, three academic societies — The Joseph Erlanger and Evarts Graham Society, The Carl and Gerty Cori Society, and The Oliver Lowry and Carl Moore Society — meet independently throughout the academic year to enjoy a social hour, dinner and conversation. The societies promote a collegial environment for the medical school’s diverse faculty and student body. Medball, held in March of each year, is hosted in part by the academic societies and provides a formal social evening with medical faculty and medical students.

**AMA-MSS**

Washington University has an active chapter of the American Medical Association Medical Student Section. WUSM students are involved at the local, state and national levels and represent Washington University in policy development.

**AMSA**

On the local level, AMSA is the major student organization at the School of Medicine. The chapter’s annual activities include a speaker series and several community service projects.

**AMWA**

The American Medical Women’s Association is a national organization designed to address issues of
concern to women in medicine. Washington University has an active student group, and funding is available for student representation at regional and national meetings.

**APAMSA**
The Asian-Pacific American Medical Students Association was founded to address issues and needs specific to Asian-Pacific American medical students. To that end, it serves as a support group for students, fosters student-faculty interaction and promotes cultural awareness, as well as providing a framework for community service programs.

**Forum for International Health and Tropical Medicine**
The Forum for International Health and Tropical Medicine (FIHTM) was formed to promote awareness of international health concerns and facilitate international health experiences for medical students. In addition, the group has worked closely with administration in the design of a formalized international health elective program and funding structure.

**Program for Women in Science and Medicine**
The Program for Women in Science and Medicine is designed to foster interaction among women at all levels at the medical school. The program sponsors a variety of informal discussions, receptions and dinners with informative speakers throughout the academic year.

**SNMA**
The Student National Medical Association (SNMA) is the oldest and largest medical student organization focused around the needs and concerns of African-American, Latino and Native American medical students. This organization is concerned with providing services to medically underserved communities, promoting minority student recruitment and retention to schools that train health personnel and assisting in ways to provide quality education to minorities and women. Washington University has an active SNMA chapter, and funds are available for representation at regional and national meetings as well as for community service activities.

**Student Organized Community Clinic**
As the number of uninsured citizens in America continues to rise, the Student Organized Community Clinic (SOCC) provides an important service to the community of St. Louis. The clinic provides the sole access that many patients have to the health care system. It provides a close-up look for our student volunteers at how severe the problem of the uninsured in America is.

**Washington University Medical Center Housestaff Auxiliary**
WUMCHA, the Washington University Medical Center Housestaff Auxiliary (a department of Barnes-Jewish Hospital) is an organization made up of female medical students, residents, fellows, attending physicians, as well as the female spouses, partners and "significant others" of those affiliated with Washington University Medical Center, including Barnes-Jewish and St. Louis Children’s hospitals, the School of Medicine and Mallinckrodt Institute of Radiology. The purpose of the organization is to provide friendship and social support among its members. In addition to sponsoring numerous recreational and educational activities, WUMCHA publishes a welcome guide containing information about relocating to St. Louis and area attractions. Annual dues are $30. Information about membership and applications can be obtained by contacting Laura Hastie at (832) 215-1037 or laura.hastie@gmail.com, or by visiting [http://www.wumcha.com](http://www.wumcha.com).

**Community Service Experience**
Participation in a host of community service projects nurtures students' altruistic nature and provides an alternative educational experience. University-sponsored, student-run, community-based service activities include the **Perinatal Project**, which provides information concerning well-baby care and prenatal care to women from lower socioeconomic groups. **Students Teaching AIDS to Students (STATS)** allows trained medical students to provide sixth- and seventh-graders with information about AIDS. The combined efforts of medical students, faculty, middle school teachers, parents and speakers with AIDS have made STATS a very successful program. The **Geriatrics Outreach Program** helps prepare students for the challenges and rewards of working with older patients. **Pediatric Outreach Program (POP)** matches children in the St. Louis area who are suffering from chronic illnesses and the siblings of these children with big brothers and big sisters from Washington University School of Medicine. **Community CPR** trains medical students to become instructors in CPR for the medical school curriculum and in the community of
St. Louis. The *Mental Health Outreach Program* (MHOP) works to increase the awareness of mental health issues among medical students and the general public. The *Family Medicine Interest Group* works with the local community by providing health screenings and nutritional classes. *SPOTS* (Sun Protection Outreach Teaching by Students) is piloted to teach middle school students about the dangers of skin cancer and how to protect themselves from the sun. A newer group, the *Public Health Interest Group* (PHIG) is a student organization committed to partnering in the St. Louis community to include health screenings, nutrition outreach and public policy discussions. The Smoking Cessation Project works with the American Lung Association Freedom from Smoking Program and students are trained in counseling smoking cessation groups.

**Student Publications**

Students organize and spearhead several publications at the School of Medicine. The *Dis-Orientation Guide* is produced annually as a student-to-student guide to the curriculum and the city. *Hippocrene* is a literary magazine published once a year where you will find poetry, short stories, essays and photographs submitted by members of the WUSM community.

**Intramural Program**

Students enrolled in Washington University School of Medicine enjoy an active and diverse Intramural (IM) Program. The IM Program offers students the opportunity to participate in a wide range of sports. Utilizing the state-of-the-art facilities in the University’s Athletic Complex, medical students pursue personal athletic interests and enjoy interaction with students enrolled in both undergraduate and graduate degree programs. The IM Program provides an excellent opportunity to socialize with colleagues as well as other graduate students. Differences in curricular demands among participants are considered in scheduling games so that neither academic nor athletic goals are compromised.

Traditionally, the School of Medicine is represented each year by teams or individuals in over 10 intramural sports. In recent years, medical student teams competed in men’s and women’s flag football, soccer, volleyball, cross country, basketball, swimming, softball, and track and field as well as coed ultimate Frisbee, volleyball, inner tube water polo and softball. In addition, there are different levels of competition so that the needs of both the competitive and recreational athlete can be met.

The School has always made a strong showing in both the mixed and graduate school division, as evidenced by the many championship T-shirts team members sport.

**Primary Care Summer Preceptorship**

Students appreciate early and sustained patient contact. Since 1996 the school has sponsored a primary care preceptorship program for students during the summer between their first and second years of classes. Students select a preceptor in internal medicine, pediatrics or family practice and spend up to eight weeks observing that physician’s clinical practice. A stipend is provided to the student. Although many of the preceptors are in St. Louis, others, particularly alumni, are located in cities throughout the country. Applications should be made to the Associate Dean for Student Affairs, Washington University School of Medicine, Campus Box 8077, 660 S. Euclid Ave., St. Louis, MO 63110.

**Student Research Fellowships**
Student research is an important part of the educational program. Fellowships in basic science or clinical areas will be awarded each year to selected students who undertake research projects under the direction of faculty members. Research allows students to discover firsthand the problems and rewards of obtaining and assessing new information, thus adding another dimension to their experience as investigators.

Most students take the opportunity for research during the summer after their first year of classes, but incoming students to the school are also eligible. All research must be conducted at the School of Medicine. Students will be awarded a fellowship and stipend for a 2.5-month program. Inquiries should be made to Koong-Nah Chung, PhD, Associate Dean for Medical Student Research, Director of the Office of Medical Student Research, Washington University School of Medicine, Campus Box 8107, 660 S. Euclid Ave., St. Louis, MO 63110, (314) 362-6844, chungk@wusm.wustl.edu.

**Alpha Omega Alpha**

Alpha Omega Alpha is a national medical honor society. Members are selected by a standing AOA committee during the final year of medical school. Selection is based upon academic performance during the first three years, in addition to other qualities such as leadership. Approximately one-sixth of the class is elected to AOA.

Students elected to AOA are honored at an awards dinner during the final year and at a special AOA lecture.

**Awards and Prizes**

Washington University School of Medicine publicly recognizes and rewards at two annual events outstanding scholarship, research accomplishments and community service of individual students. In December, the Student Awards Luncheon acknowledges academic excellence earned during the first three years of study. As part of the festive commencement activities in May, graduates are recognized for meritorious research and clinical achievements accomplished during their medical school careers.

Morris Alex, MD Prize. Awarded each year to the medical student who is outstanding among his or her peers in the second-year Practice of Medicine course. The November 2011 recipient: Nicholas M. Bontumasi.

Alpha Omega Alpha Book Prize. Awarded to a member of the graduating class who has performed outstandingly for the entire medical course. The May 2012 recipient: Daniel Robert Cox.

American Academy of Neurology Medical Student Prize for Excellence in Neurology. Awarded to a member of the graduating class for excellence in clinical neurology and outstanding personal qualities of integrity, compassion and leadership. The May 2012 recipient: Albert L. Misko.

American College of Physicians Michael M. Karl, MD Book Award. Presented annually to a member of the graduating class committed to a career in internal medicine, in recognition of highest achievement in the field of internal medicine. The May 2012 recipient: Nneka Nnaoke Ufere.
American College of Physicians Award for Excellence in Physical Diagnosis. Given to a student annually for outstanding performance in the second-year Practice of Medicine course. The November 2011 recipient: Jason W. Curtis.

American College of Physicians Clerkship Award. Established in 1992 to be awarded to a student completing the third year of study with meritorious achievement in the Internal Medicine Clinical Clerkship. The November 2011 recipient: Stephanie M. Canham.

American Medical Women’s Association Glasgow-Rubin Memorial Award. Presented to the woman graduating first in her class. The May 2012 recipient: Maia Dorsett.

American Medical Women’s Association Glasgow-Rubin Memorial Achievement Citations. Presented to women medical students graduating in the top 10 percent of their class. The May 2012 recipients: Bhooma Rajagopalan Aravamuthan, Julietta Hona Chang, Maia Dorsett, Megan Stadum Gauthier, Dana Michelle Schwartz, Nneka Nnaoke Ufere and Jennifer Yu.

The Ruth Bebermeyer Award. Established in 2001 by the WUMCAA executive council to honor Ruth Bebermeyer for her many years of dedicated service to WUMCAA (1990-2000) and to the students of the School of Medicine. The award is given to "a student who has shown extraordinary kindness and sensitivity to the needs of others," whether those others be fellow students, patients or just people in general. The November 2011 recipient: Michelle A. Jose-Kampfner.

Alexander Berg Prize. Awarded to the student presenting the best results in research in molecular microbiology. The May 2012 recipient: Seth Michael Bloom.

The James and Philip Brasington Memorial Prize. Awarded to a medical school student who has demonstrated excellent preclinical and clinical academic performance in psychiatry and who has the potential to make significant contributions to the field. The May 2012 recipient: Colleen Elspeth Donovan.

Jacques J. Bronfenbrenner Award. Provided by Dr. Bronfenbrenner’s students in memory of his inspiration as a teacher and a scientist, and awarded to the member of the graduating class who, as judged by the Department of Medicine, has done the most outstanding work in infectious diseases or related fields. The May 2012 recipient: David Michael Levine.


Dr. Harvey Butcher Prize in Surgery. Awarded annually in memory of Dr. Harvey Butcher to the members of the graduating class who, as judged by the Department of Surgery, show the greatest promise for general surgery. The May 2012 recipient: Jennifer Yu.


Class of 2001 Award. Established by the Class of 2001 as its gift to the medical school. Awards are to be given to third-year medical students in recognition of outstanding performance in the areas of community service and student group activities in the first two years of medical school. The November 2011 recipient: Elaine C. Khoong.

Class of 2003 Award is dedicated to the memory of three classmates who died in a car accident, and is awarded to a first-year student recognized by peers as being selfless, exceptionally kind to others and dedicated to the highest standards in medicine, traits for which these classmates will be remembered. The November 2011 recipient: Philip L. Perez.
Carl F. and Gerty T. Cori Prize in Biochemistry. Awarded at the end of the first year to the class member who has demonstrated superior scholarship in Biochemistry. The November 2011 recipient: Ravi Gottumukkala.

Edmund V. Cowdry Prize in Histology. Established in 1969 to honor Dr. Cowdry; awarded to a medical student in the first-year class who has performed meritoriously in Microscopic Anatomy. The November 2011 recipient: Andrew J. Loza.

Antoinette Frances Dames Award in Cell Biology and Physiology. Awarded annually to members of the first-year class who have demonstrated superior scholarship in these fields. The November 2011 recipients: Lu Chen, Rittik Chaudhuri and Andrew W. Kraft.

Elisabeth L. Demonchaux Prize in Pediatrics. Established in 1985, the prize is awarded annually to a graduating student who has done outstanding work in pediatrics. The May 2012 recipient: Sanyukta Desai.

Steven Dresler Prize. Awarded to a graduating student who has demonstrated a commitment to promoting social good, civil rights and civil liberties through social action and volunteerism. The November 2011 recipient: David M. Levine.

Dr. William Ellis Award. Established in 1990 by Dr. Ellis and awarded to a senior student in recognition of meritorious research in ophthalmology. The May 2012 recipient: Yingxin Zhang.

The Endocrine Society Medical Student Achievement Award. Recognizing a graduating medical student who has shown special achievement and interest in the general field of endocrinology. The May 2012 recipient: Stephanie Moore Canham.

The Family Health Foundation of Missouri Scholarship Award. Awarded to the top graduating student entering the specialty of family medicine. The May 2012 recipient: Katie Yi Hu.

George F. Gill Prize in Pediatrics. Awarded to a member of the graduating class who has demonstrated superior scholarship in pediatrics. The May 2012 recipient: Megan Stadum Gauthier.

Alfred Goldman Book Prize in Diseases of the Chest. Created in 1972 as an annual award to be given to a student selected by the faculty for outstanding clinical work or research in diseases of the chest or pulmonary physiology. The May 2012 recipient: Seth Michael Bloom.

Max and Evelyn Grand Prize. Established in 1985 by Dr. M. Gilbert Grand, the prize is awarded annually to a member of the graduating class for excellence in ophthalmic research or clinical ophthalmology. The May 2012 recipient: Victoria Hyun Yom.

Peter Halstead Hudgens Award. Established by Dr. Richard W. Hudgens in memory of his son, this award recognizes a graduating student for excellence in research and clinical psychiatry. The May 2011 recipient: Bradley Ress Miller.


Nathan Edward Hellman, M.D., Ph.D. Memorial Award. Recognizes a second-year student selected through a vote of fellow classmates. The recipient is distinguished as a student with a strong track record of accomplishments and an interest in academic medicine, and whose humanism, collegiality, humor and compassion are an inspiration to members of the class. The November 2011 recipient: Robert D. Wojahn.

Herrmann Prize. Created by Dr. Paul Herrmann (MD '61) and his wife, Susan, to recognize a student who is considered a thoughtful and sensitive communicator in the clinical arena and whose listening and communication skills every patient hopes their physician will possess. The November 2011 recipient: Sanyukta Desai.
Peter Halstead Hudgens Award. Established by Dr. Richard W. Hudgens in memory of his son, this award recognizes a graduating student for excellence in research and clinical psychiatry. The May 2012 recipient: Nathaniel Daum Ginder.

Dr. John Esben Kirk Scholastic Award. Established in 1975 and awarded to a graduating student of high scholastic standing. The May 2012 recipient: Maia Dorsett.

Rosalind Kornfeld Student Leadership Award. Presented to a woman or women in the graduating class who has or have demonstrated outstanding leadership in service to or advancement of women in the community. The May 2012 recipient: Natalie Marie Villafranco.

Louis and Dorothy Kovitz Senior Prize in Surgery. Senior award in surgery recognizing members of the graduating class who have shown the most outstanding ability, zeal and interest in surgical problems. The May 2012 recipient: Dana Michelle Schwartz.

I. Wallace Leibner Award. Established in 1988 in memory of Dr. Leibner, the award is given to the member of the graduating class who has not only demonstrated excellence in diagnosis and therapeutics, but also an understanding of human nature and needs, and an active nurturing of both patient and family. The May 2012 recipient: Colin Douglas Godwin.


Edward Massie Prize for Excellence in Cardiology. Awarded to the member of the graduating class, selected by the director of the Division of Cardiovascular Disease in the Department of Medicine, who has done the most outstanding clinical or basic research work in the field of cardiovascular disease. The May 2012 recipient: Salil Hemant Desai.

Howard A. McCordock Book Prize in Pathology. Awarded at the end of the second year to a member of that class for general excellence in pathology. The November 2011 recipient: Jason W. Curtis.


Medical Center Alumni Scholarship Fund Prize. Given annually to students who have shown excellence in their work during the preceding year. The November 2011 recipient: Maia Dorsett.

Medical Fund Society Prizes. One prize awarded annually to a graduating student who has excelled in the study of internal medicine; one prize awarded annually to a graduating student who has excelled in the study of surgery. No individual is eligible for both prizes. The May 2012 recipients: Matthew Scott Painschab (Medicine) and Elijah Wade Riddle (Surgery).


Missouri State Medical Association Award. Presented annually to honor School of Medicine graduates for outstanding achievement in the study of medicine. The May 2012 recipients: Syed Hassan Abbas Akbari, Elliott Adam Karren and Jennifer Jill Macdonald.

The Missouri State Medical Association Student Scholarships. Awarded annually to first-year medical students who graduated from Missouri high schools in recognition of their high undergraduate academic achievement. The November 2011 recipients: Paul E. George and Maxim Wolfson.

Dr. Helen E. Nash Academic Achievement Award. Given annually to a student who has exhibited to an unusual degree the qualities of industry, perseverance, determination and enthusiasm. The prize is given
in honor of Dr. Helen Nash, a pediatrician noted in the St. Louis community for her commitment to excellence, tireless advocacy on behalf of children and endless enthusiasm for the field of medicine. The November 2011 recipient: Leisha C. Elmore.

The Dr. Philip Needleman Pharmacology Prize. Established by his family in 1989 to honor Dr. Needleman, who was chairman of the Department of Pharmacology from 1976-89. This annual award is given to a member of the graduating class for outstanding research in pharmacology. The May 2012 recipient: Carl J. DeSelm.

The James L. O'Leary Neuroscience Prize. Awarded annually to a student who demonstrates the best accomplishment in the Neuroscience course. The November 2011 recipient: Andrew P. Jallouk.


The Richard and Mildred Poletsky Education Fund. Established in 1995 by the family of Mr. Richard Poletsky, an alumnus of Washington University. A prize is awarded annually to a professional student in the health sciences whose interest is in research on dementia and care of demented patients.

The Dr. Frank O. Richards Medical Student Scholarship Prizes. Provided by African-American alumni and friends of Washington University School of Medicine. The prizes embrace diversity efforts and are awarded in recognition of achievements in the first and second year of the curriculum. The November 2011 recipients: Ignacio Becerra-Licha and Krista R. Whitney.

Dr. Philip Rosenblatt Award in Pathology. Given to a senior medical student for distinguished performance during an elective in pathology or laboratory medicine. The May 2012 recipient: Roger V. Bellzaire.

St. Louis Pediatric Society Senior Prize. Presented to the senior student showing the greatest promise in clinical pediatrics. The May 2012 recipient: Kristen Elizabeth Ziara.

David F. Silbert Outstanding Teaching Assistant Award. Established in memory of Dr. David Silbert, it is awarded to a teaching assistant in a medical school course in recognition of a commitment to teaching. The November 2011 recipient: Lulu Sun.

John R. Smith Memorial Fund Award. Created in 1982, it is awarded to a medical student who has done meritorious clinical and/or research work in the Division of Cardiovascular Disease within the Department of Medicine. The May 2012 recipient: Matthew Scott Painschab.

Dr. Margaret G. Smith Award. Given to a woman medical student for outstanding achievement in the first two years of medical school. The November 2011 recipients: Tzyy-Nong T. Liou and Susan Q. Shen.

Society for Academic Emergency Medicine Excellence in Emergency Medicine Award. Based on demonstrated excellence in the specialty of emergency medicine, it is awarded to a senior medical student at Commencement. The May 2012 recipient: Maia Dorsett.

Samuel D. Soule Award in Obstetrics and Gynecology. Presented to a member of the fourth-year class for meritorious achievement in either basic or clinical investigation in obstetrics and gynecology. The May 2012 recipient: Cassandra Rae Duffy.

Jessie L. Ternberg Award. Presented to a woman graduating from the School of Medicine who best exemplifies Dr. Ternberg's indomitable spirit of determination, perseverance and dedication to her patients. The November 2011 recipient: Sara M. Putnam.

Washington University Internal Medicine Club Research Award. Awarded to the member of the graduating class who has done the most significant research in any area of internal medicine. The May 2012 recipient: Anna Helena Jonsson.
Washington University Summer Research Prize. The award recognizes students for meritorious research in the Summer Research Fellowship Program at Washington University School of Medicine. The November 2011 recipient: Peter C. Zhao.

Samson F. Wennerman Prize in Surgery. Donated by his wife, Zelda E. Wennerman, and awarded annually to the fourth-year student who has demonstrated promise in the field of surgery. The May 2012 recipient: Beth Ann Helmink.

Doris P. and Harry I. Wexler Fund. Established in 1998 by a bequest from Mrs. Wexler, the prize is awarded annually for research in multiple sclerosis and in alternate years research in eye disease.

The Park J. White, MD Prize. Created in 1992 in honor of the centennial of the birth of Dr. White, who was a distinguished pediatrician, social activist and pioneer teacher of medical ethics. He introduced the first course on medical ethics to students in 1927. The prize is awarded to students for outstanding performance in the ethics elective offered by the Program for the Humanities in Medicine. The May 2012 recipient: Catherine Rose Butler.

Hugh M. Wilson Award in Radiology. Given annually to a graduating medical student in recognition of outstanding work in radiology-related subjects, either clinical or basic science. The May 2012 recipient: Dongyang Zhang.

The Wynder Prize in Preventive Medicine. An annual prize established in 1994 and awarded to senior medical students who have done the best research in preventive medicine. The May 2012 recipients: David Michael Levine and Nneka Nnaoke Ufere.

James Henry Yalem Prize in Dermatology. Established by Charles Yalem in memory of his son and awarded annually to members of the fourth-year class for outstanding work in dermatology. The May 2012 recipient: David Yuan-Sou Chen.

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Voter Registration

The 1998 Higher Education Act requires all postsecondary institutions to make available voter registration forms to all degree-seeking students.

Voter registration forms are made available to students at various sites on campus several months prior to each federal election cycle. The next federal election will occur on Tuesday, November 6, 2012. Registration forms will be available early in the Fall 2012 semester on the Medical Campus at the Student Affairs Office, Room 100, McDonnell Medical Sciences Building.

To register to vote in Missouri, you must:
• be a citizen of the United States
• be a resident of Missouri (new residents may register immediately, but proof of residency shall be required.)
• register at least 28 days prior to the election
• be at least 17-1/2 years of age (you must be 18 to vote)
• not be on probation or parole after conviction of a felony, until finally discharged from such probation or parole
• not be convicted of a felony or misdemeanor connected with the right of suffrage
• not be adjudged incapacitated by any court of law
• not be confined under a sentence of imprisonment.

You may register to vote:
• By mail through the postcard registration application
• At the office of the local election authority — Board of Election Commissioners for the City of St. Louis, Saint Louis County Board of Election Commissioners
• At any Department of Motor Vehicles office, or state agency which provides a service to the public, including libraries.

For additional information on voter registration, contact:
Secretary of State
Elections Division
James C. Kirkpatrick State Information Center
P.O. Box 1767
Jefferson City, MO 65102-1767
(573) 751-2301 (voice)
(800) NOW-VOTE (669-8683)
(573) 526-3242 (Fax)
http://www.sos.mo.gov/elections/s_default.asp?id=voter

**The Washington University Graduate**

**Residency Training**

**Postdoctoral Training**

**Continuing Medical Education**

**Medical Alumni and Development Programs**

**Residency Training**

Postgraduate residency training in an approved hospital is considered essential preparation for the practice of medicine. Most Washington University graduates serve three or more years of residency training, and many will gain additional experience as postdoctoral fellows.

To aid students in obtaining desirable residency appointments, an active counseling program is maintained. Students in their preclinical years can participate in a career counseling workshop in which they are given specific information about subspecialties. They are encouraged to look at their own interests, attributes and priorities and, with this information, begin to make decisions about the specialty best suited for them. In addition, small group conferences are held for students to meet with faculty members from a variety of the specialty divisions at Washington University to learn more about the fields that they are interested in.

During their third and fourth years, students interact closely with the Career Counseling Office, which provides them with individual counseling to help plan for the residency application process. Students receive general background information about the kinds of residencies available, special issues concerning certain extremely competitive residencies and help identifying faculty members for further assistance. The Career Counseling Office maintains a web site (residency.wustl.edu) where students can find information regarding 20 residency specialties. As the number of residencies may gradually decrease to closely approximate the number of graduates applying, students must make their choices with considerable care. The School participates in the National Resident Matching Program, which offers distinct advantages to applicants.

Results of these efforts have been gratifying. The PGY-1 residencies selected in the most recent residency matching (2012) are identified in the Alphabetical List of Students in the Register of Students section of this web site.
The school maintains an active interest in its graduates and is pleased to assist them in subsequent years as they seek more advanced training or staff appointments in the communities in which they settle.

**Postdoctoral Training**

Those departments that offer postdoctoral fellowships individualize such educational activity up to a maximum of 36 months of academic time. Such fellowships lead integrally to certification by the appropriate specialty and/or subspecialty boards of the American Medical Association.

**Fellowship And Other Funds**

**Alexander and Gertrude Berg Fellowship Fund.** Created in 1952 through the bequest of Gertrude Berg to provide a fellowship in the Department of Molecular Microbiology.

**Glover H. Copher Fellow in Surgical Research.** Established in 1971 to support a postdoctoral fellow in surgery.

**William H. Danforth Loan Fund for Interns and Residents in Surgery.** Provides financial assistance in the form of loans for postdoctoral students in surgery.

**Antonio Hernandez, Jr. Fellowship in Pediatric Cardiology.** Established in 1987 as a memorial to Dr. Hernandez.

**Leopold and Theresa Hofstatter Fellowship.** Established in 2000 from the estate of Leopold and Theresa Hofstatter to be used to support fellowships in neurological research.

**J. Albert Key Fellowship Fund.** Provides a stipend for a fellow in orthopaedic surgery.

**Louis and Dorothy Kovitz Fellowship Fund.** Established in 1970 by an alumnus and his wife to provide support for research by qualified residents or students interested in surgery, at the discretion of the Head of the Department of Surgery.

**Carol B. and Jerome T. Loeb Teaching Fellowships at the School of Medicine.** Established in 2004 to honor and thank St. Louis-area physicians with clinical excellence to encourage teaching that excellence to residents and students.

**Stephen I. Morse Fellowship.** Established in 1980 by Carl and Belle Morse in memory of their son; awarded to predoctoral or postdoctoral students pursuing research careers in microbiology, immunology and infectious diseases.

**William D. Owens Anesthesiology Research Fellowship.** Established in 2000 in honor of William D. Owens, MD. This fund will allow an individual to do a clinical or basic research fellowship for a two-year period.

**The Esther and Morton Wohlgemuth Foundation Fellowship.** Established to support a fellow in the Division of Cardiovascular Diseases.

**Continuing Medical Education**

The study of medicine is a lifelong process with continuing medical education being an integral
component of the continuum. Since 1973 the School of Medicine has supported this learning endeavor through the operation of the Continuing Medical Education Program. Continuing Medical Education’s mission is to facilitate lifelong learning through providing learning opportunities for educational renewal and advancement in order to assist health care professionals to maintain and enhance professional competencies and performance to improve health care.

Pursuant to this mission the objectives of the continuing medical education program include the following:

- Enable the acquisition of new knowledge and skills through periodic courses, regularly scheduled conferences, and enduring materials for the delivery of quality patient care.
- Translate the results of research to clinical diagnosis and treatment for practicing physicians.
- Apply educational approaches in support of continuous quality improvement in health care delivery.
- Integrate clinical outcome measures for delivery of quality patient care into the educational process.
- Assist physicians’ adaptation to changing health care delivery environments.
- Support faculty development as postgraduate medical educators and leaders.
- Improve health care outcomes.

Each year more than 150 symposia and more than 150 recurring academic rounds and conferences as well as videos and monographs are provided with CME credit by this office. About 8,000 registrants attend these courses annually and receive more than 120,000 hours of instruction. CME-Online provides educational programs via the Internet. Since starting in 2000, the CME online program has grown to include more than 120 hours of potential CME credit. The URL is http://cme.wustl.edu. The educational program is fully accredited by the Accreditation Council for Continuing Medical Education and provides credits to physicians pursuant to the Physician’s Recognition Award of the American Medical Association, as well as various other types of state and specialty recertification and relicensure activities.

**Medical Alumni and Development Programs**

The Department of Medical Alumni and Development Programs works with individuals and organizations to secure the human and financial resources necessary to help the School of Medicine achieve and maintain excellence in research, teaching and patient care.

**Washington University Medical Center Alumni Association**

The Washington University Medical Center Alumni Association was organized more than 60 years ago to foster a continuing spirit of fellowship among graduates, and to maintain and enhance the tradition of excellence of the School of Medicine. Membership is provided to graduates and former house staff of the medical center.

The association complements the goals and purposes of the School of Medicine through a variety of programs for its members and current students. Involvement in these activities also provides the opportunity to continue the relationships begun as students and to develop rewarding professional associations.

**Student-Alumni Programs**

The Office of Medical Alumni and Development Programs and the WUMC Alumni Association assist students in a variety of ways. The association makes a substantial financial commitment each year to support 16 Distinguished Alumni Scholars. These promising medical students receive full-tuition, four-year scholarships in honor of great teachers and mentors who were also alumni of the School of Medicine. The association also provides an activity fund for both the first- and second-year classes and sponsors a reception for the graduating class, their families and faculty.

In addition, the association provides financial support to a number of student-initiated community
service activities, including a variety of health-education programs in public schools and clinics.

Medical Alumni and Development coordinates an alumni resource bank that arranges more formal contacts between alumni and students. Alumni volunteers host students who wish to spend time with a practicing physician, provide information to help students choose a specialty, serve as preceptors for clerkships and electives, and provide overnight lodging to fourth-year students going on residency interviews.

Reunions and Other Events

The School of Medicine’s Reunion is held in April for medical classes who return at five-year intervals, beginning with the class observing its 10th year following graduation and continuing through the class celebrating its 65th reunion. The reunion schedule includes a scientific program, social events, tours of the medical center and the presentation of Alumni Achievement, Faculty Achievement, Resident/Fellow Alumni Achievement and Distinguished Service awards. Award recipients are chosen on the basis of personal accomplishment, professional achievement and/or service to the School of Medicine. Members of the graduating class are special guests at the awards banquet and are officially welcomed into association membership.

The Alumni Office sponsors special alumni activities in selected cities across the United States. Volunteers from each area assist in sponsoring these events, which help alumni stay abreast of the educational and research activities at the School of Medicine. The Alumni Office also compiles class newsletters for selected classes, including recent graduates and those in the “Diamond+” years (all those classes who have celebrated their 60th reunion).

Alumni Support

Supporting their school generously is a tradition for a large percentage of alumni of the medical school and the health professions programs. Each year alumni and friends make gifts to the Annual Fund, which supports the medical school’s departments, divisions and health care professional programs, as well as scholarships and low-interest loan programs for students. Alumni also designate gifts for special purposes within the medical school, including specific research, education and training programs.

In 1977, School of Medicine members of the Eliot Society created the Alumni Endowed Professorship Program, through which gifts are used to establish an Alumni Endowed Chair in the medical school’s departments. Nine such chairs have been created thus far.

Policies, Student Constitution and Bylaws, Class Officers
Policies Related to Evaluation
United States Medical Licensing Exam (USMLE)
Guidelines for Exam Administration

Policies Related to Absences and Leaves
Absence Policy for MD Students on Clinical Clerkships
Absence Policy for MSTP Students on Clinical Clerkships
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Policy on Student Status and Benefits During Research Years or Leave of Absence

Policies Related to Professionalism and Conduct
Guiding Principles of Professionalism
Research Integrity Policy
Policy Against Abusive Conduct
Sexual Harassment Policy
Drug and Alcohol Policy
Discriminating Harassment Policy
Guidelines for Professional Conduct in Teacher/Learner Relationships
Tobacco-Free Policy
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Policies Related to Student Rights, Procedures and Services
Students with Disabilities Policy
University & Medical School Policy on Student Rights under Family Educational Rights and Privacy Act (FERPA)
Student Academic Records and Transcripts
HIV & HBV Infection Policy
Student Computing Services Policies
Liability Insurance
Technical Standards Statement
Non-Discrimination Statement

Student Constitution & Bylaws

Class Officers

Policies Related to Evaluation
United States Medical Licensing Exam (USMLE)

Washington University School of Medicine students who anticipate practicing clinical medicine are required to take the USMLE Step 1 and 2 examinations.

The USMLE is designed to "assess a physician's ability to apply knowledge, concepts, and principles, and to demonstrate fundamental patient-centered skills, that are important in health and disease and that constitute the basis of safe and effective patient care." The USMLE represents a single uniform examination for medical licensure in the United States, and as such, is a minimum requirement for obtaining a medical license.

The USMLE consists of four separate examinations. "Step 1 assesses whether you understand and can apply important concepts of the sciences basic to the practice of medicine, with special emphasis on
principles and mechanisms underlying health, disease, and modes of therapy. Step 1 ensures mastery of not only the sciences that provide a foundation for the safe and competent practice of medicine in the present, but also the scientific principles required for maintenance of competence through lifelong learning.” Step 1 is taken after completing the second year at WUSM.

Step 2 consists of two separate examinations, Step 2 CK (Clinical Knowledge) and Step 2 CS (Clinical Skills) which are taken at different times. “Step 2 assesses whether you can apply medical knowledge, skills, and understanding of clinical science essential for the provision of patient care under supervision and includes emphasis on health promotion and disease prevention. Step 2 ensures that due attention is devoted to principles of clinical sciences and basic patient-centered skills that provide the foundation for the safe and competent practice of medicine.” Step 2 exams are taken after completing the third year but prior to graduation from WUSM.

“Step 3 assesses whether you can apply medical knowledge and understanding of biomedical and clinical science essential for the unsupervised practice of medicine, with emphasis on patient management in ambulatory settings. Step 3 provides a final assessment of physicians assuming independent responsibility for delivering general medical care.” Step 3 is taken following graduation and during internship/residency training.

Further information can be obtained from the USMLE Bulletin of Information published by the National Board of Medical Examiners, and is available, along with application forms and information, at http://www.usmle.org.

Washington University School of Medicine Guidelines for Exam Administration*

Following are general guidelines for exams administered in the undergraduate medical curriculum. Additional requirements may be posed by the individual course master.

A. Expectations for Students:

1. Take the exam during the originally scheduled time, excepting extenuating circumstances. Note the Committee on the Academic and Professional Evaluation of Students’ policy:

“Students are required to take all examinations at the specified time. A student may be excused from this rule for extenuating circumstances at the discretion of the course master. Extenuating circumstances are normally defined as sudden personal illness. Doctor appointments of a routine nature or vacation time are not considered to be extenuating circumstances for which students can be exempted from the regularly scheduled exam date. Such occasions will be promptly reported to the Registrar. In the event of inability to attend a scheduled examination due to sudden illness the student is required to inform the course master prior to the examination and to be evaluated by the Student Health Service. In the event that the student cannot reach the relevant course master, the student should contact the associate dean for student affairs.”

2. Tardiness will not be excused except in extenuating circumstances.

3. Not share study materials, exchange information, collaborate or communicate with others during the exam

4. Turn off and leave cell phones and other electronic devices in their bags.

5. Hand their exam to the proctor prior to leaving the room.

*Not applicable to take-home exams
B. Expectations for Faculty:

1. Exams should be proctored by a faculty member or a staff member comfortable with proctoring and exam administration guidelines.

2. Administration should be fair to all students:

3. IF the faculty member answers a substantive question or clarifies an issue, the same should be communicated to ALL students, including those in separate rooms or at different times.

4. Reasonable adjustments should be offered to students who require special accommodations, including a separate room or additional time. Course masters are notified of these students through the Associate Dean for Student Affairs.

5. If a student behaves inappropriately, the course master should notify the Associate Dean for Student Affairs immediately.

6. All requirements of students should be communicated to all students PRIOR to the start of the exam.

POLICIES RELATED TO ABSENCES AND LEAVES

Absence Policy for MD Students on Clinical Clerkships

The profession of medicine requires the utmost commitment of time and energy to patient care and research activities. While the development of this commitment begins in the preclinical years, it is further practiced and developed during the clinical clerkship.

The clinical clerkship year at Washington University School of Medicine comprises 48 weeks of required core clinical experiences. All students on the clinical clerkships have a scheduled 2-week winter recess break, a 3-day spring break and a 2-week break between the end of the third-year clinical clerkships and the start of fourth-year elective rotations (or free time prior to graduation for MSTP students). During every clinical clerkship, each student is expected to participate fully in all activities of the clerkship up until the designated end time of the clerkship or the start time of a holiday break. This regularly requires participation beyond formal weekday hours to include evening and nighttime call and clinical responsibilities on weekends.

If a student is ill or has a personal emergency, (s)he should notify the clerkship course master’s office and the resident supervising his/her clinical team the morning of the absence. If the absence extends beyond two consecutive days, the student should also notify the Office of Student Affairs.

It is recognized that a student may, on a very occasional basis, desire to be excused from clinical activities for professional or significant personal events. For the third year, the Curriculum Evaluation Committee agreed upon the following guidelines regarding the maximum number of days of excused absences (including illness) from clerkships: Students may miss up to 5 days on a 12-week clerkship, 3 days on a 4-week clerkship, and 1 day for a 2-week clerkship without making up the missed time. Students must recognize that clerkship teaching, learning and evaluation are dependent on the student’s presence and participation in every aspect of the clerkship. While students will not be graded down only because of an excused absence, time spent away from the clerkship may decrease learning and impede effective evaluation; students are encouraged to make up missed work on rotations in which this can result in meaningful learning and should discuss this option with the clerkship director. It is the responsibility of the student to directly contact the clinical clerkship course master in writing (by letter or e-mail) to obtain permission for any planned absences well in advance of the planned absence.

At the discretion of the course master, any student who misses portions of the clinical clerkship experiences due to planned and/or unplanned absences that exceed the maximum time may be required
to utilize winter recess, spring break or free time at the end of the third year clinical clerkships to complete the 48 weeks of mandatory clinical clerkships.

**Absence Policy for MSTP Students on Clinical Clerkships**

It was agreed at the April 17, 2003, CEC-III meeting that MSTP students would be allowed to miss up to three days of any four-week clerkship, and up to nine days of any 12-week clerkship for any reason including interviews. This is a substantially more flexible policy than we have towards the M.D. students, in which we limit the number of days off to three in a four-week period, and five in a twelve-week period. We recognize that for some MSTP students entering competitive specialties with limited interview dates it may be necessary for them to plan far enough ahead in their training to schedule a month for either a very light elective or a free month to allow appropriate flexibility for interviews. The committee also agreed that the MSTP students should be encouraged to: (1) talk with Dr. Kathryn Diemer early for assistance in residency planning; (2) seriously consider coming out of lab a month earlier to allow flexibility for interviewing; and (3) delaying graduation by one year to increase flexibility. When absences are necessary on a clerkship, advanced discussion with the clerkship director will better allow placement on a team to allow maximum educational value. We believe this policy strikes an appropriate balance between increased flexibility for the MSTP students and assuring a meaningful educational experience on the core clerkships.

**Leave of Absence Policy**

A. A student may request a leave of absence for academic or personal reasons by submitting a statement in writing to the Office of Student Affairs. Such a statement should include indication of the beginning and anticipated ending dates and a brief statement of the reason (academic or personal). Requests for leave of absence must be approved by the Associate Dean for Student Affairs. Leaves of absence shall be granted for no more than one year, but in unusual cases may be renewed by the CAPES for additional years after discussion with the Associate Dean for Student Affairs. Students requiring a personal leave of absence for medical reasons must submit a supporting letter from the Director of the Student Health Service. A written statement of medical clearance will be required before the student may return from such a leave.

B. If there is a reasonable basis for believing that the continued presence of the student on campus or in clinical rotations poses a substantial threat to the student, to patients or to the rights of others to engage in their normal University functions and activities. The following procedure applies:

1. The Chancellor or his designate may impose an involuntary leave of absence when there is evidence that a student has committed an offense under these rules or the University’s Judicial Code and there is evidence that the continued presence of the student on the University campus or as a participant in a clinical rotation poses a substantial threat to himself or herself, to patients or to the rights of others to continue their normal University function and activities.

2. Imposition of the involuntary leave of absence may result in denial of access to the campus, prohibition of class attendance and/or prohibition of participation in clinical rotations.

3. If an involuntary leave of absence is imposed, the suspending authority shall prepare a written notice of the imposition and shall have the notice mailed certified or personally presented to the student. The written notice shall include a brief statement of the reasons therefore, and a brief statement of the procedures provided for resolving cases of involuntary leave of absence under these rules.

4. The student shall be given an opportunity to appear personally before the suspending authority within five (5) business days from the date of service of the notice of imposition of the involuntary leave of absence. If the student asks to appear personally before the suspending authority, only the following
issues shall be considered:

a. Whether the suspending authority’s information concerning the student’s conduct is reliable; and

b. Whether under all the circumstances, there is a reasonable basis for believing that the continued presence of the student on campus or in clinical rotations poses a substantial threat to the student, to patients or to the rights of others to engage in their normal University functions and activities.

5. Within one week of the date of imposition of the involuntary leave of absence, the suspending authority shall either file a statement of charges against the student with the University Judicial Board, and shall have the statement or charges served, by mail or personal service, upon the student and the dean of the school or college or director of the program in which the student is enrolled or initiate proceedings under these rules to convene a Disciplinary Committee.

6. A temporary suspension shall end when

a. rescinded by the suspending authority, or

b. upon the failure of the suspending authority to promptly file a statement of charges with the University Judicial Board or a Disciplinary Committee, or

c. when the case is heard and decided by the University Judicial Board, or the Disciplinary Committee.

Return of students from involuntary leave of absence requires clearance of both the Director of the Student Health Service and the Associate Dean for Student Affairs.

C. Students receiving financial aid should be advised that at the end of sixty (60) days or more leave of absence, the grace period for loan repayment during a leave of absence may be exhausted. In such cases there will be an obligation for the student to start payments. According to the Federal rules under which loans are made, the use of a grace period during a leave of absence will generally mean that the schedule for loan repayment may be changed. Students who are receiving financial assistance should consult with the Financial Aid Office to determine the implications of a Leave of Absence for their financial aid.

D. A student returning from a leave of absence of one year duration or less will maintain the same tuition rate. Students returning after more than one year leave of absence will assume the tuition rate of the class they are rejoining. Appeals of this policy should be submitted in writing to the registrar. Please refer to the section on Registration, Payment of Financial Obligations, Withdrawal and Refund Policy regarding policies on the effect of a leave of absence on tuition and other financially related matters.

Policy on Student Status and Benefits During Research Years or Leave of Absence

MD/PhD

Student status is maintained while in the research phase of the MD/PhD program. Students are registered in the graduate school during the research years. Both student health and disability coverage are provided by the Division of Biology and Biomedical Sciences.

MA/MD

Student status is maintained while in the research phase of the MA/MD program. Students are registered in the graduate school during the research year. Both student health and disability coverage are provided.

Five-Year MD Program

Research Year Here: Student status is maintained throughout the approved research year. In exceptional circumstances, a second research year may be permitted. The student may receive a stipend, but may not be considered an employee of the university. Students are registered in the School of Medicine. Both disability and student health coverage are required and are payable by the student. Outside funding often
covers such fees.

Research Year Away: Student status is maintained throughout the approved research year. Students are registered in the School of Medicine. Both disability and student health coverage are optional with proof of like coverage. The cost of either elected coverage is payable by the student. Outside funding often allows these costs.

**Leave of Absence**

Leave of Absence Year Here: Student status is not maintained during the leave of absence though benefits of student health coverage and disability insurance are optional throughout an approved leave. Costs are payable by the MD program students. MD/MA and MD/PhD students may request support for these costs from the Division of Biology and Biomedical Sciences if funds are available. The Office of Financial Aid should be consulted for information regarding loan repayment and grace periods when on a leave of absence.

**Leave of Absence Year Away: Same as Leave of Absence Year Here**

A student returning from a leave of absence of one year duration or less will maintain the same tuition rate. Students returning after more than one year leave of absence will assume the tuition rate of the class they are rejoining. Appeals of this policy should be submitted in writing to the registrar.

**BACK TO TOP**

**POLICIES RELATED TO PROFESSIONALISM AND CONDUCT**

**Guiding Principles of Professionalism**

**A. Preamble:**

Medicine is one of the oldest of the learned professions. A professional is one who is in command of a specialized body of knowledge and skills, and is given specific rights not typically allowed to the public. Along with those rights, the professional has specific responsibilities or duties not generally expected of the public.

The singularity of medicine is that it deals with human health. Patients are potentially at their most vulnerable when establishing a relationship with a physician. That the patient's relationship with his/her physician involves a dependency that encompasses life and death adds further to the uniqueness of this relationship.

The label of professional is not a right but must be earned. The special contract physicians have with society has professionalism as its foundation. Professionalism consists of fundamentally important qualities including altruism, compassion and empathy, respect for patients and health care workers, commitment to ongoing excellence, honesty, trustworthiness, integrity, accountability, recognition of limits, collaboration, and duty to society.

Professional development is an on-going process at all levels of training and practice. The purpose of this document is to outline those elements of professionalism expected of our medical students. It is not meant to be all encompassing, providing exact guidelines for all possible situations. Rather, four broad categories of professional behaviors are described below, with specific principles cited for each in bold print, and examples provided for some of the principles in regular text. While this document was developed with medical students in mind, it is generally applicable to all medical professionals.

**B. Professional Responsibility:**

1. Students have a responsibility to actively participate in their education and to work to improve the educational environment for future students.
2. Students should have a willingness to pursue life-long, self-directed learning, which is an essential attribute of any professional.

3. Students should act responsibly in their personal and academic lives with regard to meeting deadlines, financial obligations and other comparable responsibilities.

4. Preparation for class and during clinical rotations sets a good example for peers, maximizes every student’s learning opportunity, and demonstrates respect for the teachers and peers.
   a. Respecting one’s peers in a classroom or in the hospital setting includes behaviors such as arriving on time, exhibiting respectful body language, listening attentively, turning off cell phones and allowing all present to engage in discussion.

5. Students should report to the appropriate supervisor potentially serious errors that others have committed.

6. Students should contribute to their community.
   a. Students are encouraged to participate in the first- and second-year teaching groups.
   b. These provide a service to the larger St. Louis community, while teaching students how to communicate with people of diverse backgrounds.
   c. Students are encouraged to serve at the Saturday Neighborhood Health Clinic and other community service and teaching activities.

7. Students should be aware of the larger social and economic context in which disease occurs, and take advantage of opportunities to deepen their knowledge about this topic.

C. Competence and Self-improvement:

1. In order to function at the expected level, students should attend to their own physical and emotional health.
   a. The experience of being a medical student can be physically and emotionally challenging. Students need to be able to identify when they are overwhelmed to the point where they may not be able to function appropriately. Students are encouraged to seek educational assistance and/or the emotional support of others in these instances.

2. Recognizing and admitting errors in patient care are key to being a good physician.
   a. Students should view mistakes as part of learning. Assuming responsibility for mistakes is critical for professional development.
   b. Developing productive strategies for dealing with mistakes and non-confrontational ways of correcting them is essential.

3. Feedback, advice and criticism from residents, fellows and faculty fosters personal and professional development, and should be taken in the context of mentoring.
   a. Students should assume that opinions of their faculty/residents/fellows that may seem unclear are usually solidly founded, and accept feedback regarding their performance openly and maturely from individuals more experienced than they.
   b. Students should provide suggestions and examples for improving the mentoring environment by forthrightly evaluating their instructors.

4. Students should identify and correct errors in patient care as soon as possible or notify those who can correct it.

5. Students should balance personal and professional interests.
   a. Students should not over-commit.
   b. Students should communicate schedule conflicts to course directors, lecturers, and/or house staff.
D. Respect for others and professional relationships:

1. Students should conduct themselves with manners and consideration of all others, and be respectful of others’ time.

2. While individual effort is important in developing a medical knowledge base, much of what students learn in medical school will depend on a collaborative effort with their peers.
   a. From the first day of medical school, students should encourage each other and collaborate with their peers when appropriate in the learning environments of lectures, small group discussions, and lab sessions. In doing so, they are laying the foundation for the truly collaborative nature of medicine.
   b. During the clinical years, students should understand that their peers are a valuable resource. Likewise, a student should assist peers in patient care responsibilities.
   c. In all cases, students should respect the work and learning opportunities of their classmates and they should share educational opportunities with their peers. Professional behaviors include listening to other’s presentations, and encouraging others’ opportunities to present, ask/answer questions, admit patients, participate in surgical cases/procedures, or perform duties.

3. Respect for the ethnic and cultural diversity of classmates provides for a more nurturing environment for all.
   a. Students should be aware that their classmates come from a wide variety of religious and ethnic backgrounds and that they will have differing lifestyles and viewpoints. This diversity is an important resource in our community, contributing to personal and professional growth of all.
   b. Students should be sensitive to the importance of these issues and should seek opportunities to enhance appreciation of multiple cultures through dialog, educational opportunities, etc.

4. Students should be supportive of peers during difficult times in their personal and professional lives.
   a. Students must appreciate that their peers may have issues in their personal or professional lives (e.g. family, medical, academic, or administrative problems) that may affect their interactions with others. In these circumstances, students should make every attempt to be sympathetic and to offer their support to those students.

5. Participation and teamwork enhances the educational experience.
   a. The learning process is a partnership between students and faculty. Students should actively participate in this partnership by providing feedback to professors by way of evaluations and surveys.
   b. Contributing to the overall functioning of the team maximizes both learning and patient care in the clinical setting.

6. Understanding the appropriate venues for feedback to house staff/fellows/faculty is critical to successfully resolving conflicts.
   a. Students should be aware of the hierarchy of the team, and appropriate mechanisms for handling disagreement with faculty/residents/fellows. Conflicts can be translated into productive outcomes if handled appropriately.
   b. medicine.wustl.edu/students/conduct.htm

7. Maintaining a professional relationship with teachers (including faculty/residents/fellows and TAs) is important, especially during times when these teachers are in a position to grade or evaluate the student.
   a. Students should avoid behaviors that could potentially be construed as attempting to influence the faculty, for example running personal errands.
   b. The University has specific codes and regulations regarding romantic relationships between a student and a teacher, including faculty/resident/fellows (www.wustl.edu/policies/consent.html)

Students engaged in such relationships should review these codes and avoid any situation that can
cause potential conflict of interest in the academic setting.

8. Patients should be treated as individuals in the context of their family, culture and community. Personal bias should be subordinated when possible to further the therapeutic relationship.
   a. Use of offensive language or gestures is unacceptable.
   b. At times, some religious beliefs will require the use of alternative care approaches.
   c. Students, like practicing physicians, should not refuse to participate in the care of a patient with a communicable disease unless this represents a meaningful threat to the student’s own health. In contrast, a student who is verbally or physically threatened by a patient may ask to be excused from care of that patient.

9. Students should treat hospital staff with appreciation and respect as they are vital members of the health care team.

E. Honesty and integrity:

1. Student work should be original.
   a. Only authorized resources should be used during examinations, quizzes or graded course work. WUSM has a zero tolerance policy for plagiarism. [link to University’s definition]
   b. When students are aware that a classmate has submitted work that is not their own (cheated), they should discuss this situation with the Course Master and/or the Associate Dean for Student Affairs.

2. Students must respect patients’ rights and maintain confidentiality, in accordance with HIPAA guidelines.
   a. Students should be ever aware that patients are ill and have the right to refuse care, particularly when poorly provided.
   b. Patient information should only be discussed with appropriate people at appropriate times.
   c. Patient records should not be photocopied carelessly or removed from appropriate areas.
   d. Patient information should be disposed of appropriately to prevent careless transmission of patient information.

3. Students should clearly communicate their abilities and level of training to patients.
   a. If a student does not know the answer to a patient’s question, it is his/her responsibility to admit this lack of knowledge.
   b. Even if other members of the health care team introduce students to patients as “doctor,” the student should never do so as it leads to a false perception of expertise on the patient’s part.
   c. Students should always be truthful with the house staff and other medical staff in terms of patient care and never compromise patient care as a consequence of personal gain.

4. Students should not participate in any aspect of patient care if under the influence of a substance that may compromise his/her judgment or otherwise cause the patient harm. Likewise, students should report any member of the health care team who may be participating in patient care while under the influence of a judgment-impairing substance.

5. Any student who is impaired by physical or psychological illness should excuse him/herself from patient care responsibilities, and should also respect recommendations to do so from colleagues or supervisors.

6. Although students are often tired or under stress, they should attempt to maintain an appropriate level of composure at all times.

7. Students should be appropriately attired for all patient care duties.

8. Students should carefully consider their participation in benefits provided by pharmaceutical
companies or other medically-related businesses.

9. Students should respect the laws of federal, state and local governments in both professional and private life.

**Washington University School of Medicine Professionalism Concern Form**

Please see Appendix B in the "Rules Governing Review of Student Performance" booklet.

**Research Integrity Policy**

Allegations of breach of research integrity policy are the primary responsibility of the Research Integrity Committee of the School of Medicine. Complaints regarding students enrolled for the M.D. degree will be directed promptly to that committee. The Research Integrity Committee will promptly investigate the charges and report its conclusions and recommendations to the Dean, who will refer the issue to CAPES as a breach of professional integrity if further action is warranted.

For further information, refer to the policy’s web site: [www.wustl.edu/policies/research.html](http://www.wustl.edu/policies/research.html)

**Policy Against Abusive Conduct**

**A. Policy Statement**

Washington University School of Medicine (WUSM) is committed to having a positive learning and working environment for its students, faculty, and staff. All individuals have the right to enjoy an environment free from all forms of conduct that can be considered harassing, threatening or intimidating. In addition, academic freedom can exist only when every person is free to pursue ideas in a non-threatening atmosphere of mutual respect. WUSM is committed to protecting the academic freedom and freedom of expression of all members of the school community and this policy against abusive conduct will be applied in a manner that protects those freedoms. Abusive conduct is reprehensible and threatening to the careers, educational experience, and well being of all members of our community and will not be tolerated. This policy applies to all students, faculty and staff and is in addition to the Washington University Policy on Sexual Harassment.

**B. What is Abusive Conduct?**

Abusive conduct is behavior that creates an intimidating environment and is likely to interfere with an individual’s work or education. This conduct can be verbal, visual, physical, or communicated in writing or electronically. Such conduct is typically directed against a particular individual or individuals. It includes, but is not limited to, situations where one person has authority over another. In such situations, abusive conduct is particularly serious because it may unfairly exploit the power inherent in a faculty member’s or supervisor’s position.

1. Examples of conduct that may be considered abusive include but are not limited to:
   a. Threatening or intimidating behavior or words (written or oral)
   b. Obscenities/profanities (verbal or gestures) directed at a person
   c. Threatening or obscene gestures, jokes or cartoons
   d. Degrading a person or a group on the basis of a personal or cultural characteristic
e. Taunting, jeering, mocking or humiliating another person through acts or words
f. Screaming and/or yelling at or around others
g. Insulting someone, especially in the presence of others
h. Endangering the safety of an individual or individuals

2. In considering a complaint under this policy, the following understandings shall apply:

a. Abusive conduct must be distinguished from behavior which, even though unpleasant or
disconcerting, is appropriate to the carrying out of certain instructional, advisory, or supervisory
responsibilities. In the context of patient care clear and direct communication may be necessary in
order to deliver safe, effective, appropriate and timely clinical treatment.

b. Instructional responsibilities require appropriate latitude for pedagogical decisions concerning the
topics discussed and methods used to draw students into discussion and full participation.

The fact that someone did not intend to be abusive is generally not considered a sufficient defense to a
complaint, although the reasonableness of the accuser’s perceptions may be considered. In most cases,
it is the characteristics and the effect of the behavior on the complainant and whether a reasonable
person would find the conduct abusive that determines whether the behavior was abusive.

C. Reporting Abusive Conduct

The Medical School can respond to specific instances and allegations of abusive conduct only if it is aware
of them and therefore encourages anyone who believes that he or she has experienced abusive conduct
to come forward promptly with inquiries, reports, or complaints and to seek assistance. In addition, any
faculty member, manager, or employee who becomes aware of instances or allegations of abusive
conduct, by or against a person under his or her supervisory authority, is required to report it to the
appropriate dean, director, department head or other similar administrator or to the Human Resources
Department. Once a complaint is received, it is the responsibility of the dean, director, department head
or similar administrator to respond to the allegations and reports of abusive conduct and take corrective
action, if appropriate, or to work with Human Resources to develop such a response and corrective
action, if appropriate. All complaints and their resolution must be reported to Human Resources.

D. Protection of Rights

1. Retaliation

a. Definition: Retaliation means conduct that adversely affects another’s terms or conditions of
employment or education and has the effect of harming a person for filing a complaint or for
participating in the investigation. Retaliation can take many forms. Examples include but are not
limited to:

• Reassignment of work duties without good reason
• Loss of job benefits (i.e., travel)
• Loss of salary
• Termination
• Threats

b. Against the Complainant: It is a violation of this policy to retaliate against persons who report or
make a charge of abusive conduct or against those who testify, assist, or participate in any
investigation involving a complaint. Any such retaliation – or any encouragement of another to
retaliate – is a violation of this policy, independent of whether the particular claim is substantiated.

c. Against the Respondent: Lodging a complaint is not proof of prohibited conduct. A complaint shall
not be taken into account during reappointment, tenure, promotion, merit, or other evaluation or
review until a final determination has been made that the policy has been violated.
2. Knowingly False or Malicious Complaints:
Accusations of abusive conduct typically have injurious and far-reaching effects on the careers and lives of accused individuals. Therefore allegations must be made in good faith and not out of malice. Knowingly making a false or frivolous allegation will not be tolerated and will subject the person making such a report to disciplinary action.

E. Possible Sanctions
Possible sanctions for a person found to exhibit abusive conduct include but are not limited to the following:

In many situations, the following examples of sanctions may be sufficient.

- oral or written reprimand
- required attendance at a sensitivity program
- apology to the victim
- oral or written warning

In certain situations, the following sanctions may also need to be considered.

- loss of salary or benefit, such as sabbatical or research or travel funding
- loss of non-salary benefits (i.e., travel funding)
- demotion
- suspension, probation, termination

While counseling is not considered a sanction, it may be offered or required in combination with sanctions.

Washington University Policy on Sexual Harassment
http://hr.wustl.edu/policies/Pages/SexualHarassment.aspx

Drug and Alcohol Policy
http://hr.wustl.edu/policies/Pages/DrugandAlcoholPolicy.aspx

Washington University Policy on Discriminatory Harassment
http://hr.wustl.edu/policies/Pages/DiscriminatoryHarassment.aspx
Washington University School of Medicine Guidelines for Professional Conduct in Teacher/Learner Relationships

I. Goals of Policy

1. To define standards of conduct among all members of the Washington University Medical Center community generally, and specifically within the teacher/learner relationship.

2. To specify a procedure for reporting potential student mistreatment or abuse.

3. To create an administrative mechanism for handling alleged incidents of mistreatment or abuse.

4. To develop a monitoring system to identify individuals or departments whose abusive behavior persists despite intervention.

II. Preamble

The goal of the Washington University Medical Center is to provide patient care, medical education, and biomedical research of the highest quality. Accomplishing this goal depends in part on an atmosphere of mutual respect and collegiality among all those who work here. Disrespectful or abusive conduct of any kind at the Medical Center will not be tolerated. To this end, the School’s Committee on the Professional Treatment of Medical Students endorses the Professional Service Commitments outlined by Washington University School of Medicine, as well the standards put forth by the Barnes-Jewish Hospital BJH Cares campaign. These documents address the broad issues of respectful behavior among all members of our Medical Center community. The current document focuses instead on the special issues presented by the teacher/learner relationship, and applies to all years of the medical school curriculum.

Our students are exceptionally talented individuals, dedicated to becoming outstanding physicians, who have selected this medical school for their training. Effective learning is possible only in an environment where students can trust their teachers to treat them fairly and with respect. The teacher may be a faculty member, resident, student, or other member of the health care team. One manner in which the teacher/learner relationship is unique is that students are vulnerable, depending on many of their teachers for evaluations and recommendations. In addition, medical education includes mastering not just pathophysiology but also the essentials of professional behavior. Students learn professional behavior primarily by observing the actions of their teacher role models. Unprofessional, disrespectful or abusive behavior by teachers is antithetical to standards of professional conduct that medical students are expected to master. These behaviors by teachers may also be self-perpetuating, as students come to believe that such behavior is appropriate when they assume the role of teacher.

III. Responsibilities of Teachers and Learners

The teacher-learner relationship confers rights and responsibilities on both parties. Behaving in ways that embody the ideal student-teacher relationship fosters respectful behavior, minimizes the likelihood of student mistreatment or abuse, and optimizes the educational experience for students.

A. Responsibilities of Teachers

• Be prepared and on time.
• Provide learners with most current materials.
• Treat students fairly, respectfully, and without bias related to their age, race, gender, sexual orientation, disability, religion or national origin.
• Give students timely, constructive and accurate feedback.
• Distinguish between the Socratic method, where insightful questions are a stimulus to learning and
discovery, and over-aggressive questioning, where detailed questions are repeatedly presented with the endpoint of embarrassment or humiliation of the student.

**B. Responsibilities of Learners**

In all settings:
- Be courteous and respectful of teachers and fellow students regardless of their age, race, gender, sexual orientation, disability, religion or national origin.
- Treat fellow students as colleagues, not competitors.
- Take responsibility for maximizing your educational experience by addressing conflicts and discomforts which may impede your learning.
- Be an enthusiastic learner.
- Be trustworthy and honest.
- Know your limitations and ask for help when needed.

In the clinical setting:
- Put the patients’ welfare first.
- Know what’s going on with your patients.
- Take the initiative to educate yourself about their illness.
- Put patient welfare ahead of your educational needs.
- Treat all patients and members of the health care team respectfully, regardless of their age, race, gender, sexual orientation, disability, religion or national origin.
- Be compassionate.
- Respect patients’ privacy.

**IV. Unprofessional and Abusive Behaviors**

The responsibilities of teachers and students listed above constitute examples of respectful and professional behaviors. These should be our standards. Some behaviors which fall outside of these guidelines are clearly abusive. More commonly, however, they represent poor judgment, unprofessional behavior or mistreatment. Determining whether a given behavior constitutes abuse or unprofessional behavior is often a matter of perception. It involves a subjective assessment of the intentions of the doer and how the behavior in question was perceived by the recipient. The behaviors listed below in Section A are clearly abusive. Students who feel they may have been abused should discuss the incident or behavior in question with the individuals listed in Section V of this policy. Other disrespectful or unprofessional behaviors, such as (but not limited to) those noted in Section B, may also disrupt the student’s educational experience. Students who feel they have been treated in this manner may also discuss the incident or behavior with other students, faculty members or residents, coursemasters, or the individuals listed in Section V of this policy. Students are encouraged to take responsibility for addressing issues which may be detrimental to their educational experience.

**A. What is Clearly Student Abuse**

1. Unwanted physical contact (such as hitting, slapping, kicking, pushing) or threats of same.
2. Sexual harassment (see the institution’s policy and procedure for filing grievances at http://hr.wustl.edu/policies/Pages/SexualHarassment.aspx http://hr.wustl.edu/policies/Pages/SexualHarassment.aspx http://hr.wustl.edu/policies/Pages/SexualHarassment.aspx http://hr.wustl.edu/policies/Pages/SexualHarassment.aspx http://hr.wustl.edu/policies/Pages/SexualHarassment.aspx http://hr.wustl.edu/policies/Pages/SexualHarassment.aspx)
3. Discrimination based on age, race, gender, sexual orientation, disability, religion or national origin.
4. Requiring students to perform personal chores (i.e., running errands, babysitting, etc).

**B. Disrespectful or Unprofessional Behavior**

(This list is not intended to be all-inclusive, but to provide examples of inappropriate behaviors.)

1. Repeated questioning of a student with the primary intent to humiliate or embarrass.
2. Grading based on factors other than performance or merit.
3. Coercing students to do something they find morally objectionable.
4. Public humiliation.
5. Requiring excessive menial, noneducational chores. Work related to the care of patients contributes to the efficient functioning of the team, but must be balanced with educational opportunities.
V. What to Do If You Believe That You Have Been Abused or Mistreated

First, carefully examine the circumstances of the incident or incidents which occurred. Discuss the event with someone else who witnessed it, or with another student or individual whose judgment you trust. Do they come under the behaviors listed in Section A above? If so, meet with your coursemaster and describe what happened. If the coursemaster takes action to settle the complaint, he/she will submit a written report of these actions to the Associate Dean for Medical Student Education. If you are not satisfied with your interaction with the coursemaster, or do not feel comfortable approaching him/her, meet with the Associate Dean for Medical Student Education. The Associate Dean will follow the procedure listed below.

If you determine that you have been treated disrespectfully or in an unprofessional manner, but have not been abused as described in Section A above, it may still be appropriate to pursue your complaint. You may do this by directly approaching the person whom you feel mistreated you, or by seeking assistance from another student, faculty member, resident, the coursemaster, or the Associate Dean for Medical Student Education. The goal of this process is to foster your educational experience by minimizing behaviors which detract from it.

The University will keep confidential all records of complaints, responses and investigations, to the extent permitted by law. Please refer to the University’s policy on sexual harassment above for details regarding confidentiality.

VI. Procedure for Handling Complaints of Student Abuse

The Associate Dean for Medical Student Education will be responsible for hearing complaints of student abuse (as described under Section A above) which are not settled at the coursemaster level. (Complaints settled by the coursemaster will also be relayed to the Associate Dean in writing.) He/she will be responsible for reviewing the complaint and obtaining additional information. If the initial review discloses that the complaint warrants further review, he/she will convene an ad hoc committee to hold a hearing. The accused will be notified in writing of the complaint and the policy for handling such complaints, and will be invited to attend the hearing. A confidential copy of the notification will be sent to the accused’s department chair (for faculty and residents), training program director (for residents), or the Associate Dean for Student Affairs (for students).

If, however, the initial review discloses that the complaint has no merit, the Associate Dean for Medical Student Education will dismiss it. The student will be notified and may appeal to the Associate Dean for Student Affairs, who will convene an ad hoc committee to address the complaint.

The ad hoc committee will meet to review the facts of the complaint, and may receive written or oral testimony. All materials will be held confidential by the committee. The accused may attend the hearing, and will be provided the opportunity to rebut the complaint. The chair of the ad hoc committee will submit a written report of the committee’s findings to the Associate Dean for Medical Student Education. The Associate Dean will notify the accused and the student in writing of the findings. The department chair, program director or Associate Dean for Student Affairs will also be notified (see above), and will be responsible for determining disciplinary actions, which will not be disclosed to the accusing student. The Associate Dean for Medical Student Education will be notified in writing of any disciplinary action taken. Record of the proceedings will be kept by the Associate Dean for Medical Student Education. All complaints of student abuse brought to the Associate Dean will be cross-checked to determine if the accused has been cited previously.

VII. Appeals Process

If the accused is a faculty member and wants to appeal the decision of the ad hoc committee or the disciplinary action of the supervisor, a written appeal may be submitted to the University’s Committee on Faculty Rights, which will follow its policy for review. If the accused is a resident physician, a written appeal may be submitted to the Associate Dean for Graduate Medical Education.

If the accused is a student, a written appeal may be submitted to the Dean of the School of Medicine. The Dean or his designate will conduct an appeal review by examining the proceedings of the ad hoc
committee as well as any new facts the accused student offers for consideration. The Dean or designate will notify the accused student in writing of his decision. There will be no further appeal.

Washington University School of Medicine Tobacco-Free Policy

Effective June 11, 2008

It is the policy of the University to provide a healthy, comfortable and productive work and learning environment for all faculty, staff and students. All smoking and other use of tobacco products are strictly prohibited within the School of Medicine buildings and on our property, including during breaks and meal times. This policy applies to the entire School of Medicine community, including, but not limited to all faculty, staff, students, patients, contractors and visitors.

Individuals within the WUSM community are not permitted to smoke or use tobacco products within WUSM owned, leased or occupied facilities or on WUSM owned, leased or occupied property. This includes: the physical campuses; parking facilities and lots (including in personal vehicles at these locations); WUSM owned, leased or rented vehicles; within 25 feet of entryways or exits; near air intakes; or near fire/explosion hazards; any worksites in which individuals within the WUSM Community work.

If individuals within the WUSM community smoke or use tobacco products off WUSM properties, they are expected to be respectful of residents, hospitals and businesses neighboring WUSM facilities. They should not loiter in front of homes, hospitals or businesses near WUSM facilities and must discard tobacco products in appropriate receptacles.

Violations of the policy may result in disciplinary action.

HIPAA Policies

http://secpriv.wusm.wustl.edu/privacy/default.aspx

Washington University Computer Use Policies

http://www.wustl.edu/policies/compolicy.html

POLICIES RELATED TO STUDENT RIGHTS, PROCEDURES, AND SERVICES

Policies for Students with Disabilities
It is the goal of Washington University to assist students with disabilities in removing the barriers their disabilities may pose and provide support in facing the challenge of pursuing an education at Washington University.

Washington University recognizes and accepts its professional, legal and moral responsibility to avoid discrimination in the acceptance and education of qualified students with disabilities and to provide reasonable accommodations to such students consistent with the principles embodied in the law. These guidelines apply to students seeking admittance as well as to those who become disabled while they are enrolled.

Washington University makes every effort to insure that all qualified applicants and students can participate in and take full advantage of all programs and opportunities offered within the University. Washington University encourages and gives full consideration to all applicants for admission. Washington University does not discriminate in access to its programs and activities on the basis of age, sex, sexual orientation, race, disability, religion, color, or national origin.

All students in educational programs at the School of Medicine, those seeking admittance, as well as those who become disabled while they are enrolled, must possess those intellectual, ethical, physical, and emotional capabilities required to undertake the full curriculum and to achieve the levels of competence required by the faculty and the profession.

In this regard, we will be guided by the principles outlined below.

A. Responsibilities of the Student

1. Disclosure of Disability

It is the responsibility of a student who has a disability to disclose it and request accommodation from the Dean for Student Affairs or Program Director. The School encourages students with disabilities to identify themselves as early as possible in order to optimize the mobilization of resources and available accommodations.

2. Diagnosis of Disability

Students who are in academic difficulty that might be a consequence of a disability are encouraged to avail themselves of diagnostic services that may lead to accommodations. Furthermore, such students are encouraged to explore with the administration of their academic unit the possibility of a disability if the inquiry is relevant to educational performance and there is evidence of educational performance problems.

3. Documentation of Disability and Request for Accommodation

The disability, its functional impact and requested accommodation(s) must be documented. If the student discloses a disability and requests accommodation, the School requires documentation of the disability from a qualified professional. The student is financially responsible, unless there are extraordinary and compelling circumstances, for the costs related to the documentation by an appropriately educated and trained professional. The information provided by the professional must be factual, objective and technically valid, and must establish clearly that the disability substantially limits one or more of the student’s major life activities. The professional(s) who evaluate the student should identify options for management of the disability. Based on this information, the affected student then should request in writing the accommodations which he or she requests be made. The Dean for Student Affairs or Program Director and the student should work together to arrive at reasonable accommodations. The School may also require a second expert opinion for which the School may be financially responsible under extraordinary and compelling circumstances. The School reserves the right to request as much detailed information from the student and/or the professional(s) as is necessary to assess the scope of the disability and/or the reasonable accommodations.

B. Responsibilities of the School

1. Review of Requests for Accommodation

Requests for accommodations will usually be reviewed by the Dean for Student Affairs or Program Director. An ad hoc assessment team may be convened which may include the Dean for Student Affairs, the educational Program Director (or curriculum supervisor), selected members of the Disabilities Oversight Committee (See Section B.5 below) and other consultants as appropriate to the individual circumstances. The assessment team usually should include: (1) individuals who understand the curriculum in question; (2) a person who is knowledgeable about the Americans with Disabilities Act; (3)
a person with authority to authorize accommodations and cause them to be implemented.

2. Responsibilities for Accommodation

The School of Medicine is responsible for the costs incurred in making accommodations which are not unduly burdensome or unreasonable. Accommodations may include but may not be limited to academic modifications which do not fundamentally alter the nature of the program, auxiliary services, modifications of the circumstances and methods of qualification examinations, classroom modifications and others. The School’s responsibility to accommodate ends when a student with a disability: (1) refuses reasonable accommodations; (2) is unable, with reasonable accommodations, to fulfill the essential requirements of the program; (3) fulfills the essential requirements and graduates; or (4) transfers to another institution. The School is not required to provide an accommodation which fundamentally alters the nature of the program, is unduly burdensome or is unreasonable.

3. Confidentiality

Information pertaining to a student’s disability and accommodations will be maintained in a file that is kept confidential and separate from the student’s academic record. Appropriate faculty, staff and administrators may be informed regarding the disability, limitations, restrictions, and accommodations when they have a need to know such information.

4. Application of the CAPES Policies

The policies and procedures of the School regarding promotion and retention are contained in the CAPES Policies for each academic unit. These policies and procedures govern the relationship between the School and all students, including those with disabilities. The School is not obligated to retain a student with a disability who poses a significant threat to the health or safety of others when there is no reasonable accommodation that either eliminates or sufficiently reduces that risk.

5. Disabilities Oversight Committee

There shall exist a standing Disabilities Oversight Committee composed of members designated by the Dean of the School of Medicine. The committee shall have the following responsibilities: periodic review of requests for accommodations and accommodations granted, provide recommendations regarding accommodations for disabilities, to serve as requested on disability appeals committee. This group serves as a resource regarding issues of significance to the institution and to students with disabilities.

C. Appeals

A student with a disability who believes that a request for accommodation has been improperly denied or who perceives that he or she has been discriminated against on the basis of a disability should direct his or her appeal to the Dean of the School of Medicine. As needed, the Dean of the School of Medicine may assemble an advisory group to review appeals and make recommendations. This group may include, but may not be limited to, the following: the chair of the committee that oversees academic evaluation and advancement of students for the particular academic unit, students, and/or representatives of the Disabilities Oversight Committee.

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University & Medical School Policy on Student Rights Under Family Educational Rights and Privacy Act (FERPA)

The Family Educational Rights and Privacy Act (FERPA) affords students certain rights with respect to their education records. They are:

A. The right to inspect and review the student’s education records within 45 days of the day the University receives a request for access.

Students should submit to the registrar, dean, head of the academic department or other appropriate official, written requests that identify the record(s) they wish to inspect. The University official will make arrangements for access and notify the student of the time and place where the records may be
inspected. If the records are not maintained by the University official to whom the request was submitted, that official shall advise the student of the correct official to whom the request should be addressed.

B. The right to request the amendment of the student’s education records that the student believes are inaccurate or misleading.

Students may ask the University to amend a record that they believe is inaccurate or misleading. They should write the University official responsible for the record, clearly identify the part of the record they want changed, and specify why it is inaccurate or misleading. If the University decides not to amend the record as requested by the student, the University will notify the student of the decision and advise the student of his or her right to a hearing regarding the request for amendment. Additional information regarding the hearing procedures will be provided to the student when notified of the right to a hearing.

C. The right to consent to disclosures of personally identifiable information contained in the student’s education records, except to the extent that FERPA authorizes disclosure without consent.

One exception which permits disclosure without consent is disclosure to school officials with legitimate educational interests. A school official is a person employed by the University in an administrative, supervisory, academic, research, or support staff position (including law enforcement unit personnel and health staff); a person or company with whom the University has contracted (such as an attorney, auditor, or collection agent); a person serving on the Board of Trustees; or a student serving on an official committee, such as a disciplinary or grievance committee, or assisting another school official in performing his or her tasks. A school official has a legitimate educational interest if that official needs to review an education record in order to fulfill his or her professional responsibility. Upon request, the University discloses education records without consent to officials of another school in which a student seeks or intends to enroll.

D. The right to file a complaint with the U.S. Department of Education concerning alleged failures by the University to comply with the requirements of FERPA.

The name and address of the Office that administers FERPA is: Family Policy Compliance Office U.S. Department of Education 400 Maryland Avenue, S.W. Washington, D.C. 20202-4605

The Family Educational Rights and Privacy Act of 1974 (FERPA) provides current and former students of the University with specific rights of access to and control over their student record information. In compliance with the statute, appropriate federal regulations, and guidelines recommended by the American Association of University Registrars and Admission Officers, the University has adopted procedures that implement these rights.

A copy of the University policies regarding educational records and the release of student record information may be obtained online at http://studentrecords.wustl.edu/FERPA.

Transcript requests may be made in person or by writing to the Registrar’s Office. Faxes are accepted: (314) 362-4658. The written request must include your name, signature, date of birth and approximate dates of attendance.
**Washington University Medical Campus Policy on HIV and HBV Infection**

In 1992, the Executive Faculty of the School of Medicine formally adopted a Medical Campus policy on Human Immunodeficiency Virus (HIV) and Hepatitis B virus (HBV) infections. This policy was updated in 2001 to include Hepatitis C virus (HCV) infections. The purpose of the policy is to provide guidelines to prevent or reduce the transmission of these infectious agents between patients and health care workers.

The policy deals with: 1) the University's responsibilities to infected patients (including obligation to treat, confidentiality and appropriate serologic testing), 2) appropriate health and safety precautions and procedures for faculty, students and staff (including compliance with CDC guidelines, blood and body fluid precautions and handling of needles or sharp instruments), and 3) the University's responsibilities to faculty, staff or students who are infected with HIV, HBV or HCV infection (including admission to medical school, participation in clinical rotations, serologic testing confidentiality and medical treatment).

The policy makes a distinction between class I activities (those involving no risk of transmission from infected health care workers to patients, such as routine physical examinations, dressing changes, intravenous line placement) and class II activities (those that involve the potential for transmission of HIV, HBV or HCV from infected health care workers to patients, such as invasive surgical procedures in which trauma to a health care worker is possible).

This policy is comprehensive, and a complete copy is available to any interested student through the Office for Student Affairs.

**Student Computing Services Policies**


**Liability Insurance**

Washington University provides general liability insurance for all students or practicums while participating in required clinical experiences. In addition, Washington University voluntarily provides a defense and indemnification benefit for matriculated students who are candidates for the MD degree at the School of Medicine (WUSM).

The benefit is provided to WUSM students for defense and indemnification of claims arising out of activities which are part of academic programs and only while a student is acting in his or her capacity as a medical student enrolled in the undergraduate medical program at the School of Medicine. This policy is subject to terms, conditions, limitations and exclusions, and each request for defense/indemnification will be decided on a case-by-case basis at the sole discretion of the university.

Defense/indemnification will not be provided for any criminal acts, acts committed while under the influence, acts in violation of law, or where the injury or damage resulted from intentional malicious
conduct or wrongdoing, or in the event that the action or proceeding is brought by or on behalf of Washington University. This indemnification does not cover any liability which is insured elsewhere, but it may be in excess of any amount payable under any other such insurance.

Any incident, either actual or alleged involving patient injury which could lead to a claim, which you have knowledge of must be reported immediately to the Risk Management Office of the School of Medicine, (314) 362-6956.

If you have any questions about Washington University’s professional liability program, please feel free to call the Risk Management Office.

**Technical Standards Statement**

Graduates of Washington University with a Doctor of Medicine degree are expected to have broad competence in the basic skills that underlie the general practice of medicine and surgery. All graduates must be able to take a history, examine a person, synthesize the findings into a diagnosis and plan of evaluation and treatment independently. Thus, medical students must possess the requisite sensory, motor, communicative and cognitive capabilities to accomplish these requirements in a reliable manner in order to be competent and safe medical practitioners.

**Non-Discrimination Statement**

Washington University encourages and gives full consideration to all applicants for admission, financial aid, and employment. The University does not discriminate in access to, or treatment or employment in, its programs and activities on the basis of race, color, age, religion, sex, sexual orientation, gender identity or expression, national origin, veteran status, disability or genetic information. Inquiries about compliance should be addressed to the University’s Vice Chancellor for Human Resources, Washington University, Campus Box 1184, One Brookings Drive, St. Louis, MO 63130. The School of Medicine is committed to recruiting, enrolling and educating a diverse student body.

**Student Constitution and Bylaws of the Washington University School of Medicine Medical Student Government**

**Article I:**

**Name, Purpose, and Membership**

A. The name of this organization shall be the Medical Student Government of The Washington University School of Medicine.
B. The purpose of the Medical Student Government shall be the advancement of student interests and welfare to achieve excellence in academic pursuits and professional interactions.

C. The Medical Student Government shall represent all students pursuing a medical degree who are in good standing with the University.

**Article II:**

**Class Officers**

A. Offices: Each Class shall elect the following officers: President, Medical Education Representative (MER), Representative to the Organization of Student Representatives (OSR Rep) of the Association of American Medical Colleges (AAMC), Representative to the Graduate-Professional Council (GPC Rep), and a Social Chair/Committee.

B. Duties: Each class officer shall have specific responsibilities:

1. President: Each class shall elect one President. This person shall serve as the official spokesperson for the class in dealings with the Student Government and with the University. The President shall disseminate information regarding medical student affairs and activities. The President shall have oversight and approve of all moneys spent by the Social Chair/Committee. The President shall perform any and all duties that are unique to the class represented.

2. MER: The MER shall represent the class at all meetings of the MERs and Curriculum Evaluation Committee and serve as a liaison between students and faculty on curricular matters. The MER shall poll the class as needed regarding course evaluations and selection of recipients for the various Faculty Awards presented each year.

3. OSR Rep: The OSR Rep shall keep class members up to date with news from the OSR and from the AAMC. The OSR Rep shall represent the University at regional and national meetings of the OSR under an agreement with the University.

4. GPC Rep: The GPC representatives shall represent the School of Medicine at GPC meetings and shall inform the GPC of issues affecting the School of Medicine, learn about issues affecting other schools, discuss and find solutions to problems affecting the whole graduate and professional student population, and plan and advertise social activities that foster communication between all graduate and professional students. The Reps shall be the liaison to the other programs within the School of Medicine, as well as to the rest of the University community. In addition, the four Reps will divide the responsibilities of serving on the Professional and Graduate Students Coordinating Committee (ProGrads), the Medical Campus Committee (temporarily named), and other inter-school/division committees as needed. Specifically in regards to the Health Professional Student Leadership Council (HPSLC), two of the four GPC representatives will serve as voting members on HPSLC. One of these voting members must be the 1st or 2nd year GPC representative. The selection of MSG’s voting members on HPSLC must be made before the end of the sixth week of first-semester classes in the academic year.

5. Social Chair/Committee: The Social Chair/Committee shall organize social functions for class members and interact with other Social Chairs/Committees to organize social functions with other classes and within the University community. The Social Chair/Committee shall consult and obtain approval from the class President for all moneys spent on such functions.

C. Elections: An Election Official designated by the Student Government shall be responsible for the organization and execution of all elections held for offices specified under the Constitution, including President, MER, OSR, GPC, and social chair. Elections shall be held for each of the class officer positions according to the following format:

1. Voting Eligibility: All students who will be a member of the class during the term for which the elected
officers will serve will be eligible to vote in the election. Efforts should be made by the appointed election official to extend the opportunity to vote to students who will be entering their respective classes in the upcoming year, including but not limited to the large number of M.D./Ph.D. students returning for their clinical clerkships.
   a. First and second year offices: A member of the class will be considered to be an individual who is currently planning on taking the M.D. course of study for the upcoming year.
   b. Third and fourth year offices: A member of the class will be considered to be an individual who is planning on taking the M.D. course of study anytime during the upcoming two years, including any individual planning to pursue an M.A. degree for one year after either the second or third year of medical school.

2. Nominations: Nominations for each office shall be held starting at least one week prior to the election and ending no later than three days prior to the election. Nominations shall be submitted in writing to the Election Official. Any student eligible to run for office may nominate him/herself or another medical student in good standing. Candidates must have the firm intention of carrying out all the duties and obligations of the office for the entire term.

3. Candidate Eligibility: All students who will be a member of the class during the term for which the elected officers will serve, as defined in Article II.C.1, will be eligible to be nominated for election except as described below:
   a. President: The class president does not need to be taking the same course of study as the classmates he or she represents. Any individual who meets the criteria defined in Article II.C.1 will be eligible to serve.
   b. MER
      i. 3rd year MER: Due to the duties of the 3rd year MER, it is essential that the 3rd year MER be an individual who is currently taking the MD course of study with the rest of his or her classmates.
      ii. 4th year MER: The 4th year MER rep does not need to be taking the same course of study as the classmates he or she represents. Any individual who meets the criteria defined in Article II.C.1 will be eligible to serve.
   c. OSR Rep: An OSR rep does not need to be taking the same course of study as the classmates he or she represents. Any individual who meets the criteria defined in Article II.C.1 will be eligible to serve.
   d. GPC Rep: A GPC rep does not need to be taking the same course of study as the classmates he or she represents. Any individual who meets the criteria defined in Article II.C.1 will be eligible to serve.
   e. Off-Campus Students: Students who have chosen to pursue a course of study that results in his or her not being in Saint Louis will not be eligible to retain or be nominated for a position. This exclusion does not apply to students who will off-site temporarily for an away rotation.

4. Elections and Terms: All terms shall begin upon election. Regular elections shall be held according to the following schedule:
   a. First Year: Elections shall be held within three to six weeks of the beginning of the first-semester classes. Each position carries a term of one academic year.
   b. Second Year: Elections shall be held within six weeks prior to the completion of the first academic year. Each position carries a term of one academic year.
   c. Third and Fourth Year: Elections shall be held within six weeks prior to the completion of the second academic year. Each position carries a term of two academic years.

5. Class Officer Balloting: To be elected a candidate must receive a simple majority (greater than 50 percent) of the votes cast for that particular office by at least a quorum of one-half of the eligible voters. Write-in candidates shall be allowed on this ballot. Absentee ballots shall be allowed if they are given in writing to the Election Official prior to the day of election. Ballot counting shall be the responsibility of the Election Official under the observation of a witness agreeable to all candidates.

6. Class Officer Runoff Procedures: If no candidate receives a simple majority for a particular position, a runoff between the top two candidates shall be held within three days of the initial election. Write-in candidates will not be allowed on this ballot. To be elected a candidate must receive the most votes cast for that particular office by at least a quorum of one-half of the eligible voters.
7. Social Chair Election Procedure: Social chair elections will be conducted in conjunction with MSG class officer elections. A maximum of four social chairs can be elected into office. Candidates do not have to receive a majority of votes to be elected into office. All other MSG election procedures apply.

8. Appeals: All decisions are made by the Election Official during the election period. Appeals may be made by a candidate in writing to the Chair of the Medical Student Government and will be reviewed and ruled on by a group consisting of the current President, MER, OSR, and GPC from each of the four classes; the decisions of this group will be considered final.

9. Vacant Offices: If any office is vacated before its set term, an election will be held for that office using the procedures outlined above within three weeks of the vacancy. If a current class officer runs for the vacated office, that officer must vacate the post he/she occupies.

10. Removal from Office: In the unfortunate event that a class officer is not fulfilling his/her obligations and duties, MSG by a two-thirds majority of a quorum of one-half may vote to recommend that an officer be removed from office to the class that elected the officer. A vote of recall shall then be held within one week. If a three-fourths majority of a quorum of two-thirds of a class votes to recall the officer, the officer shall be removed from office. An election for vacant office shall then be held.

D. M.D./Ph.D. Research Students: There shall be two Representatives of the M.D./Ph.D. students who are outside the core medical curriculum. These Representatives shall be selected by a method chosen by the Medical Scientist Training Program (MSTP.) In addition, these individuals shall be full voting members of the MSG. Each Representative shall serve a two-year term, with elections for one Representative each summer, so the terms of the two Representatives overlap by one year.

E. Technology Liaison: The responsibilities of the class appointed Technology Liaison include serving as the representative to the administration regarding the availability and utilization of technology and addressing related class concerns. In addition, the Technology Liaison will work with Instructional Technologies and Library Systems (ITLS) to provide new services and assist the MER with technology-related education initiatives. One Technology Liaison will be appointed for each medical school class after the class-wide elections have taken place. After a call for applications from the class, the four (4) elected MSG members of that class review each application and select the Technology Liaison by consensus. The term of the Technology Liaison will be the same as the elected officials of that class.

Article III:

The Medical Student Government

A. Membership: The Student Government shall consist of the President, the MER, the OSR Rep, and the GPC Rep from each of the four classes, as well as two representatives of M.D./Ph.D. Students.

1. Additional voting members: Any student who has served on MSG for a minimum of two years and is no longer eligible to serve as a class representative due to departure from the traditional 4-year MD curriculum may be remain on MSG as a voting member in an advisory role. All students will only be eligible to serve as a voting member for up to five total years.

2. Non-voting members: In addition, the Student Government may offer a non-voting position to a duly elected representative of any student group which is recognized nationally, regionally or within the Medical School so long as such a group is open to all medical students without discrimination and that such a group is not in conflict with the goals of the Student Government.

B. Purpose and Responsibilities: The Student Government shall carry out the business of the Student Government pursuant to the goals stated in Article I. The purpose of the Student Government shall be to represent and promote the interests and concerns of the medical student body through activities including but not limited to:

1. Forming and representing official student body opinions for interaction with the University, its Administration and other groups associated with medical education.
2. Serving as a forum for interaction between student groups.
3. Serving as a forum for student-initiated curricular review and reform in the pursuit of academic excellence.
4. Promoting interaction among the School of Medicine students, faculty and administration, and with the wider University community.
5. Establishing a funding mechanism and budget with the associated collection and disbursements of funds for activities pursuant to goals stated in Article I.
6. Organizing elections for class officers and any other official representative of the student body at large.
7. Exercising any such additional authority as may be granted to it by the School of Medicine or by other organizations, so long as such authority is consistent with the purposes stated in Article I.
8. Posting agenda of all meetings for public reference.
9. Formulating all rules and bylaws necessary for the Student Government to carry out the responsibilities and powers granted through this constitution. Such rules and bylaws shall require a simple majority of a quorum of two-thirds of the voting Student Government members.
10. The Student Government shall meet regularly and at intervals of no more than six weeks.
11. Representatives from the various student groups sitting on the Student Government shall keep the Student Government informed of all activities associated with their posts in the form of a written brief to be presented at the Student Government meeting as appropriate for their group’s activities.

C. Student Government Offices: There shall be a Student Government Chair and Vice-Chair elected from the voting members of the Student Government. Election shall require a simple majority of the voting Student Government. The election shall be held within six weeks prior to the completion of the academic year. The terms of these offices shall be one academic year.

1. Student Government Chair: The Student Government Chair shall preside at all meetings of the Student Government and have specific responsibilities:
   a. The Chair shall serve as official representative and spokesperson for the Student Government to the University, its Administration, and to other groups associated with medical education.
   b. The Chair shall be responsible to ensure the duties of the Student Government are carried out efficiently and in a timely manner.
   c. The Chair shall report the names of the Class Officers to the Dean, and post such a list for public reference.
   d. The Chair shall be responsible for overseeing and maintaining records and to set the agenda for such meetings in written form for distribution to Student Government members prior to each meeting.
   e. The MSG shall be responsible for overseeing and maintaining records of all financial transactions of the Student Government. The second-year class president shall regularly update the Student Government on its financial standing, and must make all financial records available to any medical student, member of the Administration, or to any official of the University. All transactions shall require the signatures of the Chair and the Vice-Chair.
   f. The Chair shall be empowered to call for standing and ad hoc committees to evaluate and make recommendations about specific areas of concern to the Student Government, the School of Medicine and its students. MSG shall appoint these committees.
   g. The Chair shall be empowered to designate another Student Government member to take on one or more of his/her duties.

Article IV:

Ratification and Amendments

A. In 1993 this Constitution was ratified by a 2/3 majority of a quorum of one-half of the student body pursuing a medical degree.

B. This Constitution can be amended by either a 2/3 majority of a quorum of one-half of the students in their first, second, and third years, or by a unanimous vote of the elected members of the Medical
Student Government.

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*Class Officers (2012-13)*

**Fourth-Year Class Officers**

President
Ignacio Becerra-Licha

Medical Education Representative (MER)
Arun Ganti

Representative to the Graduate Professional Council (GPC Rep)
Jared Wilkinson

**Third-Year Class Officers**

President
Philip Perez

Medical Education Representative (MER)
Akshay Ganju

Representative to the Organization of Student Representatives (OSR Rep)
Rob Klemisch

Representative to the Graduate Professional Council (GPC Rep)
Tammi Cooks

**Second-Year Class Officers**

President
Gregory Ebersole

Medical Education Representative (MER)
Austin Wesevich

Representative to the Organization of Student Representatives (OSR Rep)
Shelley Forbes

Representative to the Graduate Professional Council (GPC Rep)
Amelia Lucisano

**First-Year Class Officers**

President
Anand Mohapatra
Medical Education Representative (MER)
Francis Deng

Representative to the Organization of Student Representatives (OSR Rep)
Agnes Dardas

Representative to the Graduate Professional Council (GPC Rep)
Miranda Lindburg

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**Departments**

**Departments**

**Department of Anatomy and Neurobiology**

The structure of the human body is presented in two courses: The Human Body: Anatomy, Embryology and Imaging, offered in the first semester, and Microscopic Anatomy, which extends over the first and second semesters. A third course, Neural Sciences, is taught at the end of the second semester. Human Anatomy and Development is largely a laboratory course, and lectures deal with anatomical principles and human growth and development. Instruction in Microscopic Anatomy focuses on cell and tissue biology, with laboratory sessions paralleling the lectures in these areas. This is a component of the Cell and Organ Systems Biology course jointly taught with the Department of Cell Biology and Physiology. Neural Sciences is an integrated course that deals with the structure, function and development of the nervous system from molecular, cellular and systems perspectives. Throughout all three courses, attention is paid to the results of recent investigations and to major developments in each field. In addition, the departmental faculty have a lead role in many graduate courses that may be taken as electives by students in any of the four years. The department is well-equipped for specialized work in several areas, including gross anatomy, electron microscopy, tissue culture and all aspects of neurobiology.

**Courses**

**First Year**

**M35 554  NEURAL SCIENCES**
Instructors: David C. Van Essen, PhD, 362-7043; Timothy E. Holy, PhD, 362-0086; W. Thomas Thach Jr., MD, 362-3538 (Co-Coursemasters)

Neural Sciences is an intensive seven-week course that covers the structure, function and development of the nervous system as seen from molecular, cellular and systems-oriented perspectives. The emphasis is on the organization and function of the nervous system in health, but there is frequent reference to the clinical relevance of material presented. The course includes regular lectures, conference sessions and laboratories, plus a number of clinically oriented presentations. Computer-aided instructional programs, accessible from a variety of locations, provide auxiliary modes of self-paced learning and review. The midterm and final emphasize the core body of important facts and principles presented in lectures and laboratories. (SPRING ONLY).

**M05 501B  THE HUMAN BODY: ANATOMY, EMBRYOLOGY AND IMAGING**
Instructor: Glenn C. Conroy, PhD, 362-3397

The course is based largely on the dissection of the human body. Lectures on functional and topographic anatomy emphasize the principles of organization of the various systems of the body. Lectures on developmental anatomy stress organogenesis as an adjunct to understanding the normal and abnormal anatomy. An extensive museum of labeled dissected specimens is housed in the dissection room for ready reference by students who encounter abnormalities or variations in their dissections. Frequent use of CT, MRI, and X-ray images aid in the synthesis of knowledge gained through dissection. Small group discussions emphasize radiological anatomy and clinical correlations. This course is restricted to first year medical students, but limited space is sometimes available for nonmedical students enrolled in the PhD program with instructor’s permission. Cross-listed with L41 (Bio) 501.

**M75 503 CELL AND ORGAN SYSTEMS BIOLOGY**
The structure of cells, tissues and organs is studied with regard to the functional significance of the morphological features. Lectures integrate histology with cell biology and physiology. The laboratories consist of the study of prepared slides, electron micrographs and digital images. A dual-view microscope will be provided for each pair of students. Limited space is available for non-medical students with instructor's permission. This course is cross-listed in the Department of Cell Biology and Physiology.

**Selectives**

**M04 552 GENETICS AND MOLECULAR BIOLOGY OF ION CHANNELS**
Instructor: Lawrence B. Salkoff, PhD, 362-3644
A functional genomics approach to studying membrane excitability. How the new DNA sequence data from genomic and EST sequencing projects can be exploited to get a comprehensive picture of gene families that contribute to membrane excitability. How DNA sequence data can contribute to understanding questions of physiology, development, regulation and structure-function relationships.

**Fourth Year**

**Electives**

The department offers a number of graduate-level courses that may be taken as electives by medical students. The department participates in the Division of Biology and Biomedical Sciences, which also offers courses relevant to anatomy and neurobiology.

These course descriptions are presented in the section on Biology and Biomedical Sciences.

L41 (Bio) 5571 CELLULAR NEUROBIOLOGY  
L41 (Bio) 5651 NEURAL SYSTEMS  
L41 (Bio) 590 RESEARCH OPPORTUNITIES

Note — The number preceding the course title indicates that the course is offered by the Division of Biology and Biomedical Sciences and carries credit in the Graduate School of Arts & Sciences.

**M05 810 ADVANCED DISSECTION**
Instructor(s): Staff, 362-3397  
Location: North Building  
Elective Contact: Glenn Conroy, PhD, 362-3397  
Other Information: Self Study. High Pass/Fail. Contact Dr. Conroy one week prior to the start of the elective.  
Enrollment limit per period: 14  
Valid start weeks for 4-week blocks are: Weeks 29, 33, 37, and 41.

Different regions of the body will be dissected in detail. A period of four weeks should be allowed for each region: head and neck, thorax and abdomen, and superior and inferior limbs. Surgical approaches, cross-sections, X-rays and CT scans can be studied.

Student time distribution: A minimum of 40 hours is required  
Major teaching responsibility: N/A  
Patients seen/weekly: N/A  
On call/weekend responsibility: N/A

**M05 820 TEACHING ASSISTANT IN HUMAN ANATOMY**
Instructor(s): Glenn Conroy, PhD, 362-3397  
Location: North Building
Elective Contact: Glenn Conroy, PhD, 362-3397
Other Information: Students should contact Dr. Conroy one week prior to the start of the elective. Enrollment limit per period: 3
Valid start weeks for 4-week blocks are: Weeks 13 and 21.

Offers the student the opportunity to review human anatomy by assisting the Anatomy faculty in teaching first-year medical students in the Anatomy laboratory.

Student time distribution: N/A
Major teaching responsibility: N/A
Patients seen/weekly: N/A
On call/weekend responsibility: N/A

Research

(M05 900)

Cross-listed with L41 (Bio) 590

Nancy L. Baenziger, Ph.D., 9th Floor, McDonnell Medical Sciences Building, 362-2817. Environmental stress impact on receptor signal transduction and neuronal connectivity in cellular models of Alzheimer’s disease.

Paul Bridgman, Ph.D., 4th Floor, McDonnell Medical Sciences Building, 362-3449. Cell biology of the developing nervous system.

Andreas Burkhalter, Ph.D., 4th Floor, North Building, 362-4068. Organization and function of neuronal circuits in mouse visual cortex.

Harold Burton, Ph.D., 3rd Floor, East McDonnell Specialized Research Facility, 362-3556. Cortical functional reorganization in response to sensory changes due to unilateral deafness or strabismus.

Valeria Cavalli, Ph.D., 4th Floor, McDonnell Medical Sciences Building, 362-3540. Cellular and molecular mechanisms of nerve regeneration. Regulation of molecular motors in neurons.

James M. Cheverud, Ph.D., 3rd Floor, North Building, 362-4188. Evolutionary quantitative genetics, genetics of growth and morphology, gene mapping for obesity and diabetes-related traits in mice.


Krikor Dikranian, Ph.D., 3rd Floor, North Building, 362-3548. Development and morphology of the amyloid plaques in experimental animals, neuropathological changes after head trauma.

David I. Gottlieb, Ph.D., 9th Floor, McDonnell Science Building, 362-2758. Embryonic stem cell models of neural development and disease.

Paul A. Gray, Ph.D., 9th Floor, McDonnell Medical Sciences Building, 362-9063. Molecular development of
neural circuits underlying simple behavior.

Timothy E. Holy, Ph.D., 4th Floor, North Building, 362-0086. Mammalian pheromones: neural mechanisms of action.

Arthur D. Loewy, Ph.D., 9th Floor, McDonnell Medical Sciences Building, 362-3930. Analysis of brain circuits controlling cardiovascular functions.


Camillo Padoa Schioppa, Ph.D, 3rd Floor, East McDonnell Specialized Research Facility, 362-3530. Neuronal bases of economic choice and decision making.

Narendrakumar Ramanan, Ph.D., 9th Floor, McDonnell Medical Sciences Building, 362-0233. Transcriptional control of synaptic plasticity.

Lawrence B. Salkoff, Ph.D., 9th Floor, McDonnell Medical Sciences Building, 362-3644. The roles of ion channels in neuronal long-term excitability changes.

Paul J. Shaw, Ph.D., 9th Floor, McDonnell Medical Sciences Building, 362-2703. Molecular genetics of sleep and circadian rhythms.

Lawrence H. Snyder, M.D., Ph.D., 3rd Floor, East McDonnell Specialized Research Facility, 747-3530. Computational and cognitive issues in cortical control of eye and arm movement: electrophysiology and imaging.

Paul H. Taghert, Ph.D., 9th Floor, McDonnell Medical Sciences Building, 362-3641. (i) Neurobiology of circadian rhythms. (ii) Neurobiology of peptidergic neurotransmission.

David C. Van Essen, Ph.D., 2nd Floor, East McDonnell Specialized Research Facility, 362-7043. Organization, function and development of primate cerebral cortex, especially in humans; generation and utilization of neuroinformatics tools for data mining.

Faculty

David C Van Essen , PHD Head of the Department of Anatomy and Neurobiology
Nancy L Baenziger , PHD Research Associate Professor of Neurobiology
Anesthesiology is a medical specialty encompassing a broad range of medical and scientific activities. The clinical practice of anesthesiology includes: 1) assessment of, consultation for and preparation of patients for anesthesia and surgery; 2) provision of insensibility to pain during surgical, obstetric, therapeutic and diagnostic procedures; 3) monitoring and restoration of physiologic homeostasis during the perioperative period, as well as homeostasis in the critically ill or seriously injured patient; 4) diagnosis and treatment of painful syndromes; and 5) clinical management and teaching of cardiopulmonary resuscitation (CPR). The realm of scientific investigation in anesthesiology also spans a broad range. Scientific efforts at the cellular and molecular levels are directed to understanding the molecular mechanisms of anesthesia and analgesia. Clinical research in anesthesia includes broad epidemiological approaches to identifying indicators of outcome as well as prospective clinical studies examining new technologies, anesthetic agents and methods.

The Department of Anesthesiology presents the student with the opportunity to: 1) acquire and apply pharmacologic knowledge related to anesthetic, narcotic, paralytic and sedative drugs and to drugs affecting the autonomic nervous system; 2) understand and apply the basic principles of airway management and mechanical ventilation; 3) understand and apply the principles of cardiopulmonary resuscitation; 4) understand and apply the technical skills and anatomic and pharmacologic knowledge used in performing regional nerve blocks; 5) learn and apply the fundamental principles of acute and chronic pain management; and 6) learn and apply the basic principles of critical care medicine.

Anesthesiology bridges the gap between basic science and clinical medicine. It provides experience in the clinical evaluation and management of patients, and in applied physiology and pharmacology. The Department of Anesthesiology offers student experiences in the operating room, the intensive care unit, the pain clinic and the laboratory.

This clerkship introduces all of the basic aspects of anesthetic practice, including preoperative assessment, intraoperative anesthetic administration, placement and interpretation of invasive and
noninvasive physiologic monitoring, airway management and regional anesthetic administration. Students taking this clerkship work one-on-one with attending anesthesiologists and are an integral part of the anesthetic care team. By the end of the clerkship, the student should be able to provide (under supervision) anesthesia for an uncomplicated surgical procedure. This rotation offers a unique opportunity for the student to work directly with attending physicians and to acquire fundamental skills (airway management, invasive monitoring, regional anesthesia) applicable to all aspects of acute medicine.

Students who have taken the anesthesia clerkship in the third year may elect to repeat this rotation in the fourth year. These students will be exposed to more complicated cases and techniques, and will be given increased responsibility for perioperative patient management. Students who have taken the clerkship in the third year also may elect to take an elective in the subspecialty areas of Cardiothoracic Anesthesiology, Pediatric Anesthesiology, Obstetric Anesthesiology or Anesthesia for Neurosurgery. Students taking these electives will be exposed to surgical cases of increased complexity requiring specialized invasive monitoring and anesthetic techniques.

Four-week electives are also offered in surgical critical care and cardiothoracic critical care. In these electives, the student is an integral part of the intensive care team. Students learn techniques of mechanical ventilation, hemodynamic monitoring, resuscitation and vasoactive drug treatment while managing all aspects of patients assigned to their care.

The clerkship in pain management offers the student the opportunity to participate in comprehensive, multidisciplinary management of acute, chronic and cancer pain problems. Students will be expected to assist in the care of both inpatients and outpatients. Students will learn fundamental aspects of pain management, which should provide the knowledge with which to manage routine acute and cancer pain in their subsequent practice.

Special electives in basic science research as it applies to anesthesiology can be arranged with the principal investigators in the Department of Anesthesiology, in the Anesthesiology Research Unit under the direction of C. Michael Crowder, MD, PhD, the Washington University Pain Center under the direction of Rob Gereau, PhD, or the Division of Clinical and Translational Research under the direction of Evan Kharasch, MD, PhD. These laboratories focus on various aspects of molecular neurobiology, including ion channel structure and function; G-protein molecular biology; molecular mechanisms of volatile anesthetic action; genetics of anesthetic responsiveness; and the molecular, cellular and genetic basis of acute and chronic pain. Arrangements for these special electives are made through the specific investigators: Walter A. Boyle III, MD; Zhou-Feng Chen, PhD; C. Michael Crowder, MD, PhD; Alex S. Evers, MD; Narasimhan Gautam, PhD; Richard S. Hotchkiss, MD; Christopher J. Lingle, PhD; Joseph H. Steinbach, PhD; Michael Bruchas, PhD; Yu-Qing Cao, PhD; or Robert W. Gereau, PhD. In addition, opportunities exist for clinical research in the Clinical Research Division, under the direction of Evan Kharasch, MD, PhD.

Courses

**Fourth Year**

**Electives**

**M10 805 ANESTHESIOLOGY**  
Instructor(s): Jens Tan, M.D., 362-1373; tanj@anest.wustl.edu  
Location: Barnes-Jewish Hospital, South Campus; Department of Anesthesiology, Third Floor  
Elective Contact: Kara Miller, 362-4449  
Other Information: Please contact the department student secretary, Kara Miller, 362-4449 prior to the elective for specific instructions. Students should meet in the Clinical Simulation Center, third floor Barnes-Jewish Hospital Service Building, 8:30 a.m. first day of elective.  
Enrollment limit per period: 2  
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.
This clinical elective is designed to familiarize the student with basic aspects of anesthesiology practice. The primary teaching method is patient care in a clinical setting (one-on-one). The student will learn the basics of preoperative evaluation of surgical patients, the use of intraoperative monitoring in patient management and postoperative care. During the 4-week rotation, the student will learn airway management skills, practical perioperative fluid and electrolyte therapy, along with general and regional anesthetic techniques. As an integral part of the anesthesia care team, the student will participate actively in the anesthetic management of surgical patients. The student’s specific requests to be assigned to certain types of cases will be honored as time and availability dictate. The rotation will include three clinical simulator sessions using a simulator mannequin for practical management of airway problems, resuscitation and trauma emergencies. By the end of the rotation, the student should be able to independently (under supervision) provide anesthesia for uncomplicated surgical procedures. NOTE: Presence and participation in the three Friday simulator sessions and the presentation on the last day of the rotation are required to receive a grade. If there is a conflict with scheduled interviews, prior arrangements can be made to accommodate the student.

Student time distribution: Inpatient 85%, Conferences/Lectures 15%; Subspecialty Care 100%
Major teaching responsibility: Single attending and/or Senior Resident
Patients seen/weekly: 15
On call/weekend responsibility: Medical students are not required to take call during their rotation, but they may volunteer to work in the main operating rooms or in the obstetrical suite any evening or weekend.

M10 811 CARDIOTHORACIC ANESTHESIOLOGY
Instructor(s): Rocco Huneke, M.D., 362-1196.
Location: Barnes-Jewish Hospital, South Campus
Elective Contact: Lydia Swink, 362-1196
Other Information: Students should meet at the offices of the Division of Cardiothoracic Anesthesia, Third Floor Barnes-Jewish Service Building, 8:30 a.m. first day of elective
Enrollment limit per period: 2
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

This clinical elective offers practical experience in the perioperative assessment and management of surgical patients undergoing cardiothoracic procedures. The student, as part of the cardiothoracic anesthesia team composed of faculty members, fellows and residents, will learn basic principles of airway management and lung ventilation, essential aspects of pharmacologic treatment of hemodynamic abnormalities and cardiac dysrhythmias, and management of intraoperative coagulation disturbances. Emphasis will be placed on the interpretation of intraoperative hemodynamic data, echocardiographic finding (TEE), and laboratory results in clinical decision making and treatment approach during anesthesia and surgery. During this rotation, the student will also gain practical experience in endotracheal intubation and the placement of intravenous lines and invasive monitoring lines, including radial artery and pulmonary artery catheters. At the conclusion of the rotation, the student will have a better understanding of invasive monitoring and data interpretation, as well as a more systematic approach to the management of intra- and postoperative hemodynamic, pulmonary and coagulation abnormalities. The students are expected to attend the didactic sessions of CTA and the Department of Anesthesiology. A presentation or paper will be assigned.

Student time distribution: Inpatient 100%; Subspecialty Care 100%
Major teaching responsibility: Rocco Huneke, M.D.
Patients seen/weekly: 15
On call/weekend responsibility: None

M10 812 PEDIATRIC ANESTHESIA
Instructor(s): Kelly Chilson, M.D.; Gary Hirshberg, M.D.; Tessa King, M.D.; and David Murray, M.D., 454-6215
Location: Fifth Floor, St. Louis Children’s Hospital
Elective Contact: Kelly Chilson, M.D., 454-6215
Other Information: Students should contact Martha Severn, 454-6215, one week prior to the start of the elective.
Enrollment limit per period: 3
Valid start weeks for 4-week blocks are: Weeks 9, 13, 17, 21, 25, 29, 33, 37, and 41.

This clinical elective is designed to teach the theory and practice of pediatric anesthesiology and pain management. It features individualized instruction with faculty who specialize in the perioperative care of pediatric patients. The elective consists of four weeks of active participation with pediatric anesthesiologists at St. Louis Children’s Hospital and St. Louis Shriners Hospital learning preanesthetic assessment, the performance of routine anesthetics (which includes instruction and practice in pediatric airway skills), learning other technical skills such as intravenous line placement and the management of post-anesthesia care and pain therapies. The final week may be tailored to meet the student’s individual interests, needs and career goals. Possibilities include exposure to sedation and anesthesia for procedures outside of the operating rooms, and to subspecialties including cardiovascular anesthesia, neurosurgical anesthesia, and acute and chronic pediatric pain management. Students also will have an opportunity to learn the management of some common medical emergencies in the Clinical Simulation Center.

Student time distribution: Inpatient Surgery 5%, Outpatient Surgery 80%, Conferences/ Lectures 15%; Subspecialty Care 100%
Major teaching responsibility: Attending, fellows and senior anesthesiology residents; students will generally spend most of each day with a single attending or senior anesthesiology trainee (fellow or resident).
Patients seen/weekly: 25
On call/weekend responsibility: None

M10 819 CARDIOThorACIC CRITICAL CARE
Instructor(s): Charl de Wet, M.D., course master; Heidi Atwell, D.O.; Michael Avidan, M.D.; Daniel Emmert, M.D.; TJ Graetz, M.D.; Adnan Sadiq, M.D.; and Mike Wall, M.D.
Location: Barnes-Jewish Hospital, Southwest Tower
Elective Contact: Maureen Arends, 747-4155
Other Information: Students should meet in the Cardiothoracic Intensive Care Unit, 5600 ICU, Fifth Floor, Southwest Tower, Physician Workroom, 6:30 a.m. first day of elective.
Enrollment limit per period: 3
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

This clinical elective offers practical experience in the postoperative management of cardiothoracic patients. The student will be fully integrated into the intensive care team and have the opportunity to contribute to the management of critically ill patients. Students will be afforded the opportunity to follow specific patients over the course of their stay on the ICU, during which time they will gain insight into holistic management of patients with multi-organ dysfunction. The CTICU environment is both challenging and exciting. Cardiorespiratory physiology and pharmacology will be demonstrated at the patients’ bedside, an invaluable and unforgettable learning experience. Students will have numerous opportunities to assist with and learn procedures, such as central lines, chest tubes, bronchoscopy and pulmonary artery catheter insertion. Principles of management and resuscitation of hemodynamically unstable patients following surgery will be emphasized. Students will also see and help manage patients on ventricular assist devices, ECMO and following heart and lung transplantation. At the conclusion of the rotation, the student will have a better understanding of shock, sepsis, multiorgan failure, organ system support and compassionate withdrawal of life support. In addition to bedside teaching, there will be informal teaching sessions on a wide variety of topics as well as teaching on interpreting cardiac echo exams. Students will be encouraged to present on their patient at morning ward rounds, during which constructive feedback and interactive teaching will occur. Students will present on a topic related to one of their patients at the end of the block.

Student time distribution: Inpatient 100%; Subspecialty Care 100%
Major teaching responsibility: CTICU attendings
Patients seen/weekly: 21
On call/weekend responsibility: None
M10 820 CRITICAL CARE
Instructor(s): Heidi Atwell, D.O., 362-1196, course master; Watler Boyle, M.D.; Grant Bochicchio, M.D.; Anne Drewry, M.D.; Daniel Emmert, M.D.; Alex Evers, M.D.; Brian Fuller, M.D.; Thomas J. Graetz, M.D.; Richard Hotchkiss, M.D.; Kareem Husain, M.D.; John Kirby, M.D.; John Mazuski, M.D.; Tiffany Osborn, M.D.; Adnan Sadiq, M.D.; Doug Schuerer, M.D.; Robert Southard, M.D.; George Tseng, M.D.; Mike Wall, M.D.; and Brian Wessman, M.D.
Location: Barnes-Jewish Hospital, South Campus
Elective Contact: Barbara McKinney, 747-3581
Other Information: Students should meet in the 8400 Surgical Intensive Care Unit, Eighth Floor of Barnes-Jewish Hospital, 7:30 a.m. on the first day of the elective.
Enrollment limit per period: 4
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

Students on this rotation are integral members of the multidisciplinary intensivist-led critical care team in the Surgical Intensive Care Unit (SICU). Students learn an organ systems-based approach for evaluation and management of critically ill and injured patients, and application of evidence-based principles in delivery of state-of-the-art critical care. Emphasis is placed on critical care knowledge and techniques used at the bedside in the clinical management of serious traumatic and surgical conditions. Students become familiar with resuscitation and cardiopulmonary support, including methods for noninvasive and invasive hemodynamic monitoring, and techniques for airway management and pulmonary support in respiratory failure. Basic knowledge and skills in the management of neurologic injuries, liver and/or renal failure, and life-threatening infections in the surgical patient are also taught, as is the importance of treatments to alleviate anxiety and pain, maintain fluid and electrolyte balance, and provide adequate nutrition. Practical experience is gained in placement of vascular access devices, interpretation of laboratory data, and use of guidelines, protocols and quality assurance tools in the management of critically ill patients.

Student time distribution: Inpatient 80%, Conferences/Lectures 20%; Subspecialty Care 100%
Major teaching responsibility: ICU Attendings
Patients seen/weekly: 50
On call/weekend responsibility: Variable

M10 821 PAIN MANAGEMENT
Instructor(s): Robert A. Swarm, M.D., 747-0202
Location: Barnes-Jewish Hospital, South Campus
Elective Contact: Robert A. Swarm, M.D., 747-0202
Other Information: Students should report to 10th Floor CAM Building, 8 a.m. first day of elective.
Enrollment limit per period: 4
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

Acute pain is the most common symptom of medical illness and is ubiquitous after major surgery. Chronic pain is the leading cause of worker disability. Severe pain afflicts most people with advanced cancer. Learning the fundamentals of pharmacologic, interventional, and multidisciplinary pain management is important for all areas of clinical medicine. Rotation is based at Barnes-Jewish Hospital, with focus adjusted to meet student’s interest and career plans.

Student time distribution: Inpatient 30%, Outpatient 60%, Conferences/ Lectures 10%; Subspecialty Care 100%
Major teaching responsibility: Attendings
Patients seen/weekly: 70
On call/weekend responsibility: One weekend per rotation

M10 822 ANESTHESIA FOR NEUROSURGERY
Instructor(s): René Tempelhoff, M.D., 362-2330
Location: Barnes-Jewish Hospital, South Campus
Elective Contact: René Tempelhoff, M.D., 362-2330
Other Information: Students should meet on the Third Floor of Barnes-Jewish Hospital, South Campus, Department of Anesthesiology, 7 a.m. first day of elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

Challenging neurosurgical procedures. Student will become familiar with complex procedures for brain monitoring, cardiovascular support and airway management and will be exposed to all kinds of neurosurgical ailments. Student must be prepared to participate in the complex anesthetic management of patients undergoing surgery in our novel intraoperative MRI rooms.

Student time distribution: Inpatient 80%, Conferences/Lectures 20%; Subspecialty Care 100%
Major teaching responsibility: Attending, fellow and senior resident
Patients seen/weekly: 8
On call/weekend responsibility: None

M10 823 OBSTETRICAL ANESTHESIA
Instructor(s): Swarup Varaday, M.D., 362-6252
Location: Barnes-Jewish Hospital, South Campus
Elective Contact: Swarup Varaday, M.D., 362-6252 or 362-2628
Other Information: Students should report to 5400 Labor and Delivery, 7 a.m. first day of elective.
Enrollment limit per period: 1
Valid start weeks for 2 or 4-week blocks are: Weeks 1, 3, 5, 7, 9, 11, 13, 15, 17, 19, 21, 23, 25, 27, 29, 31, 33, 35, 37, 39, 41, and 43.

The medical students will learn the different analgesia/anesthetic options for the labor patient. They will also learn how the physiological adaptations of pregnancy influence anesthetic management. They will be actively involved in the parturient's management, i.e., starting an IV, placement of spinal, epidural or CSE (combined spinal epidural) anesthetics. They will also attend the OB anesthesia conferences and interview patients in labor (with an OB anesthesia attending).

Student time distribution: Inpatient 90%, Conferences/Lectures 10%; Subspecialty Care 100%
Major teaching responsibility: Attending, Senior Resident
Patients seen/weekly: 20
On call/weekend responsibility: None (optional)

Faculty

Alex S Evers , MD Head of the Department of Anesthesiology
Siarjuddin Agha , MBBS Assistant Professor of Anesthesiology
Gustav Akk , PHD Assistant Professor of Anesthesiology
Heidi Kathleen Atwell , DOST Assistant Professor of Anesthesiology
Michael Simon Avidan , MBBCH Professor of Anesthesiology
Arbi Ben Abdallah Instructor in Anesthesiology
George Richard Benzinger III, MD, PHD Assistant Professor of Anesthesiology
Roberto Carlos Blanco Duarte , MD Instructor in Anesthesiology
Laia M Bottros , MD Assistant Professor of Anesthesiology
Michael M Bottros , MD Instructor in Anesthesiology
Walter A Boyle III, MD Professor of Anesthesiology
Michael Raymond Bruchas , PHD Assistant Professor of Anesthesiology
Scott D Campbell, DSc, MHS  Research Instructor in Anesthesiology
Yuqing Cao, PHD  Assistant Professor of Anesthesiology
Laura Francesca Cavallone, MD  Assistant Professor of Anesthesiology
Zhoufeng Chen, MS, PHD  Professor of Anesthesiology
Ziwei Chen, MBBS, MS, PHD  Research Assistant Professor of Anesthesiology
Kelly Lynne Chilson, MD  Assistant Professor of Anesthesiology
Albert Murray Cohen, MD  Assistant Professor of Anesthesiology
Thomas E Cox, MD  Associate Professor of Anesthesiology
Charles M Crowder, MD, PHD  Dr. Seymour and Rose T. Brown Professor of Anesthesiology
Bakul Dave, MD  Assistant Professor of Anesthesiology
Victor G Davila-Roman, MD  Professor of Anesthesiology
Charl Johan De Wet, MBCHB  Associate Professor of Anesthesiology
George J Despotis, MD  Associate Professor of Anesthesiology
Michael N Diringer, MA, MD  Professor of Anesthesiology
Anne Meredith Drewry, MD  Instructor in Anesthesiology
Nicole Marie Durko, DOST  Instructor in Anesthesiology
Daniel Emmert  Assistant Professor of Anesthesiology
Alex S Evers, MD  Henry E Mallinckrodt Professor of Anesthesiology
James J Fehr III, MD  Associate Professor of Anesthesiology
Steven Edward Feit, MD  Assistant Professor of Anesthesiology
Beverly J. Field, B MUS, M MUS, PHD  Associate Professor of Anesthesiology
Mitchell Evan Fingerman, MD  Assistant Professor of Anesthesiology
David Alan Friedman, MD  Instructor in Anesthesiology
Brian M Fuller, MD  Assistant Professor of Anesthesiology
Narasimhan Gautam, MS, PHD  Professor of Anesthesiology
Robert W Gereau, PHD  Professor of Anesthesiology
Thomas James Goblirsch, MD  Assistant Professor of Anesthesiology
Judith P Golden, MA, PHD  Research Assistant Professor of Anesthesiology
Thomas J Graetz  Assistant Professor of Anesthesiology
Barry A Graff, MD  Assistant Professor of Anesthesiology
Russell J.I. Groener, MBCHB  Assistant Professor of Anesthesiology
Anthony Herbert Guarino, MA, MD  Associate Professor of Anesthesiology
Charles B Hantler, MA, MD  Professor of Anesthesiology
Daniel Luke Helsten, MD  Assistant Professor of Anesthesiology
Mohammad Anas Helwani  Assistant Professor of Anesthesiology
Robert E Herold, MD  Assistant Professor of Anesthesiology
Gary E Hirshberg, MD  Professor of Anesthesiology
Barbel Holtmann, MD  Associate Professor of Anesthesiology
Maria Cristina Honorato Cia  Instructor in Anesthesiology
Richard S Hotchkiss, MD  Professor of Anesthesiology
Hawpeng Stephen Hsu, MD, MS Assistant Professor of Anesthesiology
Rocco Hunke, MD Assistant Professor of Anesthesiology
Catherine Ifune, MD, PHD Associate Professor of Anesthesiology
Selma E.h.o. Ishag, MD, PHD Assistant Professor of Anesthesiology
James S Jones Instructor in Anesthesiology
Dagmar Julika Kaiser, MBBCH, MD Instructor in Anesthesiology
Heiko Andreas Kaiser, MD, PHD Instructor in Anesthesiology
Daniel Thomas Kane, MD Assistant Professor of Anesthesiology
Ivan M Kangra, MD, PHD Associate Professor of Anesthesiology
Menelaos Karanikolas, MD Assistant Professor of Anesthesiology
Katherine Keech, MD Instructor in Anesthesiology
Jacob Brian Keeperman, MD Assistant Professor of Anesthesiology (Pending Executive Faculty Approval)
Rainer Kentner, MD Assistant Professor of Anesthesiology
Paul William Kerby, MBBS Instructor in Anesthesiology
Evan David Kharasch, MD, PHD Russell and Mary Shelden Professor of Anesthesiology
Shahrdad Khodamoradi, MD Assistant Professor of Anesthesiology
Tessa Marie King, MD Assistant Professor of Anesthesiology
Joseph F Kras, DDENT, MD Associate Professor of Anesthesiology
Catherine P Krucylak, MD Assistant Professor of Anesthesiology
Anand Lakshminarasimhachar, MBBS Assistant Professor of Anesthesiology
Chakrapol Lattanand, MD Assistant Professor of Anesthesiology
Chris Cheng-Fu Lee, MD, PHD Assistant Professor of Anesthesiology
Barbara L. Leighton, MD Professor of Anesthesiology
Christopher J Lingle, PHD Professor of Anesthesiology
Qianjin Liu, MD, PHD Assistant Professor of Anesthesiology
Qin Liu Assistant Professor of Anesthesiology
Ellen M Lockhart, MD Associate Professor of Anesthesiology
Ellen M Lockhart, MD Vice Chairman of Anesthesiology
Thomas J Lockhart Instructor in Anesthesiology
Isaac P Lynch, MD Assistant Professor of Anesthesiology
Omar Malik, MD Instructor in Anesthesiology
Xianrong Mao, MS, PHD Research Instructor in Anesthesiology
John D McAllister, MD Professor of Anesthesiology
Molly Ann McCormick, MD Assistant Professor of Anesthesiology
Heather McKenzie, MD Instructor in Anesthesiology
Fernando Melkun, MD Instructor in Anesthesiology
Robert Paul Moore, MD Assistant Professor of Anesthesiology
Jeremiah J Morrissey, PHD Research Professor of Anesthesiology
David J Murray, MD Carol B. and Jerome T. Loeb Professor of Anesthesiology
Peter Nagele, MD Assistant Professor of Anesthesiology
Joan M Niehoff, MD  Assistant Professor of Anesthesiology
Carl Helge Nielsen, MD  Professor of Anesthesiology
Daniel C Nieva, MD  Assistant Professor of Anesthesiology
Sydney Marie Nykiel-Bailey, MD  Assistant Professor of Anesthesiology
Margaret Mary Oakley, MD  Assistant Professor of Clinical Anesthesiology
Maryann Otto, MD  Instructor in Anesthesiology
Ben Julian Palanca, MD  Assistant Professor of Anesthesiology
Patricia A. Penkoske, MD  Instructor in Anesthesiology
Mitchell R Platin, MD  Assistant Professor of Anesthesiology
Debra D Pulley, MD, MME  Associate Professor of Anesthesiology
Carlos Angel Puyo, MD  Assistant Professor of Anesthesiology
Lesley Kathryn Rao, MD  Instructor in Anesthesiology
Rahul Rastogi, MBBS  Associate Professor of Anesthesiology
Jebadurai Ratnaraj, MD  Assistant Professor of Anesthesiology
Necita L Roa, MD  Associate Professor of Anesthesiology
Frank Edward Robbins, MD  Assistant Professor of Anesthesiology
Charles M. Robertson, MD  Instructor in Anesthesiology
Adnan Sadiq, MD  Assistant Professor of Anesthesiology
Charles R Schrock, MD  Associate Professor of Anesthesiology
James Serot, MD  Instructor in Anesthesiology
Sonia Malhotra Shahrawat, MD  Instructor in Anesthesiology
Anshuman Sharma, MD  Associate Professor of Anesthesiology
Jessica Ann Smith  Instructor in Anesthesiology
John Charles Spitler, MD  Assistant Professor of Anesthesiology
Joseph H Steinbach, PHD  Russell and Mary Shelden Professor of Anesthesiology
Lyne M Sterni, MD  Assistant Professor of Anesthesiology (Pending Executive Faculty Approval)
Gina M Story, PHD  Assistant Professor of Anesthesiology
Robert A Swarm, MD  Professor of Anesthesiology
Rene Tempelhoff, MD  Professor of Anesthesiology
Raghu P Terkonda, MD  Assistant Professor of Anesthesiology
Joseph M Thornhill, MD  Assistant Professor of Anesthesiology
George S Tseng, MD  Assistant Professor of Anesthesiology
Andrea Vannucci, MD  Assistant Professor of Anesthesiology
Swarup Varaday, MBBS  Assistant Professor of Anesthesiology
Gershon Ram Volotzky, MD  Assistant Professor of Anesthesiology
Lawrence Sidney Waldbaum, MD  Associate Professor of Anesthesiology
William B. Waldrop, MD  Assistant Professor of Anesthesiology
Michael Harold Wall, MD  Professor of Anesthesiology
Brian T Wessman  Assistant Professor of Anesthesiology
Troy S Wildes, MD  Assistant Professor of Anesthesiology
Brett D Wolff  , MD  Associate Professor of Anesthesiology
Xiaoming Xia , MS, PHD  Research Assistant Professor of Anesthesiology
Hairong Ye  Instructor in Anesthesiology
Branden Edward Yee , MD  Instructor in Anesthesiology
Xiaobin Yi , MD  Assistant Professor of Anesthesiology
Alexander H Young , MD  Assistant Professor of Anesthesiology
Paul Battista Zanaboni , MD, PHD  Associate Professor of Anesthesiology
Choendal Marlaan Zasaretti , MD  Instructor in Anesthesiology
Meinhart H Zenk , PHD  Adjunct Professor of Anesthesiology
Yu Zhou , MS, PHD  Research Instructor in Anesthesiology

Department's Website
http://www.anest.wustl.edu/

Department of Biochemistry and Molecular Biophysics

The Department of Biochemistry and Molecular Biophysics encompasses research on understanding the energetics, structure and mechanisms of biological processes. Investigators use a variety of experimental methods such as X-ray crystallography, NMR, optical spectroscopy, thermodynamics and rapid kinetics in combination with computational approaches to unravel the molecular underpinnings of processes of relevance to health and disease (biochem.wustl.edu). Novel single-molecule methods are providing new insight into the molecular details of enzyme mechanisms and macromolecule dynamics. High throughput screening of chemical libraries and synthetic medicinal chemistry to develop small molecule probes of biological systems add strength to our growing efforts toward experimental therapeutics and translational research.

Faculty in the Department of Biochemistry and Molecular Biophysics teach basic science courses in the medical school curriculum, including The Molecular Foundations of Medicine and Principles of Pharmacology. Advanced courses in Molecular Medicine (Bio 5326), Nucleic Acids and Protein Synthesis (Bio 548), Chemistry and Physics of Biological Molecules (Bio 5357), and Macromolecular Interactions (Bio 5312) describe the principles of molecular interactions underlying the biology of health and disease. Students in the School of Medicine and the Graduate School of Arts & Sciences are eligible for these courses and may elect to pursue biomedical research under the direction of our faculty. A full listing of advanced courses topics can be found at biochem.wustl.edu/courses/index.html.

Our faculty members are engaged in a broad spectrum of biomedically relevant research areas, including nucleic acids structure and enzymology, mechanisms of protein folding, misfolding and aggregation, cellular mechanics and signaling across membranes, and hemostasis, thrombosis and vascular biology. The Department offers unique training opportunities at the crossroads of biochemistry, biophysics, systems biology, computational science and pharmacological sciences.

Courses

**First Year**

**M15 502 MOLECULAR FOUNDATIONS OF MEDICINE**
Instructor: Linda J. Pike, PhD, 362-9502
This course is designed primarily for medical students and will cover fundamental aspects of biochemistry and cell biology. The course begins with a treatment of protein structure and the principles of enzyme kinetics. This leads to a description of the basic pathways for the synthesis and metabolism of carbohydrates and lipids, with a focus on how the body maintains glucose homeostasis and provides energy under various metabolic stresses. This leads into a discussion of membrane structure and the function of cellular organelles in biological processes, culminating in the replication of DNA and the control of cell proliferation. Non-medical students should register under L41 (Bio) 5319.

Second Year

M70 670A PRINCIPLES OF PHARMACOLOGY
Instructor: Tom Ellenberger, DVM, PhD, 362-0287
This course provides a conceptual basis for understanding the molecular logic of drug action and physiological responses to drugs. These basic principles of pharmacology underlie the rational treatment of diseases covered in other courses, and they provide a foundation for the discovery of new therapeutics. Topics in this course include mechanisms of receptor-mediated drug action, pharmacokinetics, drug metabolism, toxicology, anesthetic agents, and pharmacology of the autonomic nervous system. Students who have not completed the first year of the medical school curriculum must have permission from the coursemaster to enroll.

Fourth Year

Electives
Descriptions of the elective courses are listed under the Division of Biology and Biomedical Sciences. In some instances, these courses are offered in alternate years. The faculty member in charge of the course should be contacted for specific times.

L41 (Bio) 5312 MACROMOLECULAR INTERACTIONS
L41 (Bio) 5318 DNA REPAIR
L41 (Bio) 5326 MOLECULAR MEDICINE
L41 (Bio) 5357 CHEMISTRY AND PHYSICS OF BIOMOLECULES
L41 (Bio) 5476 MODELING BIOMOLECULAR SYSTEMS I
L41 (Bio) 548 NUCLEIC ACID AND PROTEIN BIOSYNTHESIS

Note — The number preceding the course title indicates that the course carries credit in the Graduate School of Arts & Sciences.

Research

(M15 900)
Cross-listed with L41 (Bio) 590
Wayne M. Barnes, Ph.D., Second Floor, McDonnell Medical Sciences Building, 362-3351. We are developing a new way to sequence DNA, under the "$1000 Genome Project." This project involves the addition of experimental fluorescent probes to DNA polymerase, with the goal of watching a single molecule flicker as it copies DNA. Student involvement may be at the level of making mutations and purifying mutant enzymes, testing ways to prepare the templates, or testing observations of working molecules.

T7 RNA polymerase is used to expresss our proteins, and we have double and triple mutants of it that improve expression of problematic proteins, but we only have theory as to how they work better: we think they are slower, and that slower is better. Student involvement may be in constructing comparative strains that use the enzyme, and measuring the speed somehow, in vivo and in vitro.
Peter M.J. Burgers, Ph.D., First Floor, South Building, 362-3872. Molecular biology of yeast chromosomal DNA replication and DNA repair.

Elliot L. Elson, Ph.D., Second Floor, McDonnell Medical Sciences Building, 362-3346. Cellular mechanics and cytoskeletal structure and function. Fluctuation spectroscopy.


Eric A. Galburt, Ph.D., Second Floor, McDonnell Medical Sciences Building, 362-5201. Use of single-molecule biophysical techniques such as magnetic and optical trapping to study DNA transcription.

Roberto Galletto, Ph.D., Second Floor, McDonnell Medical Sciences Building, 362-4368. Mechanistic studies of DNA motor proteins and telomere binding proteins; single-molecule approaches.

Kathleen Hall, Ph.D., Second Floor, North Building, 362-4196. RNA structure/function. RNA protein interactions. NMR spectroscopy.


Linda Pike, Ph.D., First Floor, South Building, 362-9502. Mechanism of EGF and ErbB receptor function. We use a combination of radioligand binding and molecular imaging via luciferase fragment complementation to study the interactions of ErbB family receptors. The goal is to gain insight into structure/function relationships within these receptors to better understand how to target them therapeutically.

Faculty

John A Cooper, MD, PHD Interim Head of the Department of Biochemistry
Samuel I Achilefu, PHD Professor of Biochemistry and Molecular Biophysics
Gaya K Amarasinghe, PHD Assistant Professor of Biochemistry and Molecular Biophysics
Usha P Andley, MS, PHD Assistant Professor of Biochemistry and Molecular Biophysics
Wayne Morris Barnes, PHD Associate Professor of Biochemistry and Molecular Biophysics
Thomas J. Brett, PHD Assistant Professor of Biochemistry and Molecular Biophysics
Peter M Burgers, MS, PHD Marvin A. Brennecke Professor of Biological Chemistry
John A Cooper, MD, PHD Professor of Biochemistry and Molecular Biophysics
Sudha Mahajan Cowsik, MS, PHD Research Instructor in Biochemistry and Molecular Biophysics
Allan Doctor, MD Associate Professor of Biochemistry and Molecular Biophysics
Thomas E Ellenberger, DVM, PHD Professor of Biochemistry and Molecular Biophysics
Elliot L Elson, PHD Alumni Endowed Professor of Biochemistry and Molecular Biophysics
William A Frazier III, PHD Professor of Biochemistry and Molecular Biophysics
Daved H Fremont, PHD Associate Professor of Biochemistry and Molecular Biophysics
Carl Frieden, PHD Professor of Biochemistry and Molecular Biophysics
Eric A Galburt, PHD Assistant Professor of Biochemistry and Molecular Biophysics
Roberto Galletto, MS, PHD Assistant Professor of Biochemistry and Molecular Biophysics
Gregory I Goldberg, MA, PHD Professor of Biochemistry and Molecular Biophysics
David I Gottlieb, MA, PHD Associate Professor of Biochemistry and Molecular Biophysics
Kathleen Hall, PHD Professor of Biochemistry and Molecular Biophysics
James W Janetka, PHD Research Associate Professor of Biochemistry and Molecular Biophysics
Evan David Kharasch, MD, PHD Professor of Biochemistry and Molecular Biophysics
Stuart A Kornfeld, MD Professor of Biochemistry and Molecular Biophysics
Alexander Kozlov, MS, PHD Research Instructor in Biochemistry and Molecular Biophysics.
Andrzej Modest Krezel, MS, PHD Research Associate Professor of Biochemistry and Molecular Biophysics (Pending Executive Faculty Approval)
Daisy W Leung, PHD Research Assistant Professor of Biochemistry and Molecular Biophysics
Weikai Li, MS, PHD Assistant Professor of Biochemistry and Molecular Biophysics
Timothy M Lohman, PHD Brennecke Professor of Biophysics in Biochemistry and Molecular Biophysics
Robert H Mach, PHD Professor of Biochemistry and Molecular Biophysics
Philip W Majerus, MD Professor of Biochemistry and Molecular Biophysics
Garland R Marshall, PHD Professor of Biochemistry and Molecular Biophysics
Stephen M Moerlein, MA, PHARMD, PHD Associate Professor of Biochemistry and Molecular Biophysics
Linda J Pike, PHD Professor of Biochemistry and Molecular Biophysics
Katherine P Ponder, MD Professor of Biochemistry and Molecular Biophysics
Ana Maria Ruiz Manzano, PHD Research Assistant Professor of Biochemistry and Molecular Biophysics
J. Evan Sadler, MD, PHD Professor of Biochemistry and Molecular Biophysics
Niraj Harish Tolia, PHD Assistant Professor of Biochemistry and Molecular Biophysics
Douglas M Tollefsen, MD, PHD Assistant Professor of Biochemistry and Molecular Biophysics
Gabriel Waksman, MS, PHD Adjunct Professor of Biochemistry and Molecular Biophysics
Katherine Anne Henzler Wildman, PHD Assistant Professor of Biochemistry and Molecular Biophysics
Scott A Wildman, MS, PHD Research Assistant Professor of Biochemistry and Molecular Biophysics

Department’s Website
http://www.biochem.wustl.edu/

Department of Cell Biology and Physiology
Cell biology is one of the primary disciplines in medical research, influencing all areas of basic and clinical investigation. The future holds great opportunities in cell biology research due to inventories of the genes and proteins from which cells are built, new experimental techniques and various model organisms. Further discoveries about the cell biology of human genes will continue to translate into therapeutics. Also on the horizon is a better understanding of how proteins and sets of proteins (e.g., macromolecular complexes) are assembled and integrated to produce function.

The Department of Cell Biology and Physiology is ranked among the top 10 cell biology departments in the country, and the research carried out by its faculty covers a broad range of fields within cellular physiology and molecular cell biology. A unifying theme is the study of fundamental processes and their regulation. These cellular processes include include genome maintenance, apoptosis, cell cycle control, dynamic cell motility, angiogenesis, signal transduction and membrane trafficking, presynaptic processes, prion protein misfolding, and the structure and function of ion channels. The department’s research activities provide a foundation for studies in cancer biology, immunobiology, developmental biology, neurobiology and vascular biology. Its faculty use model organisms as well as human stem cells and a variety of techniques such as deep-etch electron and confocal microscopy to carry out their research. Cellular imaging is a particular strength of the department.

The Department of Cell Biology and Physiology oversees the Cell and Organ Systems course, which is designed to provide first-year medical students with a foundation for their further study of clinical and applied physiology. The Molecular Cell Biology course for first-year graduate students conveys an understanding of fundamental cell biology research strategies and principles. In addition, advanced courses open to medical and graduate students provide for more detailed study of specific areas of cell biology, physiology and cellular biophysics.

Courses

**First Year**

**M75 503 CELL AND ORGAN SYSTEMS BIOLOGY**
Instructor: Robert S. Wilkinson, Ph.D., 362-2300
This course integrates and extends the basic principles of cell biology and physiology to the functions of the major organ systems of the body; i.e., muscle, cardiovascular, renal, respiratory, gastrointestinal and endocrine. Limited space is available for nonmedical students with instructor’s permission. This course is cross-listed in the Department of Anatomy and Neurobiology.

Selectives

**M04 537 CARDIOVASCULAR CONTROL MECHANISMS**
Instructors: David Murray, M.D., 747-2136; Robert Moore M.D., 747-2136
The purpose of this selective is to demonstrate cardiovascular physiologic principles and control mechanisms using interactive patient simulators (computerized mannequins) to replicate common cardiovascular disease conditions and potential treatment modalities. The course includes four interactive simulation laboratory sessions. During these four laboratory sessions, simulations of clinical scenarios with case histories will be presented using the full-size electromechanical mannequins at the Howard and Joyce Wood Simulation Center. The mannequins are able to be used to demonstrate and manipulate hemodynamic information used in clinical practice including ECG, arterial, venous, ventricular and pulmonary capillary wedge pressures, cardiac output, stroke volume, heart rate, systemic and pulmonary vascular resistance. In small group sessions, students will explore simulated clinical conditions that demonstrate perturbations in chronotropism, preload, inotropism and afterload. The sessions will be used to provide clinical implications of various reflex responses such as the Frank-Starling and baroreceptor-mediated reflex responses. Scenarios will include hypovolemic shock,
congestive heart failure, myocardial infarction and various arrhythmias.

**M04 596 ION CHANNELS AND DISEASE**  
Instructor: Colin G. Nichols, PhD, 362-6630  
Ion channels are present in all cells and direct intracellular events by controlling the membrane electrical activity. Many widely used clinical drugs act by altering the behavior of ion channels, including epilepsy, diabetes, cardiac arrhythmias and cystic fibrosis. We will consider the basis of ion channel diseases and ion channel modulation therapies. Students will research a topic of choice in the library over two to three weeks and then present their findings to the whole class. After the initial course meeting, we will not meet formally for three weeks, and will then meet once per week for presentations.

**Fourth Year**

**Electives**

Descriptions of the following courses may be found under Division of Biology and Biomedical Sciences.

L41 (Bio) 5062 CENTRAL QUESTIONS IN CELL BIOLOGY  
L41 (Bio) 5068 FUNDAMENTALS OF MOLECULAR CELL BIOLOGY  
L41 (Bio) 5122 CELL-MATRIX INTERACTIONS  
L41 (Bio) 5132 CELL MOTILITY AND CYTOSKELETON JOURNAL CLUB

Note — The number preceding the course title indicates that the course carries credit in the Graduate School of Arts & Sciences. See course descriptions in the Graduate Programs section of this catalog.

**Research**

**M75 900**  
*Cross-listed with L41 (Bio) 590*

Kendall Blumer, Ph.D., 506 McDonnell Medical Sciences Building, 362-1668. Signaling mechanisms in cardiovascular and neurological disorders.

John Cooper, M.D., Ph.D., 416 McDonnell Medical Sciences Building, 362-3964. The roles of actin and microtubules in cell motility and the cell cycle.


John Heuser, M.D., 4900 South Building, 362-6948. Development of new methods for visualizing cells and molecules in three dimensions by means of electron microscopy, and for capturing macromolecular mechanisms through rapid freezing techniques.

James Huettner, Ph.D., 6600 Cancer Research Building, 362-6628. Excitatory amino acid receptors and synaptic transmission in the central nervous system; neural differentiation of embryonic stem cells.

Vitaly Klyachko, Ph.D., 9405 BJC Institute of Health, 362-5517. The mechanisms and regulation of neurotransmitter release at individual synapses; the functional roles of presynaptic processes in synaptic
plasticity and information processing.

Robert Mecham, Ph.D., 4606 Cancer Research Building, 362-2254. Understanding the complex process of extracellular matrix assembly and organization, including studying the intracellular pathways used to transport matrix components to the cell surface and identifying helper or accessory proteins that facilitate trafficking and matrix assembly. Cell-matrix interactions in development and cellular mechanisms associated with connective tissue remodeling in vascular disease and heritable diseases of connective tissues.


Colin Nichols, Ph.D., 9405 BJC Institute of Health, 362-6630. Ion channel biology. Multiple levels of analysis from the molecular basis of channel function to in vivo physiology and disease.


Paul Schlesinger, M.D., Ph.D., 401 McDonnell Medical Sciences Building, 362-2223. Molecular mechanism of BCl-2 family protein function, intracellular channels, biophysics of lipids, proteins and their interaction in cells and nanotechnology.

Philip Stahl, Ph.D., 4929 South Building, 362-6950. The discovery and function of human-specific genes that play a role in cell signaling and transport. Current focus is on TBC1D3, a multi-copied gene in humans that regulates signaling by growth factor receptors such as insulin and epidermal growth factor (EGF). Human-specific genes represent a new frontier in understanding human physiology and pathophysiology — i.e., why humans are human.

Sheila A. Stewart, Ph.D., 7610 BJC Institute of Health, 362-7437. Delineation of the molecular mechanisms by which aged stromal cells contribute to tumorigenesis and the molecular mechanisms that ensure high-fidelity telomere replication and genomic stability.

Heather L. True-Krob, Ph.D., 413 McDonnell Medical Sciences Building, 362-3934. Biological consequences of yeast prions — in both their capacity to function as a novel epigenetic element and in their utility to serve as a tractable model for the analysis of protein misfolding and aggregation that occurs in several neurodegenerative disorders.

Zhongsheng You, Ph.D., 514 McDonnell Medical Sciences Building, 362-9893. Studies of the cellular responses to DNA damage and their cancer relevance, focusing on the functional interplays between the DNA damage checkpoint, DNA repair and chromatin structure.

Faculty

Helen Piwnica-Worms, PHD Head of the Department of Cell Biology and Physiology
Dana Ray Abendschein, PHD Associate Professor of Cell Biology and Physiology
Yousef Abu-Amer, MS, PHD Professor of Cell Biology and Physiology
Nada A Abumrad, PHD Professor of Cell Biology and Physiology
Jeffrey Michael Arbeit, MD Professor of Cell Biology and Physiology
Jacques Ulrich Baenziger, MD, PHD Professor of Cell Biology and Physiology
Steven Bassnett, PHD Professor of Cell Biology and Physiology
David C Beebe, MS, PHD Professor of Cell Biology and Physiology
Carlos Bernal-Mizrachi, MD Assistant Professor of Cell Biology and Physiology
Kendall Jay Blumer, PHD Professor of Cell Biology and Physiology
Ron Bose, MD, PHD Assistant Professor of Cell Biology and Physiology
Thomas J. Brett, PHD Assistant Professor of Cell Biology and Physiology
George John Broze Jr, MD Professor of Cell Biology and Physiology
Harold Burton, PHD Professor of Cell Biology and Physiology
Anil Govind Cashikar, MS, PHD Research Instructor in Cell Biology/Physiology
Feng Chen, PHD Assistant Professor of Cell Biology and Physiology
Roberto Civitelli, MD Professor of Cell Biology and Physiology
F. Sessions Cole, MD Professor of Cell Biology and Physiology
John A Cooper, MD, PHD Professor of Cell Biology and Physiology
Clarissa S. Craft, PHD Research Assistant Professor of Cell Biology/Physiol (Pending Executive Faculty Approval)
Susan K. Dutcher, PHD Professor of Cell Biology and Physiology
Sarah K England, PHD Professor of Cell Biology and Physiology
Roberta Faccio, PHD Associate Professor of Cell Biology and Physiology
Thomas W Ferkol, MD Professor of Cell Biology and Physiology
Simon Fisher, MD, MS, PHD Associate Professor of Cell Biology and Physiology
William A Frazier III, PHD Professor of Cell Biology and Physiology
Jeffrey M. Gidday, PHD Associate Professor of Cell Biology and Physiology
Dennis E Hallahan, MD Professor of Cell Biology and Physiology
Marc Randall Hammerman, MD Professor of Cell Biology and Physiology
Phyllis I Hanson, MD, PHD Professor of Cell Biology and Physiology
John E Heuser, MD Professor of Cell Biology and Physiology
Didier Hodzic, PHD Assistant Professor of Cell Biology and Physiology
Michael J Holtzman, MD Professor of Cell Biology and Physiology
Keith A Hruska, MD Professor of Cell Biology and Physiology
Paul W. Hruz, MD, PHD Associate Professor of Cell Biology and Physiology
James E Huettner, PHD Associate Professor of Cell Biology and Physiology
Samuel Klein, MD, MS Professor of Cell Biology and Physiology
Vitaly A Klyachko, MS, PHD Assistant Professor of Cell Biology and Physiology
Sandor J Kovacs, MD, MS, PHD Professor of Cell Biology and Physiology
Gregory D Longmore, MD, MS Professor of Cell Biology and Physiology
Robert H Mach, PHD Professor of Cell Biology and Physiology
Elaine Michelle Majerus, MD, PHD Assistant Professor of Cell Biology and Physiology
Douglas L. Mann, MD Professor of Cell Biology and Physiology
Bess Adkins Marshall, MD Assistant Professor of Cell Biology and Physiology
Audrey McAlinden, PHD Assistant Professor of Cell Biology and Physiology
Robert Paul Mecham, PHD Alumni Endowed Professor of Cell Biology and Physiology
Robert W Mercer, PHD Professor of Cell Biology and Physiology
Loren S. Michel, MBA, MD Assistant Professor of Cell Biology and Physiology
Jeffrey H Miner, PHD Professor of Cell Biology and Physiology
Stanley Misler, MD, MS, PHD Associate Professor of Cell Biology and Physiology
Kelle Harbert Moley, MD Associate Professor of Cell Biology and Physiology
Mike Max Mueckler, PHD Professor of Cell Biology and Physiology
Colin G Nichols, PHD Carl F Cori Professor
Colin G Nichols, PHD Professor of Cell Biology and Physiology
Daniel Scott Ory, MD Professor of Cell Biology and Physiology
Richard A Pierce, PHD Research Associate Professor of Cell Biology and Physiology
David R Piwnica-Worms, MD, PHD Professor of Cell Biology and Physiology
Helen Piwnica-Worms, PHD Gerty T Cori Professor
Helen Piwnica-Worms, PHD Professor of Cell Biology and Physiology
Maria Sara Remedi, MS, PHD Research Assistant Professor of Cell Biology and Physiology
Monica Sala-Rabanal, PHD Research Instructor in Cell Biology and Physiology
Linda J Sandell, MS, PHD Professor of Cell Biology and Physiology
Paul Henry Schlesinger, MD, PHD Associate Professor of Cell Biology and Physiology
Julie K Schwarz, MD, PHD Assistant Professor of Cell Biology and Physiology
Clay F Semenkovich, MD Professor of Cell Biology and Physiology
Robert M Senior, MD, MLA Professor of Cell Biology and Physiology
Philip Damien Stahl, PHD Professor of Cell Biology and Physiology
Thomas H Steinberg, MD Associate Professor of Cell Biology and Physiology
Sheila Stewart-Wigglesworth, PHD Associate Professor of Cell Biology and Physiology
Steven M Strasberg, MD Associate Professor of Cell Biology and Physiology
Xiong Su, PHD Assistant Professor of Cell Biology and Physiology
Robert W Thompson, MD Professor of Cell Biology and Physiology
Robert R Townsend, MD, MS, PHD Professor of Cell Biology and Physiology
Heather L. True, MS, PHD Associate Professor of Cell Biology and Physiology
Jason Dean Weber, PHD Associate Professor of Cell Biology and Physiology

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Edward Mallinckrodt Department of Developmental Biology

The principal research activities of the Department of Developmental Biology are focused on attaining a mechanistic understanding of animal development, encompassing the earliest cell fate specification and movement processes that shape the early embryo, organogenesis, stem cell biology, tissue homeostasis and repair, and aging. Students and postdoctoral fellows work closely with faculty and staff on research projects and participate in weekly journal clubs and seminars at which recent literature and ongoing research are discussed.

Courses

First Year

Selective

M04 500C DEVELOPMENTAL BIOLOGY AND DISEASE

Instructor: Kerry Kornfeld, MD, PhD, 747-1480
This course presents discoveries arising from research in the broad field of developmental biology and focuses on how these discoveries are contributing to understanding, diagnosis and the treatment of human disease.

Research

Fourth Year

(M70 900)
Cross-listed with L41 (Bio) 590

Irving Boime, Ph.D., Third Floor, McDonnell Medical Sciences Building, 362-2556. Secretion, targeting and structure-function of the human placental and pituitary glycoprotein hormones.

Douglas F. Covey, Ph.D., Third Floor, McDonnell Medical Sciences Building, 362-1726. Medicinal
chemistry of steroids.

Aaron DiAntonio, M.D., Ph.D., 333 McDonnell Medical Sciences Building, 362-9925. Neurodevelopment, neurodegeneration, and axon regeneration in Drosophila and mouse.

Gregory A. Grant, Ph.D., Fourth Floor, Biotechnology Center, 362-3367. Mechanism of allosteric regulation in enzymes.

Shin-Ichiro Imai, M.D., Ph.D., Room 362A, McDonnell Medical Sciences Building, 362-7228. Molecular mechanisms of aging and longevity in mammals, particularly focusing on the tissue-specific functions of the mammalian NAD-dependent deacetylase Sirt1 and the physiological significance of systemic NAD biosynthesis mediated by Nampt (nicotinamide phosphoribosyltransferase) in an intimate connection between metabolism and aging.

Raphael Kopan, Ph.D., Room 361, McDonnell Medical Sciences Building, 747-5520. We study Notch signaling and two organ systems (skin, kidney) in the context of development, maintenance and disease. Skin-specific projects include elucidation of the molecular components of a barrier defect sensor in skin, the impact of chronic barrier defects on the respiratory system, and the regulation of tumor formation by the cytokine TSLP. Kidney projects include reconstruction of the embryonic stem cell niche in vitro, the role of Notch signaling in nephron differentiation and lineage analysis. The efforts in Notch signaling involve screening adult stem cell niches that require Notch1 or Notch2 signaling. We are also developing innovative technology for whole genome analysis of sites bound by transcription factor complexes, which we plan to apply to dissect targets of major signaling pathways (Notch, Wnt, FGF).


Kristen Kroll, Ph.D., Room 320, McDonnell Medical Sciences Building, 362-7045. Transcriptional networks that regulate the formation of neurons in early embryos and embryonic stem cells. Role of chromatin regulatory complexes in controlling pluripotency and differentiation.

Craig Micchelli, Ph.D., Room 328, McDonnell Medical Sciences Building, 362-7036. Our lab studies the regulation of stem cell biology in development, homeostasis and disease.

Kelly Monk, Ph.D., Room 3601, Cancer Research Building, 362-3825. Mechanisms of myelin formation, demyelination and remyelination in zebrafish and mouse.

Jeanne M. Nerbonne, Ph.D., Third Floor, McDonnell Medical Sciences Building, 362-2564. Structure, function and regulation of voltage-dependent ion channels in the cardiovascular and nervous systems. Regulation of membrane excitability in health and disease.

David M. Ornitz, M.D., Ph.D., Third Floor, South Building, 362-3908. Fibroblast Growth Factor signaling pathway regulation of development and regeneration. Intracellular FGF regulation of neuronal excitability.

John H. Russell, Ph.D., Third Floor, McDonnell Medical Sciences Building, 362-2558. Mechanisms of lymphocyte-mediated inflammation and pathogenesis in the central nervous system.
Lila Solnica-Krezel, Ph.D., 3911A, South Building, 362-8768. Genetic Regulation of Vertebrate Embryogenesis. Genetic mechanisms that regulate cell fates and movements during early vertebrate development using forward and reverse genetics in the zebrafish model and human embryonic stem cells.

Andrew Yoo, Ph.D., Room 3602, Cancer Research Building, 362-1811. Direct Cell Fate Reprogramming of Human Fibroblasts to Neurons. Our lab studies neurogenic activities of microRNAs, and develop strategies to convert human dermal fibroblasts into specific subtypes of neurons and tissue culture models of neurological diseases.

Faculty

Liliana Solnica-Krezel, MS, PHD Head of the Department of Developmental Biology
Rajendra Apte, MD, PHD Associate Professor of Developmental Biology
Thomas J Baranski, MD, PHD Associate Professor of Developmental Biology
Irving Boime, MS, PHD Professor of Developmental Biology
Walter A Boyle III, MD Assistant Professor of Developmental Biology
Shiming Chen, MS, PHD Professor of Developmental Biology
Zhoufeng Chen, MS, PHD Professor of Developmental Biology
Richard A Chole, MD, PHD Professor of Developmental Biology
Douglas Floyd Covey, MA, PHD Professor of Pharmacology in Developmental Biology
Peter A. Crawford, MD, PHD Assistant Professor of Developmental Biology
Charles M Crowder, MD, PHD Professor of Developmental Biology
Nicholas O Davidson, MBBS Professor of Developmental Biology
Aaron Diantonio, M PHIL, MD, PHD Professor of Developmental Biology
Alex S Evers, MD Professor of Developmental Biology
George W Gokel, PHD Adjunct Professor of Molecular Biology and Pharmacology
Jeffrey I Gordon, MD Professor of Developmental Biology
Gregory Alan Grant, PHD Professor of Developmental Biology
Richard Warren Gross, AB, MD, PHD Professor of Developmental Biology
Robert O Heuckeroth, MD, PHD Professor of Developmental Biology
David Michael Holtzman, MD Professor of Developmental Biology
Richard S Hotchkiss, MD Professor of Developmental Biology
Maxenia Garcia Ilagan, PHD Instructor in Developmental Biology
Shin-Ichiro Imai, MD, PHD Associate Professor of Developmental Biology
Daojun Jiang, MS, PHD Research Instructor in Developmental Biology
Eugene Malcolm Johnson Jr, PHD Professor of Developmental Biology
Albert H Kim, MA, MD, PHD Assistant Professor of Developmental Biology
Raphael Kopan, MS, PHD Alan A and Edith L Wolff Professor
Raphael Kopan, MS, PHD Professor of Developmental Biology
Stephen K Kornfeld, MD, PHD Professor of Developmental Biology
Paul Thomas Kotzbauer, MD, PHD Assistant Professor of Developmental Biology
Kristen Louise Kroll, PHD Associate Professor of Developmental Biology
Zhenyi Liu, MS, PHD Research Instructor in Developmental Biology
Fanxin Long, MA, PHD Associate Professor of Developmental Biology
Liang Ma, PHD Associate Professor of Developmental Biology
Craig Anthony Micchelli, PHD Assistant Professor of Developmental Biology
Jason C Mills, AB, MD, PHD Associate Professor of Developmental Biology
Kelly Renee Monk, PHD Assistant Professor of Developmental Biology
Aubrey R Morrison, MBBS Professor of Developmental Biology
Philip Needelman, MS, PHD Adjunct Professor of Molecular Biology and Pharmacology
Jeanne M Nerbonne, PHD Alumni Endowed Professor of Molecular Biology and Pharmacology in Developmental Biology
David M Ornitz, MD, PHD Alumni Endowed Professor of Developmental Biology
David R Piwnica-Worms, MD, PHD Professor of Developmental Biology
Deborah C Rubin, MD Professor of Developmental Biology
David Rudnick, MD, PHD Associate Professor of Developmental Biology
John Hall Russell, PHD Professor of Developmental Biology
Scott Saunders, MD, PHD Associate Professor of Developmental Biology
Atsushi Sawada, PHD Research Instructor in Developmental Biology
Jean E. Schaffer, MD Professor of Developmental Biology
Alan L Schwartz, MD, PHD Professor of Developmental Biology
Diane S Sepich, PHD Research Assistant Professor of Developmental Biology
Jimann Shin Research Instructor in Developmental Biology
Lilianna Solnica-Krezel, MS, PHD Professor of Developmental Biology
Thaddeus S. Stappenbeck, MD, PHD Assistant Professor of Developmental Biology
Dwight A Towler, MD, PHD Professor of Developmental Biology
David B Wilson, MD, PHD Associate Professor of Developmental Biology
Yongjun Yin, PHD Research Instructor in Developmental Biology
Andrew Seungjo Yoo, MS, PHD Assistant Professor of Developmental Biology

Department's Website
http://devbio.wustl.edu/

James S. McDonnell Department of Genetics

The Department of Genetics is at the forefront of the rapidly developing field known as genomic (or personalized) medicine, in which genetic and epigenetic analysis coupled with clinical information enables treatments to be tailored specifically to the individual patient. The rapid evolution of sequencing technologies, automated cellular imaging and mass spectrometry methods to rapidly perform proteomic and metabolomics studies, coupled with powerful computational tools, is revolutionizing the biological sciences. Investigators in the department are developing new methods of genomic analysis including technology and software, epigenomics and copy number variation as well as studies of disease pathways using model organisms, to identify and study genes responsible for human disease and treatment
responses. The department supports a broad program of preclinical and graduate instruction in genetics, with research opportunities ranging from studies of transcriptional networks, population genetics, protein evolution, neurological disorders, developmental genetics, models of human disease, genome architecture, statistical genetics and computational biology, genome technologies, and infertility.

A significant portion of the first-year course in basic medical sciences is devoted to human and clinical genetics, with emphasis on how genomic information will transform the practice of medicine. This includes specialized selective courses in addition to the core genetic curriculum. Advanced training in clinical genetics and in genetic research is available from the faculty in the Department of Genetics and from geneticists with principal appointments in many other departments within the School of Medicine.

Advanced courses and seminars are offered that focus on the genetics of complex disease, gene expression, genetic mapping, molecular genetics, genetic epidemiology, biostatistics, computational biology, developmental genetics, microbial genetics, immunogenetics, cancer genetics and population and evolutionary genetics. Extraordinary opportunities for research training and experience are available in all of these areas and at all levels. The programs are tailored to meet the needs of medical students, graduate students and both MD and PhD postdoctoral fellows pursuing advanced training in biomedical research.

Courses

First Year

**M30 511 MEDICAL GENETICS**

Medical Genetics seeks to provide a framework for understanding genetics so that continuing advances in the field can be understood and evaluated. This course will help prepare aspiring physicians for the era of Genomic (or Personalized) Medicine in which genomic analysis will directly impact patient care. Using quizzes and small group discussion, basic concepts from lectures by experts in the field are applied to clinical cases to demonstrate inheritance patterns, diagnosis, counseling and ethical concepts. Lectures cover basic inheritance and molecular biology, sequencing technologies, epigenomics, pharmacogenetics and validation in model organisms.

Fourth Year

Electives

L41 (Bio) 5285 FUNDAMENTALS OF MAMMALIAN GENETICS
L41 (Bio) 5488 GENOMICS
L41 (Bio) 5491 ADVANCED GENETICS
L41 (Bio) 5495 COMPUTATIONAL MOLECULAR BIOLOGY
L41 (Bio) 4342 RESEARCH EXPLORATION IN GENOMICS
L41 (Bio) 5483 HUMAN LINKAGE AND ASSOCIATION ANALYSIS

Special Topics Courses/Journal Clubs

For complete descriptions, see Division of Biology and Biomedical Sciences.
L41 (Bio) 5235 GENETICS JOURNAL CLUB
L41 (Bio) 5484 GENOMICS AND DEVELOPMENT OF C. ELEGANS JOURNAL CLUB
L41 (Bio) 5489 HUMAN GENETICS JOURNAL CLUB
L41 (Bio) 5496 SEMINAR IN COMPUTATIONAL MOLECULAR BIOLOGY

Note — The number preceding the course title indicates that the course carries credit in the Graduate School of Arts & Sciences.
Research

(M20 900)
Cross-listed with L41 (Bio 590)


Anne Bowcock, Ph.D., 331 Biotechnology Center, 747-3261. Molecular genetics of human disease.


Don Conrad, Ph.D., 829A McDonnell Medical Sciences Building, 362-4379. Our group has a long-standing interest in developing new methods for characterizing the origin and functional impact of human genetic variation. Recently completed projects have covered the following topics: mapping of copy number variants, measurement of sex-specific mutation rate and variation in mutation rate among decomposing the relative impact of different types of mutation (SNPs, indels, CNVs, etc.) on gene expression variation and disease susceptibility. Currently, we have a number of active projects that address fundamental unsolved problems related to human reproduction. First (1), we are trying to unravel the genetic basis for a common form of male infertility, non-obstructive azoospermia, using oligonucleotide arrays and exome sequencing. The short-term goal of this project is to define causal mutations in the >400 cases in which we have access. Our ultimate goal is to provide an unbiased view of the genetic architecture of the disease and establish a definitive reference panel of causal mutations that clinicians can use to facilitate diagnosis of spermatogenic failure. Second (2), we are using sperm DNA from a longitudinal cohort of semen donors to study the processes of mutation and selection within the population of germ cells of individuals. There are a number of other potential projects ranging from topics of medical relevance such as the biology of the placenta and maternal-fetal compatibility to more basic questions regarding genome biology and evolution. Training in this elective will be primarily computational and can cover skills such as population genetic analysis, rare-variant association study methodology and other aspects of statistical genetics. However, parties interested in using other approaches to address the topics discussed here are welcome.

Joseph Dougherty, Ph.D., 864A McDonnell Medical Sciences Building, 286-0752. Our laboratory utilizes a variety of techniques spanning from human molecular genetics and informatics to mouse behavioral neuroscience and neuroanatomy. We develop and employ mouse models of psychiatric disorder, particularly those that mimic genetic variations we've identified from human patient populations, with the goal of trying to understand the cellular and molecular underpinnings of these disorders.

Susan K. Dutcher, Ph.D., 875 McDonnell Medical Sciences Building, 362-2765. Studies on the role of centrioles and basal bodies in ciliary signaling, assembly and motility using molecular genetics, computational and biochemical approaches.

Justin Fay, Ph.D., Room 5526, 4444 Forest Park Building, 747-1808. Population and evolutionary genetics, evolution of gene regulation in yeast, human evolution.

James Havranek, Ph.D., 822 McDonnell Medical Sciences Building, 362-2535. Computational and experimental studies of specificity in protein-DNA interactions. We are using computational and experimental approaches to understand the specificity of protein-DNA binding, using the winged helix-turn-helix family of bacterial transcription factors as a model system. We aim to construct structure-based models of transcription factors that enable both the prediction of binding preferences
and the design of mutants with altered specificities.

Stephen L. Johnson, Ph.D., 711 McDonnell Medical Sciences Building, 362-0362. Growth control and morphogenesis in vertebrate development. Focus on genes and mechanisms affecting proportionate fin growth, fin regeneration and pigment stripe patterning in zebrafish.


Elaine Mardis, Ph.D., Room 4122, 4444 Forest Park Building, 286-1805. Technology development for second-generation DNA sequencing with an emphasis on methods and applications development. Non-human primate genomics.

Jeffrey Milbrandt, M.D., Ph.D., 130 Biotechnology Center, 362-4651. Studies of metabolic control of glial/axonal interactions necessary for proper nerve function. The use of high-throughput genetic and pharmacologic screens using primary neurons and induced pluripotent stem cells to identify molecular mechanisms of axonal degeneration in neuropathy and neurodegenerative disease.

Rob Mitra, Ph.D., Room 4184, 4444 Forest Park Building, 362-2751. Systems Biology and Technology Development. We are developing tools to make quantitative biological measurements and applying these tools to build mathematical models of biological processes.

Gary J. Patti, Ph.D., 214 Biotechnology Center, 362-8358. Metabolomics. Our laboratory is focused on extending our understanding of comprehensive cellular metabolism and defining its association with physiology. By using state-of-the-art mass spectrometry, we are interested in globally quantifying metabolite alterations in biological systems under perturbation (e.g., during disease). Our program applies this approach, called metabolomics, to understand mechanisms associated with neuropathic pain and explore novel therapeutics. Additionally, we are applying metabolomics to study the contribution of skeletal muscle degeneration to whole-organism aging.

Michael A. Province, Ph.D., Suite 6318, 4444 Forest Park Building, 362-3616. Development and evaluation of novel statistical genetics methodology, especially as applied to genomic identification and validation of variants for human complex quantitative traits, such as heart disease, cancer, pulmonary function, diabetes and human longevity.

Nancy L. Saccone, Ph.D., 308 Biotechnology Center, 747-3263. Statistical genetics and psychiatric genetics. Development and application of analysis methods for studying the genetics of human disease and complex traits.

Tim Schedl, Ph.D., 870 McDonnell Medical Sciences Building, 362-6162. Germ cell development in the model organism Caenorhabditis elegans. The major focuses are control of the decision to proliferate or enter the meiotic pathway, control and coordination of meiotic prophase progression and gametogenesis, and control of meiotic maturation and ovulation.

James Skeath, Ph.D., 812A McDonnell Medical Sciences Building, 362-0535. Identification of the genes and the elucidation of the molecular mechanisms that regulate the early events of Drosophila central neurogenesis; illumination of the mechanisms that form, pattern and specify the individual identities of the progenitor cells of the Drosophila embryonic CNS.

Ting Wang, Ph.D., Room 6203, 4444 Forest Park Building, 286-0865. We work in the general field of computational genomics and epigenomics. We study the evolution of human regulatory networks, with a focus on mobile elements (or transposable elements) and their impact on gene regulation, their genetic and epigenetic control, and their roles in human biology and diseases.

George Weinstock, Ph.D., Room 4121, 4444 Forest Park Building, 286-1879. Genome and metagenome analysis. Genome sequencing of individual genomes and metagenomes of microbial communities using next-generation sequencing platforms; bioinformatic and statistical analysis of data.

Richard K. Wilson, Ph.D., Room 4122, 4444 Forest Park Building, 286-1804. Genome research. Large-scale DNA sequence analysis of genomes and expressed genes (cDNAs) from humans, nonhuman primates, mammals, invertebrates, plants and various bacterial species. Targeted genomic analysis of genes and regulatory elements in human cancers and other hereditary diseases. Development of novel technology for large-scale DNA sequence analysis and genetic analysis.

Faculty

Jeffrey D Milbrandt, MD, PHD Head of the Department of Genetics
Haley J Abel, MA, PHD Research Instructor in Genetics
Ping An, MD Research Assistant Professor of Genetics
Douglas E Berg, PHD Professor of Genetics
John Rutledge Bermingham Jr, Adjunct Associate Professor of Genetics
Ingrid B Borecki, MS, PHD Associate Professor of Genetics
Anne M Bowcock, PHD Professor of Genetics
Victoria L. Brown-Kennerly, PHD Research Assistant Professor of Genetics
James M Cheverud, MS, PHD Professor of Genetics
Paul F Cliften, MS, PHD Research Associate Professor of Genetics
C. Robert Cloninger, MD Professor of Genetics
Barak Alon Cohen, PHD Associate Professor of Genetics
Janet M Connolly, MS, PHD Research Professor of Genetics
Donald Franklin Conrad, M RESEAR, PHD Assistant Professor of Genetics (Pending Executive Faculty Approval)
Joseph C. Corbo, AB, MD, PHD Assistant Professor of Genetics
James P Crane, MD Associate Professor of Genetics
Peter A. Crawford, MD, PHD Assistant Professor of Genetics
Seth Daniel Crosby, MD Research Assistant Professor of Genetics
Joseph D Dougherty, PHD Assistant Professor of Genetics (Pending Executive Faculty Approval)
Todd Druley, MD, PHD Assistant Professor of Genetics
Susan K. Dutcher, PHD Professor of Genetics
Justin C. Fay, PHD Associate Professor of Genetics
Mary F Feitosa, MA, PHD Research Associate Professor of Genetics
Narasimhan Gautam, MS, PHD Professor of Genetics
Alison Goate, PHD Professor of Genetics
Matthew I Goldsmith, MD, MS Assistant Professor of Genetics
Chi Gu, MS, PHD Associate Professor of Genetics
David H Gutmann, MD, MS, PHD Professor of Genetics
Ted H Hansen, MS, PHD Professor of Genetics
James J Havranek, PHD Assistant Professor of Genetics
Richard D Head, MS Research Associate Professor of Genetics
Andrew C Heath, PHD Professor of Genetics
Patrick Y Jay, MD, PHD Associate Professor of Genetics
Stephen L Johnson, PHD Professor of Genetics
Aldi T Kraja, PHD Research Associate Professor of Genetics
Shashikant Kulkarni, MS, PHD Associate Professor of Genetics
Timothy J Ley, MD Professor of Genetics
Michael Lovett, PHD Professor of Genetics
Jeffrey D Milbrandt, MD, PHD James S McDonnell Professor of Genetics
Robi D. Mitra, PHD Associate Professor of Genetics
Peter Nagele, MD Assistant Professor of Genetics
Gary J Patti Jr, PHD Assistant Professor of Genetics (Pending Executive Faculty Approval)
Michael A Province, MA, PHD Professor of Genetics
Dabeeru C Rao, MS, PHD Professor of Biostatistics in Genetics
John P Rice, MA, PHD Professor of Genetics
Nancy L. Saccone, MS, PHD Associate Professor of Genetics
Lawrence B Salkoff, PHD Professor of Genetics
Mark Steven Sands, PHD Professor of Genetics
Yo Sasaki, MS, PHD Research Assistant Professor of Genetics
Tim B Schedl, PHD Professor of Genetics
Alan Shiels, PHD Professor of Genetics
James B Skeath, PHD Professor of Genetics
Gary D Stormo, MA, PHD Joseph Erlanger Professor
Gary D Stormo, MA, PHD Professor of Genetics
Brian K Suarez, MA, PHD Professor of Genetics
Michael H. Tomasson, MD Associate Professor of Genetics
Matthew John Walter, MD Assistant Professor of Genetics
Ting Wang, MS, PHD Assistant Professor of Genetics
Michael Aaron White, MS, PHD Research Instructor in Genetics
Michael Peter Whyte, MD Professor of Genetics
Mary Kaye Wojczynski, PHD Research Instructor in Genetics
Hiroko Yano, MS, PHD Assistant Professor of Genetics
Quanyuan Zhang, MS, PHD Research Assistant Professor of Genetics

Department's Website

http://www.genetics.wustl.edu/

John Milliken Department of Medicine

The Department of Medicine’s general medicine teaching services at Barnes-Jewish Hospital and the Veterans Administration Medical Center (St. Louis) are under the following directors:

Barnes-Jewish Hospital, Victoria J. Fraser, MD
(Head, Department of Medicine)

Veterans Administration Medical Center, Scot G. Hickman, MD, Chief

In addition, for the purposes of both teaching and research, the Department of Medicine is divided into specialty divisions and sections at Barnes-Jewish Hospital under the following chiefs:

Allergy and Immunology
H. James Wedner, MD, Chief

Bioorganic Chemistry and Molecular Pharmacology
Richard W. Gross, MD, PhD, Chief

Bone and Mineral Diseases
Robert Civitelli, MD, Chief

Cardiology/Cardiovascular Diseases
Douglas L. Mann, MD, Chief

Dermatology
Lynn A. Cornelius, MD, Chief

Endocrinology/Metabolism/Lipid Research
Clay F. Semenkovich, MD, Chief

Gastroenterology
Nicholas O. Davidson, MD, Chief

General Medical Sciences
Bradley A. Evanoff, MD, MPH, Chief

Geriatrics and Nutritional Science
Samuel Klein, MD, Chief

Health Behavior Research
Mario Schootman, PhD, Chief

Hematology
J. Evan Sadler, MD, PhD, Chief

Hospital Medicine
Mark S. Thoelke, MD, Chief
Instruction in Medicine is provided during all four years of the medical curriculum, beginning with The Practice of Medicine I in the first year. Teaching in the second year has two main objectives: the correlation of the basic sciences with clinical aspects of disease and training in the technical methods of physical examination and laboratory diagnosis. By the beginning of the third year, the student is ready for supervised clinical study of individual patients.

A clinical clerkship of 12 weeks, divided into three four-week periods, is served by third-year students on the medical services of the department. In the final year, students may elect a subinternship in general medicine and a series of elective courses in the medical specialties.

Courses

First Year

M25 507 THE PRACTICE OF MEDICINE I
Instructor: Gregory M. Polites, MD, 747-5268

This course employs a variety of teaching techniques, instructors and venues. Some, like lectures, will be familiar. Others, such as one-on-one interviews in the hospital, will be new. Some course material is easily formatted into solid blocks, such as the teaching of statistical methods. Other content streams throughout the course, like interviewing techniques and history interpretation. As with patients, each of you comes with a unique past and active history, previously formed interests and individual goals. Your prior contacts and personal experiences in science or medicine also influence you. We have designed the course to accommodate a variety of learning interests and styles. We hope to provide an opportunity for you to hone the skills that you already possess and acquire new skills necessary and important to the practice of medicine.

What are the educational goals of POM I?

Students will learn to:
1. Perform a complete history and physical examination with thoroughness, accuracy, sensitivity and compassion.
2. Communicate effectively, efficiently and compassionately with patients, families and other health professionals.
3. Describe and analyze the statistical methodology of clinical studies and apply the results to individuals and groups of patients.
4. Identify and investigate ethical, cultural, socioeconomic and political factors relevant to medical interactions.
5. Examine and analyze personal and professional competencies, limitations and behaviors.

How do we accomplish these goals?
1. Experiential learning is the educational paradigm. Learning skills and techniques requires a cycle of steps: preparation, background reading, attempts at skill performance, analysis and reflection on performance, discussion of potential improvements, and successive performance of the skill with advancement to a new level of expertise.
2. The focus is on learning skills. You practice each skill, such as interviewing, in a variety of venues and situations of varying complexity. This course is for learning about how to do things that you will use for taking care of patients and families.
3. You work in multiple learning environments. Lectures are at a minimum.
   a. Academic environments: Small group sessions for discussion, small group practice sessions, peer learning, small group presentations, individual and group writing assignments, and reflections on experiences are the preferred learning locations.
   b. Clinical environments: Inpatient units with physician and WUMS IV mentors, standardized patient experiences with videotape review, physicians’ offices, patient and family homes with and without home care professionals, city clinics, intensive care units, emergency department and clinical suite practice area.

Selectives

**M04 5009 MEDICAL SPANISH**
Instructor: Marcos Rothstein, MD, 286-0801
This course is designed to provide educational opportunities for people speaking at all levels of Spanish fluency. The classes will consist of basic grammar and the movie/book club/charlas (chats)/roundtables with physicians interspersed throughout the course. Students will learn medically relevant vocabulary, cultural sensitivity and fluency with the goal to improve treatment of the growing U.S. Latino population.

**M04 5061 MEDICINE OF LAUGHTER**
Instructor: Dana R. Abendschein, PhD, 362-8909
The course involves reading selected literature describing the physiologic and psychological benefits of laughter; at least two group meetings for discussion of the papers and a paragraph that each student will write addressing a question of interest; a video of the life of Hunter "Patch" Adams, MD; and a site visit to the Children's Hospital Clown Docs program, where clowning is used as a vehicle for humor therapy. Those interested in a 'super selective' experience (with no additional credit) could sign up for clown training, in which the skills of makeup application, costuming, juggling, magic tricks and slapstick would be taught. The latter would be limited to four to six students (per semester) because of the time needed to develop a clown character. The student clowns may round with the Clown Docs and may also possibly be helpful at the WUMS free clinics to entertain those in the waiting area. Students will be able to:
1. Understand the benefits of laughter on physiologic and psychologic systems based on reading and discussion of published research;
2. Understand the benefits of laughter and humor therapy on physician/patient interactions, compliance with therapy and patient wellness;
3. Experience first-hand the effects of humor on patients, family and hospital staff by observing the SLCH Clown Docs during a regular rounding session.

**M04 520H ART AND MEDICINE**
Instructor: Peter G. Tuteur, MD, 454-7116
This course is designed for students to develop observational skills through viewing works of art.
Structured visual analysis will be a primary tool used to improve ability to recognize and scrutinize visual cues. Initially, the images viewed will be selected to contain specific components conducive to developing these skills. Students will view multiple works of art and share observations in group discussion. How individuals attach meaning to visual images will be discussed. Through a series of themed sessions, students will view works of art relating to health and health status, social and economic status, depiction of healers/health workers and portrayal of the human body. Sessions will be held at the Saint Louis Art Museum; students will use both the main galleries and special study rooms to view works. A private collection may be viewed as well. Each session will begin with a discussion of the relevance of the previous class to recent experiences. Students will be able to:
1. Develop observational skills potentially crucial to medical practice,
2. Increase their ability to discuss visual observations,
3. Analyze and contextualize medically related images.

**M04 528H TERMINAL ILLNESS AND DEATH**
Instructor: Ellen F. Binder, MD, 454-7116
In this seminar we will examine such topics as: 1) psychological, social and professional responses to terminal illness and death; 2) communicating bad news to patients; 3) grief and bereavement; 4) palliative care and physician-assisted suicide. Teaching sessions will include viewing of videotapes and interviews with practitioners and/or patients and will rely heavily on student participation. Students will be able to:
1. Make an active commitment to strengthening and preserving their humanity
2. Experience the effects of listening and being listened to generously and compassionately
3. Experience healing relationships with other students
4. Experience tools of self-remembering
5. Identify effective and ineffective behavioral responses to loss and grief
6. Identify when they first became aware of wanting to serve others
7. Articulate and strengthen a personal commitment to medicine as their life’s work
8. Experience practicing physicians sharing their experiences of loss, grief, mystery and awe in practicing medicine
9. Witness the unity of commitment to service that lies beneath the diversity of expertise and experience

**M04 5302 FRONTIERS IN LEUKEMIA**
Instructor: Timothy Graubert 747-4437
Hematopoietic research is rapidly and in some cases dramatically changing the clinical management of patients with leukemia. Most notably, the development of imatinib, a drug specifically designed to inhibit the bcr-abl oncogene, has fundamentally altered the way we treat patients with chronic myelogenous leukemia (CML). The objective of this course is to introduce students to scientific investigation in hematopoiesis with an emphasis on leukemogenesis. We will focus on how research is advancing our understanding of the pathogenesis and treatment of this group of diseases. Specific topics will include CML and the development of imatinib and newer inhibitors, acute myelogenous leukemia, and the preleukemic syndromes severe congenital neutropenia and myelodysplasia. The faculty is all physician-scientists actively engaged in these areas of research. Students will be able to demonstrate the impact of molecular biology on the understanding of the pathogenesis of leukemia and its clinical management.

**M04 538H DOCTORS ON FILM**
Instructor: Thomas M. De Fer, MD, 747-4366
This course will explore the relevant social themes of films in which physicians and/or the medical profession are the main focus. There are countless portrayals of physicians in the cinema. There are also many films that deal extensively with various features of health care delivery. For good or for bad, viewers of these films outside our profession are strongly influenced by these portrayals. Common stereotypes are perpetuated — “If it’s in the movies, there must be some truth to it.” Depictions of physicians and major medical themes have evolved with time and under the influence of social and scientific developments. The course will investigate these depictions and themes using a selection of films (from the classic era to more modern films) to provoke thought and discussion. Some discussion of film craft is also included. Emphasis is given to older movies, 1940s to 1970s. Those not interested in film
craft or classic films should consider these latter points very carefully. The essence of this selective is the collective group experience of watching the movies and the discussion that follows. Most of the films are not readily available for rental or purchase, and lending of the VHS tapes or DVDs is not practical. For these reasons, attendance at five of the six sessions is required (all students must attend the introductory session). Each session will run from 3:15 p.m. to 4:55 p.m. (1 hour and 40 minutes). Students will be able to:

1. Discuss the common themes in doctor movies
2. Discuss the evolution of these themes over time in the context of social and scientific developments
3. Discuss the various portrayals of physicians frequently seen in doctor movies
4. Discuss the effects of these themes and portrayals on patient expectations
5. Appreciate how an understanding of these portrayals and themes can be used to improve medical care

M04 582H PHILOSOPHY OF MEDICINE
Instructor: Stephen S. Lefrak, MD, 454-7116

Medicine is a complex enterprise that has a major impact on our society. As such it draws increasing attention from those within the health care professions as well as those outside medicine whose expertise may lie in law, social science, philosophy, policy, etc. Physicians, in addition to their clinical and research responsibilities, must become increasingly adept at interdisciplinary activities. It is never too early in a career to begin to examine "medical" concepts that are frequently employed without being clarified, thus hindering communication rather than solving problems. It is this clarification process that philosophy addresses. The very issues that philosophy has dwelled on throughout the centuries are the very ones that are critical for medicine; think of "death" or "personhood," for example. Also, whether medical concepts are "real" or "constructed" is important for both the disciplines of medicine and philosophy. And dare we even mention such issues as the relationship between mind and body, notions of causality, how and what we mean when we "know something" and "free will." This selective is looking for students who would be interested in beginning such a study with the goals of developing their own understanding as well as introducing it into the medical school curriculum in a formal way. The classical subdivisions of philosophy such as ontology (science of being, existence), epistemology (science of knowing), ethics (moral philosophy) and social philosophy may all serve to clarify important issues in medicine. For example, physicians focus on disease in many ways, yet are diseases descriptive realities or normative (value) concepts? The impact of which answer is accepted is felt throughout society — as what will be reimbursed as health care, what is enacted into policy and law (Americans with Disability Act), and to what the range of medicine is and where are its boundaries. The epistemology of medicine may also be somewhat unique. What physicians take as evidence and what we mean by causality may be very different than what is meant in other scientific disciplines. The terms used by physicians such as evidence, causality, explanation, hypothesis, theory, etc. should be critically analyzed by physicians. The impact of our understanding of this has great effect on our patients both in clinical care and what research is pursued and accepted. Of course, ethics plays an important role in medicine, but this course is focused on a philosophical analysis of the medical concepts and the constructs of medicine with emphasis on ontology and epistemology. Students will be able to:

1. Expound the "arguments" whether "philosophy of medicine" exists or is needed.
2. Thoughtfully discuss what "medicine" is and some of the legitimate "goals of medicine."
3. Discuss some of the major domains of philosophy.
4. Become familiar with some of the major philosophical problems and methods.
5. Describe what metaphysics are.
6. Discuss the "concept of disease."
7. Discuss what kind of activities clinical medicine and reasoning are.
8. Become familiar with the analysis of "scientific method" and how that model compares, fits with clinical medicine.
9. Discuss the method of medicine and compare it to other fields.
10. Think critically about what is required of a mechanistic explanation.
11. Think carefully about the nature of causal relevance.
12. Discuss the virtues and limits of reductive explanations and methods in neuroscience and physiology.
13. Understand the principles of evidence-based medicine.
14. Understand some individuals believe evidence-based medicine is not scientifically sound.
15. Understand the care of individual patients is complex, and rigid adherence to one model may not be sufficient.

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16. Discuss the relationship between the metaphysics of medicine, the epistemology of clinical medicine and clinical ethics.
17. Attempt to adopt a unified outlook toward the commonly employed concepts of clinical medicine and their relationship to the patient, physicians and their interaction.
18. Proceed throughout their medical education and careers more aware of the impact of the views that are taken of “disease,” clinical judgment and ethical decision making.

**M04 524H MAJOR RELIGIOUS TRADITIONS**
Instructor: Solomon Kendagor, PhD, BCC, 454-7116
This course will introduce the students to the tenets of mainline religions found in the United States and how their beliefs and practices can best be considered in understanding the whole patient/family for treatment, planning and decision-making. Primary attention will be given to Christian, Jewish and Muslim traditions as well as others with particular considerations for health care. Special attention will be paid to end-of-life issues, decision-making and interpersonal dynamics. The students also will be introduced to a clinical model of understanding faith and spirituality within the context of health care. Students will be able to:
1. Be more comfortable considering patient/family religious/faith dynamics.
2. Understand the role of patient/family faith commitments in their healing, well-being and development.
3. Increase basic knowledge of tenets of mainline religions found in the United States and how their beliefs/practices can best be considered in understanding the whole patient/family for treatment planning and decision-making.

**M04 588H MUSIC AND MEDICINE**
Instructor: Steven Cheng, MD, 454-7719
Music and medicine reflect one another in several fascinating ways. During this selective, we will examine how music depicts illness and disease, as well as how medicine addresses the specific benefits and occupational hazards of music. Ten students will participate in this highly interactive six-session course that will include lively discussions, listening sessions and demonstrations. Students will discuss how music evokes certain characteristics of disease, suffering and illness; discuss how illnesses in musicians/composers and rock stars influences their work; understand the role of music in the healing process; and recognize medical problems that arise in performing artists.

**M04 598H A.R.T. ADVANCED INTERDISCIPLINARY BIOETHICS**
Instructor: Stephen S. LeFrak, MD, 454-7116
The selective will focus on the complex ethical issues in human reproductive health including parenthood, reproductive rights, in vitro fertilization and embryo selection, “surrogacy,” insurance/national health care coverage, state regulation of reproductive rights, termination issues, etc. It is planned that it will be a predominantly case-based course. Justification for moral claims, and proposed action or policy, will be critically analyzed and discussed. This course has been developed to allow students to pursue a focused interest in one area of bioethics. This more-focused seminar should broaden the outlook of the attendees and sharpen their bioethical analytic skills. Students will be chosen from the law school, medical school and school of social work to help create an interdisciplinary environment. There are no other course prerequisites for enrollment. However, it is presumed that enrollees will have had or are concurrently involved in course work in introductory bioethics (either as undergraduates or currently at their respective graduate schools). There will be required attendance, readings and class participation. Class size will be limited to 15 students to maintain a discussion-based format. As a result, the number of students from each school will be quite limited.

Objectives of the class:
1. Encourage interdisciplinary (interschool) interactions and cooperation at an early stage of professional development
2. Enhance students’ ability to critically analyze and discuss complex bioethical issues
3. Develop students’ moral imagination as future professionals, both overall and in a specific area
4. Enhance students’ abilities to negotiate with others when confronted with profound moral issues
5. Familiarize students with the ethics literature in the area of reproductive medicine.
M04 5875 ADVANCED OLIN GRAND ROUNDS
Instructor: Cynthia Wichelman, MD, 362-4374
Grand Rounds at medical schools are forums for presenting new and challenging clinical problems and cases. The goal of Olin Grand Rounds is to focus on the challenges and solutions facing the business of medicine. The course will therefore provide an introduction to the current issues facing the health care sector that integrates management tools and clinical knowledge. This course was first offered in 2006 and has become a popular course for undergraduates and students in an MBA program. More medical students should take this class! The information is invaluable for any person pursuing a career in medicine or in the health care sector of business. This class focuses on the business of medicine with business case study discussion complemented with several clinical patient presentations. Topics covered include concierge medicine, department compensation distribution, analysis of walk-in clinics (i.e., Walgreens), health care system comparison, organ transplantation, marketing of pharmaceuticals including research and development of AIDS drugs, hospital management, care to the underserved, sickle cell anemia, management of Medicaid, the business of cosmetic surgery, stem cell controversy update and private practice cardiothoracic surgery, to name a few. The objective is to provide students new insights into how modern management tools can be combined with scientific and clinical knowledge to manage health care organizations more efficiently and practice medicine more effectively.

M04 5013 INTRODUCTION TO EMERGENCY MEDICINE I
Instructor: Cynthia Wichelman, MD, 362-4374
Over six sessions, we will review the physiology and clinical management of common emergencies: cardiovascular emergencies; trauma resuscitation and shock; environmental emergencies, such as high-altitude cerebral edema and snake bites; pediatric emergencies; gynecological and urological emergencies; and toxicological emergencies. Each session will include a lecture followed by case studies that highlight critical aspects of a patient's history, physical examination, laboratory and radiological studies, as well as procedural intervention and pharmacological treatment. Group participation is encouraged. This selective is intended to give students an exposure to emergency medicine. Students will become familiar with the methods used to evaluate and treat patients with medical emergencies in preparation for their clinical training.

M04 5016 INTRODUCTION TO EMERGENCY MEDICINE II
Instructor: Cynthia Wichelman, MD, 362-4374
This class is a second session on emergency medicine (in response to student requests!) exploring topics not covered in the fall session. Although it would be beneficial to take the Introduction to Emergency Medicine I course offered in the fall, it is not a prerequisite for this class. Six sessions will review the physiology and clinical management of abdominal emergencies, ophthalmic emergencies, endocrine emergencies, environmental emergencies such as lightning and hypothermia, stroke, renal emergencies and obstetric emergencies. Each session will include a lecture followed by case studies that highlight critical aspects of a patient's history, physical examination, laboratory and radiological studies, as well as procedural intervention and pharmacological treatment. Group participation is encouraged. This selective is intended to give students further exposure to emergency medicine. Students will become familiar with the methods used to evaluate and treat patients with medical and surgical emergencies in preparation for their clinical training.

M04 587L INTERNATIONAL HEALTH
Instructor: Cynthia Wichelman, MD, 362-4374
This course is an excellent opportunity to prepare for a summer abroad through FIHTM or for a fourth year away rotation. Speakers include WUSM faculty who have incorporated international healthcare in their practices — from surgery (e.g., ophthalmology, neurosurgery, ENT, ob/gyn), and anesthesiology, to emergency medicine and pediatrics. The course will help you explore different avenues for adding an international component to your career and to learn which specialties may more readily lend themselves to this. Other topics include how to protect your health while abroad and the ethics of research in a global setting. Several students (WUSM II and WUSM IV) will also share their experiences administering health care and doing research abroad. This course was first introduced in 2004 and is one of the
This selective will provide a forum for discussing and learning about relevant issues in international health. The course is based on a suggested curriculum from the International Health Medical Education Consortium and supplemented with the expertise of Washington University faculty with experience in international health care. The course will be organized into approximately 10 topics relevant to global health.

Each meeting will begin with a presentation by Washington University faculty followed by class participation and discussion. Students will come away with a broader appreciation of core issues in international health. Students will be able to:

1. Meet other faculty who divide their time between research and clinical medicine at WUSM and working in other countries — learn about their work abroad and how they manage to balance their careers.
2. Learn about international aid organizations, such as Doctors Without Borders and ORBIS, and hear from doctors who have worked for these organizations.
3. Discuss cross-cultural roles and ethics in international research.
4. Meet faculty who have established clinics abroad.
5. Understand the different types of medical facilities abroad.
6. Know how to protect your health while abroad.

**M04 537 CARDIOVASCULAR CONTROL MECHANISMS**
Instructor: David Murray, MD, 362-7394
The purpose of this selective is to demonstrate cardiovascular physiologic principles and control mechanisms using interactive patient simulators (computerized mannequins) to replicate common cardiovascular disease conditions and potential treatment modalities. Several clinical scenarios with case histories will be presented to small groups for interpretation and subsequent treatment, thereby providing the opportunity to explore endogenous baroreceptor-mediated reflex responses as well as prototypical pharmacologic interventions undertaken by clinicians. Scenarios may include hypovolemic shock, congestive heart failure, myocardial infarction, valvular diseases and some "unknowns." Variables monitored in the patient simulator include ECG, arterial, venous, ventricular and capillary wedge pressures, cardiac output, stroke volume, heart rate, systemic and pulmonary vascular resistance and ventilation. These labs will provide opportunities to consider baroreceptor and other regulatory principles operative in cardiovascular physiology/pharmacology in a simulated patient-care setting, how these systems are affected by a particular disorders/disease, and how the patient responds to various interventions and treatment options that students can implement. A class-wide discussion and systematic review will follow the individual small group workshops to allow synthesis of all the material.

**M04 586H HEALTH AND HUMAN RIGHTS**
Instructor: Kim Carmichael, MD, 454-7116
There is a strong belief among many physicians that our responsibilities extend beyond our individual patients to our communities, countries and even to our entire world. A humanities selective is an excellent forum for interested students to actively learn and discuss the impact of human rights violations on health. Topics discussed include torture, effects of land mines, prison health care, war crimes including sexual violence and public health effects of political conflicts (e.g. Afghanistan). Each meeting will consist of a brief presentation and a discussion on the topic. There will be a different presenter for each topic. Readings will be provided. Students will be able to:

1. Explore human rights issues that are relevant to the health professions from both local and worldwide perspectives.
2. Describe the boundaries and challenges involved in solving human rights issues.
3. Describe strategies for the implementation of programs that address human rights issues.
4. Provide students with examples of successful initiatives and interventions pertaining to health and human rights.

**M04 587A PHYSICIAN AS HEALTH PROTECTOR AND PATIENT ADVOCATE**
Instructor: Steven I. Plax, MD, 994-0109
Investigation into clinical topics again will be offered (please see report on Obesity and Hypertension by
last year’s students and Dr. Paine). For further information, students may call Dr. Plax at (314) 994-0109. Kathy Corey in the Office of Medical Student Education has copies of our medical handbooks and their supplements. This course is a component of the Health Protection and Education Service, which meets on the third Saturday of each month except December and July. Sessions are held in the University City Library, 6701 Delmar from 9 a.m. to ~11:30 a.m. Follow-up is with the assigned patient by telephone. Students share the goals of the HPES.

1. To do multiple screening testing ranging from height, weight, body mass index, blood pressure, urinalysis and stool exam, eye and vision evaluation, hearing tests by audiologist, skin and dental exam, blood sugar, hemoglobin, PSA and cholesterol measurement, pulmonary function tests and EKGs.
2. Educate people in protecting their health — a trained historian records each individual's medical history — at conclusion of person's tests and recording of history, a one-on-one conference is held with a member of MD staff. Medical students participate in screenings and in history-taking and final conferences in telephone follow-up.

This is an opportunity for Washington University medical students to correlate the basic information gathered from first-year courses with their experience with our patients — and in-the-trenches participation in preventive medicine. Students actively participate in the screening and in history-taking (with trained historian) and in individual conferences between patients and physicians. Students may take part in statistical analysis of data and join in the production of another supplement as in preceding years.

**M04 580H THE HEALER’S ART**

Instructor: Joan Rosenbaum, MD, 454-2684

The Healer’s Art combines seed talks and experiential exercises in a large group setting along with small group experiential exercises. The course engages students in a discovery model of community of inquiry focusing on the meaning of physicianhood and the practice of medicine. Faculty participate in the discovery model process on an equal footing with students as well as facilitating the process of the small groups. The course is designed to encourage medical students to trust the power of listening and presence to heal; formulate a personal, comfortable and compassionate response to loss; experience the healing power of grief; recognize that who they are is as important to the healing relationship as what they know; recognize awe and mystery in the daily practice of medicine; explore the concept of calling; write a personal mission statement; and explore the personal meaning of physicianhood. The Healer’s Art facilitates students in clarifying, strengthening and making a personal commitment to medicine as their life’s work. Students also have the opportunity to explore their personal values and commit to developing and preserving their personal values, such as service, harmlessness, compassion, altruism, self-care, equality, justice, respect and nurturing wholeness.

Students will be able to:
1. Make an active commitment to strengthening and preserving their humanity
2. Experience the effects of listening and being listened to generously and compassionately
3. Experience healing relationships with other students
4. Experience tools of self-remembering
5. Identify effective and ineffective behavioral responses to loss and grief
6. Identify when they first became aware of wanting to serve others
7. Articulate and strengthen a personal commitment to medicine as their life’s work
8. Experience practicing physicians sharing their experiences of loss, grief, mystery, and awe in practicing medicine
9. Witness the unity of commitment to service that lies beneath the diversity of expertise and experience

**Second Year**

Teaching by the Department of Medicine is designed to: 1) prepare students for the transition from the preclinical sciences to the study of the sick patient at the bedside, 2) help them analyze the clinical manifestations of disease in terms of the responsible mechanisms and 3) introduce them to the techniques of examination that are used regularly on all clinical services. This instruction is undertaken jointly with members of other clinical departments and is coordinated with subject matter presented by
the Department of Pathology and Immunology.

The major areas of clinical medicine are presented in detail to illustrate the application of biochemical, physiological and anatomical information to the understanding of pathological states. Cardiovascular, renal, neurological, gastrointestinal, pulmonary, hematological, metabolic, nutritional and developmental diseases are discussed. Emphasis is placed on the use of fundamental information in approaching clinical problems as a way of thinking that prepares the student for a lifetime of medicine, during which new information will constantly be acquired.

M25 607 THE PRACTICE OF MEDICINE II
Instructor: Megan E. Wren, MD, 286-3480
Section Leaders: Alan Glass, MD, Jay F. Piccirillo, MD, Rebecca S. Dresser, JD, Stephen S. Lefrak, MD, Lauren Arnold, PhD, MPH
The goal of The Practice of Medicine (POM) course is to provide students with the knowledge, skills and attitudes essential to patient care regardless of specialty. POM II is a continuation of POM I and will continue to address various interfaces between patients, physicians and society and will also introduce approaches to clinical thinking and decision-making. The sections of POM II include Advanced Physical Examination, Hospital Sessions, Case Development, Communication Skills, Ophthalmology, Radiology, Community and Public Health, Ethics and Health Policy, Perspectives on Illness, and Clinical Epidemiology and Evidence-Based Medicine. The learning objectives for each section of POM II emphasize topics and skills used in all fields of medicine, and the majority of the course work will be taught in small groups or through clinical experiences. 83 clock hours.

M25 605A INFECTIOUS DISEASES AND MEDICAL MICROBIOLOGY
Instructor: Nigar Kirmani, MD, 454-8217
The infectious disease pathophysiology course emphasizes both organism-specific and organ-specific approaches to diseases caused by microbes. The course expands on material presented briefly in the first year concerning bacteria, viruses, fungi and parasites and their involvement in human disease. Mechanisms of disease production, clinical manifestations and therapy are discussed, along with public health implications. In addition to lectures, small group case discussions enable students to apply the information they learn to clinical situations.

M25 606A RHEUMATOLOGY
Instructor: Richard D. Brasington, Jr., MD, 454-7255
The rheumatology pathophysiology course begins with an overview of the structure, function and physiology of the normal joint and the approach to the patient with arthritis and related disorders. Diagnoses covered include rheumatoid arthritis, systemic lupus erythematosis, vasculitis syndromes, osteoarthritis, low back pain, infectious arthritis, crystalline arthritis and fibromyalgia. Clinical features and treatment will be emphasized. In small group sessions, students interview and examine patients to gain a fuller understanding of the typical history and physical findings of these disorders. Students are strongly encouraged to attend the small group sessions with patients, who make a major contribution to teaching students about these conditions.

M25 611B CARDIOVASCULAR DISEASE
Instructor: Dana R. Abendschein, PhD, 362-8909
The purpose of this course is to consider the mechanisms and manifestations of acquired and congenital cardiovascular disorders as well as their pharmacologic treatment. Lectures and small group discussions that emphasize the major areas of cardiac pathophysiology and pharmacology are provided.

M25 612B PULMONARY DISEASE
Instructor: Michael B. Lippmann, MD, 289-6306, Adrian Shifren, MD, 362-5378
The objectives of the pulmonary pathophysiology course include review of normal pulmonary physiology as related to specific pulmonary disease states. The focus of the course will largely be upon presentations in lectures concerning pathophysiologic principles of abnormal lung structure and function. In addition, case study problems will be discussed.
M25 613B RENAL AND GENITOURINARY DISEASES
Instructors: Stanley Misler, PhD, MD, 454-7719, Steven Cheng, MD, 362-7211
This course uses basic principles of renal physiology and ion homeostasis to understand commonly encountered fluid and electrolyte disorders (especially hyper-/hypo-natremias, acidoses/alkaloses) and the action of diuretic drugs. The pathophysiology of diabetic kidney disease, glomerular and tubulointerstitial diseases, hereditary kidney diseases, and the relationship between hypertension and the kidney are discussed. It also applies basic principles of urinary system anatomy and physiology to the understanding of kidney stones, disorders of the bladder and prostate, and of micturition. The course also introduces basic principles of dialysis and kidney transplant. Lectures, small group problem-solving and team-based learning sessions focus special attention on: 1) how a working knowledge of fundamentals, diagnostic testing and arithmetic manipulation can have important predictive value; and 2) how the courses of acute and chronic renal failure are both adaptive and maladaptive for the organism.

M25 614 DERMATOLOGY
Instructor: David M. Sheinbein, MD, 996-8005
The dermatology second-year course is designed to teach medical students how to describe skin lesions and the pathophysiologic basis and clinical characteristics of major dermatologic diseases. Major categories of clinical skin diseases and their most prominent constituents will be discussed, including papulosquamous diseases, blistering diseases, infectious diseases, and benign and malignant neoplasms.

M25 615A ENDOCRINOLOGY AND METABOLISM
Instructor: William E. Clutter, MD, 362-8094
This course aims to develop understanding of the pathophysiology, clinical manifestations and diagnosis of common endocrine disorders. History, physical examination and interpretation of diagnostic laboratory tests are emphasized. Principles of treatment of endocrine disorders and pharmacology of relevant drugs also are discussed. Students are expected to apply their knowledge in clinical case discussions.

M25 620A GASTROINTESTINAL AND LIVER DISEASES/NUTRITION
Instructor: Deborah C. Rubin, MD, 362-8935
This course discusses the pathophysiologic mechanisms related to the diseases of the gastrointestinal tract including esophagus, stomach, small and large intestines, liver, gallbladder and pancreas. The emphasis is on changes that occur in normal physiology, biochemistry, anatomy, immunology and cell biology that result in human gastroenterologic diseases. Included also are lectures on the pharmacology of gastrointestinal drugs and basics of human nutrition in clinical practice. Lectures are supplemented by group seminars that focus on clinical case presentations.

M25 625A HEMATOLOGY AND ONCOLOGY
Instructor: Scot G. Hickman, MD, 289-6308
The hematology and oncology pathophysiology course exposes students to common hematologic disorders and hematologic malignancies. The course uses lectures, clinical case discussions and practical sessions involving microscopy.

Third Year

M25 710 MEDICINE CLERKSHIP
Instructor: Thomas M. De Fer, MD, 362-8050
Family Medicine Site Director: Walton Sumner, MD, 454-8164
VA Site Director: Scot G. Hickman, MD, 289-6308
The medicine clerkship provides supervised study of patients in both inpatient and ambulatory settings. The 12-week clerkship is divided into three four-week rotations: two inpatient and one outpatient. For the inpatient rotations, students are assigned as clinical clerks to patients admitted to the cardiology and general medical teaching services of Barnes-Jewish Hospital and the St. Louis VA Medical Center — John Cochran Division. For the outpatient rotations, students are placed with community-based internal medicine or family practice physicians. Teaching is provided by the chief of service, attending physicians, house staff, consultants, chief residents, community-based preceptors and regularly scheduled conferences. Formal instruction is given regarding core internal medicine topics during the clerkship. Teaching activities include Chief Resident Rounds, Core Lecture Series, Physical Diagnosis Rounds, Radiology Rounds, Professor’s Rounds and other departmentally based conferences.

Clinical Pathological Conference
The clinical course, laboratory and radiologic studies, and pathological findings of a patient are discussed using a problem-solving format at a weekly conference by members of the Departments of Medicine, Pathology and Immunology, and Radiology; Melvin Blanchard, MD, internal medicine; chief residents and medical staff; Louis P. Dehner, MD; and pathology staff.

M25 707 PRACTICE OF MEDICINE III
Coursemasters: Gregory M. Polites, MD, 747-5268
Clerkship Coordinators: Melody Damico, 362-3480

Objectives:
1. To review challenges and dilemmas in clinical medicine
2. To examine clinical experiences from a variety of perspectives

In this course, themes and topics relevant to the medical professional are discussed. The course consists of quarterly sessions focused on common clinical challenges and experiences. Each session begins with a short talk or panel discussion. As students exchange problematic scenarios and questions, the group develops potential solutions and management schemes. Topics and plans are detailed in the week or two prior to each session.

Recent Topics Include:
1. The Impaired Physician - B. Bondurant
2. Heath Care Reform - W. Peck
3. Human Factors in Healthcare - L. Wolf
4. Domestic Violence (small groups w/SPs) - A. Glowinski

Topics and plans are detailed in the week or two prior to each session.

Date: A Tuesday (TBA) in September, December, March and May during lunch hour
Time: Lunch begins at noon
       Session runs to 1 p.m.

Attendance at all sessions is required.

Location: Connor Auditorium, Farrell Learning and Teaching Center

M25 714 AMBULATORY: EMERGENCY MEDICINE
Instructors: Mark Levine, MD, 362-6743
The WUMS III Ambulatory Care Rotation takes place in the main emergency department of Barnes-Jewish Hospital. Three to six students at a time are assigned to this four-week rotation. Students will spend their first day in an orientation session that will include a brief survival in the ED introduction, a suture lab, an airway lab, and an ultrasound lab. Domestic violence is covered during this four-week rotation. A course "text" will be provided for the students on orientation day and is theirs to keep. On day two, after conference, students will begin primarily evaluating non-emergent patients in the emergency
department (EM 2) and Urgent Care Area and report directly to an attending or senior resident. There are four hours of mandatory conferences per week: 8-10 a.m. on Tuesdays and 8-10 a.m. on Wednesdays. Students can expect to gain a wide range of skills in evaluating a variety of complicated and non-complicated patients. At the end of their rotation, students should be familiar with the approach to complex medical conditions like heart attacks, undifferentiated abdominal pain and complications of pregnancy as well as the "bread and butter" of complaints of ambulatory medicine such as lacerations, simple respiratory tract infections and minor trauma.

WUMS III will be graded on their ability to make a formal patient presentation during a shift, their clinical skills and their conference attendance. There will be a written test on the last Friday of the rotation based entirely on the material provided to the students at the start of the rotation.

**M26 713 AMBULATORY: FAMILY MEDICINE**
Instructor: Heather Fell Sateia, MD, 747-0279
The Family Medicine clerkship offered in the third and fourth years allows medical students to work one-on-one with board-certified family physicians in outlying areas of Missouri and Illinois and in other states. Students may review preceptor profiles and comments that previous students made about preceptors. The clerkship makes every effort to accommodate student preferences for working with specific preceptors. Most students will work with a single preceptor for the duration of the four-week rotation. Students may work with small groups, potentially including family medicine residents. The student will work closely with preceptors on a daily basis in the physician’s office. Students often accompany their preceptor on nursing home visits, hospital rounds, medical conferences and other educational activities. Housing will be provided to students working outside the immediate St. Louis vicinity. Weekend call schedules are arranged with the preceptor: students can often return to St. Louis on the weekends. Each student will receive a description of the goals and objectives for the four-week rotation. Students receive short e-mail assignments during this rotation. Grades are calculated primarily from preceptors’ subjective evaluations.

**M25 740 DERMATOLOGY CLERKSHIP**
Instructor: Lynn Cornelius, MD, 454-8622
The goal of the dermatology clerkship is to provide a guide for the student to appreciate dermatology within the broader perspectives of medicine and biology. The student will develop familiarity with dermatologic vocabulary, learn to recognize and initiate therapy of common dermatologic disorders and become cognizant of uncommon or complicated dermatologic problems that require specialty care. Emphasis will be placed on careful history taking and physical examination. Students will always work under the direction of the resident physician and the attending physicians in the clinic setting.

The student will participate in outpatient care at the following hospitals and affiliated clinics: Barnes-Jewish Hospital, St. Louis Children’s Hospital, Barnes-Jewish West County Hospital, the Veterans Administration Medical Center and Connectcare Hospitals. These hospital settings will provide the student with ample exposure to a diverse patient population. Students will attend all clinical teaching rounds and conferences in addition to the basic science and cutaneous histopathology conferences. Normal workday hours are 8 a.m. to 5 p.m. with no night or weekend on-call responsibilities. Each student is provided with copies of the two recommended textbooks, Principles of Dermatology by B. Looking and The Color Atlas and Synopsis of Clinical Dermatology by T.B. Fitzpatrick for use during the clerkship; the textbooks are returned to the clerkship coordinator at the end of the clerkship for use by other students rotating in the dermatology division.

The rotation attending physician and the resident physician will submit an evaluation based on the student’s clinical skills, presentation, attitudes, overall performance and the end-of-rotation written exam score. Students are not eligible to take the fourth-year rotation if they complete this clerkship.

**M25 750 GERIATRICS CLERKSHIP**
Instructor: David B. Carr, MD, 286-2706
The primary goal of the four-week clerkship in Geriatrics is to provide an opportunity for students to gain proficiency in the principles of geriatric evaluation, including the medical, psychological, social and
functional assessments of older adults. Direct, hands-on experience with patients is a major feature of
the clerkship. Students are expected to participate in the evaluation of three to five patients per week, in
a variety of settings including the hospital consult service, geriatric palliative care, geriatric
rehabilitation, long-term care and the outpatient geriatric assessment center. Students will also
participate in the Alzheimer’s Disease Research Center, hospice and geropsychiatry rounds and attend
geriatric conferences while on the rotation.

Students are assigned to a variety of attendings to enhance the experience. There is no night call or call
on weekends. Participation on the hospital consult service will occur depending on volume. The day
normally begins at 8 a.m. and is usually finished by 5 p.m. There will be time to read the detailed
syllabus/bibliography. Students will be asked to present a brief topic of their choice at the end of the
rotation and demonstrate knowledge of the geriatric screens and assessments.

M25 730 PHYSICAL MEDICINE AND REHABILITATION
Coursemaster: Neringa Juknis, MD, 454-7757
Clerkship in PM&R for third-year medical students provides an opportunity to gain basic knowledge and
clinical skills in evaluation and management of a wide range of neurological and musculoskeletal diseases
and conditions that require specialized rehabilitative medical and therapeutic care. Students spend two
weeks on the Spinal Cord Injury Unit (SCI) and two weeks on the Brain Injury (BI) and Stroke Unit at The
Rehabilitation Institute of St. Louis. Students are expected to be a part of the rehabilitation team, follow
three to five patients, participate in daily morning rounds, participate in performing consults and attend
team meetings and family conferences.

Students are required to attend several outpatient clinics such as SCI, BI, Amputee and Stroke. During
the entire rotation, students work with PM&R residents and fellows, and under direct guidance of the
NeuroRehabilitation faculty. The usual duty hours are 7:30 a.m. to 5 p.m. weekdays and 8 a.m. to noon
on Saturdays. There is no night call.

Students are required to attend all PM&R curriculum lectures and conferences. On the first day of
rotation, students meet with the PM&R program director to go over goals, objectives and schedules. Upon
completion of the rotation, students are required to fill out the evaluation form to provide feedback
regarding rotation experience.

Fourth Year

Electives

M25 801 HONORS MEDICINE — GENERAL MEDICINE
Instructor(s): Thomas De Fer, M.D., 362-8050
Location: Barnes-Jewish Hospital
Elective Contact: Amber Specter, 362-8050
Other Information: Students will receive e-mail communication regarding where to report on the first day
prior to the beginning of the period.
Enrollment limit per period: Limit 6/period for Weeks 1, 5, 9; 2/period for Weeks 13, 17, 21; and 1/period
for Weeks 25, 29, 33, 37, and 41.
Valid start weeks for 4-weeks blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

The purpose of the Honors Medicine elective (subinternship) is the development of expertise in the care
of hospitalized patients in a well-supervised teaching environment. Subinterns act as their patients’
interns under the supervision of residents and attending physicians. Subinterns have the same on-call
and admitting schedules as the interns on their teams and are assigned up to two new patients on each
admitting day. Subinterns are not required to spend call nights in the hospital. Except in emergencies,
subinterns are the first individuals to evaluate patients admitted to medical service teams. A diagnostic
and therapeutic approach to the patient is planned in consultation with the resident. Subinterns assume
primary responsibility for the daily care of their patients, under the supervision of resident and attending
physicians. This includes evaluation on daily rounds, scheduling and obtaining results of diagnostic studies, planning therapy, making arrangements for care after discharge and communicating with patients and their families. Subinterns attend the same conferences as the house staff.

Student time distribution: Inpatient 90%, Conferences/Lectures 10%; Primary Care 50%, Subspecialty Care 50%
Major teaching responsibility: Attending, chief resident and resident
Patients seen/weekly: 8-12
On call/weekend responsibility: Yes

**M25 805 RHEUMATOLOGY**
Instructor(s): Richard Brasington, M.D.; Prabha Ranganathan, M.D., 454-7279
Location: Barnes-Jewish Hospital,
5C Center for Advanced Medicine
Elective Contact: Department secretary, 454-7279
On call/weekend responsibility: None
Other Information: Students should contact the Rheumatology office, 454-7279 prior to first day for assignment.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

Students will be involved in the diagnostic work-up and management of patients with rheumatic illnesses including systemic lupus erythematosus, rheumatoid arthritis, vasculitis (polyarteritis, Wegener’s, temporal arteritis), spondyloarthopathies (ankylosing spondylitis, reactive arthritis), osteoarthritis, gout and regional musculoskeletal problems. By working closely with a faculty member, fellows and medical residents, students become integral and active members of the rheumatology service for inpatient consultations and outpatient clinics at Barnes-Jewish Hospital. An emphasis is placed on the physical examination of joints and the musculoskeletal system, synovial fluid analysis, and interpretation of diagnostic tests and radiographs. Students attend two rheumatology conferences held weekly. A rotation limited to outpatient rheumatology is possible by prior arrangement with Dr. Brasington.

Student time distribution: Inpatient 40%, Outpatient 50%, Conferences/Lectures 10%; Subspecialty Care 100%
Major teaching responsibility: Attendings
Patients seen/weekly: ~25 per student

**M25 807 HONORS MEDICINE — ST. LOUIS VA MEDICAL CENTER**
Instructor(s): Scot Hickman, M.D., 289-6308
Location: St. Louis Veterans Affairs Medical Center
Elective Contact: Scot Hickman, M.D., 289-6308
Other Information: Students will receive e-mail communication regarding where to report on the first day prior to the beginning of the period.
Enrollment limit per period: Limit 3/period for Weeks 1, 5, 9; 1/period for Weeks 13, 17, 21, 25, 29, 33, 37, and 41.
Valid start weeks for 4-weeks blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

The purpose of the Honors Medicine elective (subinternship) at the St. Louis VA Medical Center is to develop practical experience and expertise in the care of hospitalized patients on an internal medicine ward. With appropriate supervision by the attending and resident physicians, subinterns will have similar responsibilities as interns. They have the same on-call/admitting schedules as the interns and participate in the same teaching conferences, but they do not take overnight call. Subinterns should admit at least two patients per call day, and they should be the first to evaluate the patients admitted to the medical service, except in emergencies. A diagnostic and therapeutic approach to evaluating each patient is planned in consultation with the resident. While being supervised as listed above, subinterns assume primary responsibility for the daily care of their patients, including evaluation on daily rounds, scheduling and obtaining results of diagnostic studies, calling consults, planning therapy, making arrangements for care after discharge and communicating with patients and their families.
Student time distribution: Inpatient 80%, Conferences/Lectures 20%; Subspecialty Care 100%
Major teaching responsibility: Attending, Chief Resident and Resident
Patients seen/weekly: 6-8 on average
On call/weekend responsibility: On-call every fourth day

M25 809 HYPERBARIC MEDICINE AND PROBLEM WOUND MANAGEMENT
Instructor(s): John D. Davidson, M.D., and staff, 205-6818
Location: St. Luke's Hospital, Barnes- Jewish Hospital
Elective Contact: John D. Davidson, M.D., 205-6818 or pager 424-2626
Other Information: Interested students should contact Dr. John D. Davidson to discuss in what way this elective can be tailored to their particular interests and goals. Mini-electives of one to two weeks' duration can be arranged. (PLEASE contact Dr. Davidson at 205-6818 three weeks prior to the first date of elective to try to tailor the elective as much as possible to your primary interests.)
Enrollment limit per period: 1
Valid start weeks for 2 and 4-week blocks are: Weeks 1, 3, 5, 7, 9, 11, 13, 15, 17, 19, 21, 23, 25, 27, 29, 31, 33, 35, 37, 39, 41, and 43.

The specialty of hyperbaric medicine centers on the use of oxygen under increased atmospheric pressure as a drug for the treatment of many disparate diseases and clinical problems. This elective allows a student to have an acquaintance with this technology, which has a definite role in a wide range of differing specialties including emergency medicine, otolaryngology, plastic and reconstructive surgery, military medicine, rheumatology, dermatology, oral surgery, radiation oncology, internal medicine, neurology and psychiatry, to name a few.

Since students going into these specialties do not need to learn about hyperbaric medicine in depth, but nevertheless would benefit by some exposure to it, we can arrange a mini-elective of one to two weeks duration. This "exposure elective" can be tailored to a student's special field of interest just as we attempt to do in the usual four-week program. Please call Dr. John D. Davidson for more information.
Student time distribution: Inpatient 3%, Outpatient 92%, Conferences/ Lectures 5%; Subspecialty Care 100%
Major teaching responsibility: John A. Davidson, M.D., and Jane Kelly, RRT, CHT, Supervisor
Patients seen/weekly: 20
On call/weekend responsibility: Attending physician will call student regarding select cases

M25 810 GERIATRIC MEDICINE
Instructor(s): David Carr, M.D., 286-2700, press option 1
Location: Washington University, Health Key Building, Third floor, Room 360
Elective Contact: David Carr, M.D., 286-2700, press option 1
Other Information: Meet at the Division of Geriatrics office, Health Key Building, 4488 Forest Park Blvd., 3rd Floor Conference Room 318, 8 a.m. first day of elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 5, 13, 17, 21, 25, 29, 33, 37, and 41.

Students will participate in patient care at the rehabilitation center, the skilled nursing facility Barnes-Jewish Extended Care in Clayton, the inpatient geriatric consultation service, the outpatient primary care and geriatric consultation center, and palliative care. Attendance at scheduled clinical conferences in geriatric medicine and hospice meetings is also required.

Student time distribution: Inpatient 20%, Outpatient 80%; Primary Care 20%, Subspecialty Care 80%
Major teaching responsibility: Attendings
Patients seen/weekly: 10-15
On call/weekend responsibility: None

M25 811 CLINICAL INTERNAL MEDICINE — HOSPITALIST
Instructor(s): Caroline Kahle, M.D., 362-1700
Location: Barnes Jewish Hospital, West Pavilion Corridor main level  
Elective Contact: Mary Russell, 362-1707, mrussell@wustl.edu  
Other Information: Students should contact Mary Russell one to two weeks prior to first day of elective for information on where to meet.  
Enrollment limit per period: 1  
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

This course allows the student to work one-on-one with hospitalist physicians on a patient care team. The student acts as the intern under the direct supervision of the attending physician. Daily responsibilities include admission history and physicals, daily notes and discharge summaries on assigned patients. S/he also will have the opportunity to perform indicated procedures on patients on this service. Students are encouraged to participate in Department of Medicine conferences.

Student time distribution: Inpatient 95%, Conferences/Lectures 5%; Primary Care 100%  
Major teaching responsibility: Hospitalist attendings  
Patients seen/weekly: 10  
On call/weekend responsibility: None

M25 814 CLINICAL EMERGENCY MEDICINE, BARNES-JEWISH HOSPITAL  
Instructor(s): Mark Levine, M.D., 362-6743  
Location: Barnard and/or Wohl Hospital  
Elective Contact: Mary Hummert, 747-4156  
Other Information: Contact Emergency Medicine Division office at 747-4156, for scheduling one week prior to the rotation. If a student is needing any time off, approval will be needed by the Course Coordinator before the start of the rotation. Students are required to work at least 12 to 14 shifts.  
Enrollment limit per period: 6  
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

This rotation offers practical experience in the evaluation and management of acutely sick and injured patients. Students will function as subinterns, initially evaluating their assigned patients and developing a plan for further diagnostic studies and therapy. They will report to a senior-level resident or an attending physician. The student can expect to get an opportunity to perform a wide variety of procedural skills such as suturing, splinting, peripheral and central venous access, and cardiopulmonary resuscitation. Shifts will be eight hours and students will rotate between day, evening and night shifts, including weekend shifts, to gain maximum exposure to all types of emergencies. A core content of lectures will be provided. Students will gain an understanding of prehospital care by doing a ridealong shift with the St. Louis Fire Department EMS. Students desiring a letter of recommendation from Dr. Michael Mullins, Director of Research, or any other EM attending should take this WUMS IV Emergency Medicine rotation. Students will be scheduled for required weekend and overnight shifts and changes will not be allowed to the schedule unless approved prior to the start of the rotation by the course coordinator. Please be advised that there is a limit of days off while on this rotation during interview season; otherwise, students should arrange to take the elective at a different time during the year. Days off during the rest of the year will conform to university policy. Days off should be requested from Mary Hummert at least two weeks prior to the beginning of the rotation for scheduling purposes.

Student time distribution: Outpatient 80%, Conferences/Lectures 20%; Primary Care 40%, Subspecialty Care 60%  
Major teaching responsibility: Attendings and senior residents (PGY 3 & 4)  
Patients seen/weekly: ~5 per shift  
On call/weekend responsibility: Evenings and weekends; no on call

M25 821 INPATIENT CARDIOLOGY  
Instructor(s): Jose Madrazo, M.D., 362-1291, pager (314) 424-1733; Mohammad Kizilbash, M.D., pager (314) 538-8276  
Location: 13th Floor, Northwest Tower  
Elective Contact: Anita Johnson, (314) 747-3606  
Other Information: Students meet on the 13th Floor, Northwest Tower, 9 a.m. first day of elective.
On call/weekend responsibility: None  
Enrollment limit per period: 2  
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

Students will participate as members of the Barnes-Jewish Hospital Cardiology at Washington University Consultative Team. They will be part of a team composed of faculty members, fellows, residents and nurse specialists that sees a large population of cardiac patients and follows them through all aspects of their in-hospital care. Emphasis will be placed on physical examination and the interpretation of modern cardiac diagnostic tests including electrocardiograms, echocardiograms and coronary angiograms and their role in clinical decision making.

Student time distribution: Inpatient 90%, Outpatient 0%, Conferences/Lectures 10%; Primary Care 5%, Subspecialty Care 95%
Major teaching responsibility: Attending and fellow
Patients seen/weekly: 10-15

M25 822 HONORS MEDICINE — CARDIOLOGY
Instructor(s): Thomas De Fer, M.D., 362-8050
Location: Barnes-Jewish Hospital
Elective Contact: Amber Specter, 362-8050
Other Information: Students will receive e-mail communication regarding when/where to report on the first day prior to the beginning of the period.
Enrollment limit per period: Limit 2/period for Weeks 1, 5, 9, 13, 17, and 21 and 1/period for Weeks 25, 29, 33, 37, and 41.
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

The structure and functioning of the Honors Medicine—Cardiology elective (subinternship) is very similar to the general medicine subinternship (M25 801). The basic purpose is to develop expertise in the care of hospitalized patients in a well-supervised teaching environment. The majority of patients admitted to the service will have a cardiology diagnosis as the main reason for admission. Some general medical problems will also be seen. All attendings on the service are cardiology subspecialists. Cardiology fellows act as the chief resident for the service on a monthly basis. Subinterns act as their patients’ interns under the supervision of residents and attending physicians. Subinterns have the same on-call and admitting schedules as the interns on their teams and are assigned up to two new patients on each admitting day. Subinterns are not required to spend call nights in the hospital. Except in emergencies, subinterns are the first individuals to evaluate patients admitted to medical service teams. A diagnostic and therapeutic approach to the patient is planned in consultation with the resident. Subinterns assume primary responsibility for the daily care of their patients, under the supervision of resident and attending physicians. This includes evaluation on daily rounds, scheduling and obtaining results of diagnostic studies, planning therapy, making arrangements for care after discharge and communicating with patients and their families. Subinterns attend the same conferences as the internal medicine house staff. There are also several conferences specific to the cardiology service.

Student time distribution: Inpatient 90%, Conferences/Lectures 10%; Primary Care 25%, Subspecialty Care 75%
Major teaching responsibility: Attending, chief resident, and resident
Patients seen/weekly: 8-12
On call/weekend responsibility: Yes

M25 823 CLINICAL CARDIOLOGY — ST. LOUIS VA MEDICAL CENTER
Instructor(s): Wade Martin, M.D., 289-6329
Location: St. Louis VA Medical Center — John Cochran Division
Elective Contact: Wade Martin, M.D., 289-6329
Other Information: Students should meet in Room B206, Second Floor, St. Louis VA Medical Center — John Cochran Division.
Enrollment limit per period: 2
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.
The major purpose of this elective in clinical cardiology at the St. Louis VA Medical Center — John Cochran Division is to improve evaluation and management skills for diagnosis and treatment of important cardiovascular conditions such as coronary artery disease including acute myocardial infarction, congestive heart failure, hypertension, and valvular heart disease. The rotation is designed to be flexible enough to accommodate a wide variety of course objectives, but includes the opportunity to participate in 1-3 outpatient clinics per week; 1-4 weeks of inpatient intensive care, telemetry or cardiology consultation rounds; and ECG, stress testing, nuclear imaging, or echocardiographic reading sessions, cardiac catheterization and electrophysiologic procedures. The emphasis will be on improvement of the ability to diagnose and treat cardiovascular disease on the basis of information obtained from a thorough history and physical examination that is integrated with data from appropriate highly targeted laboratory studies in a manner that optimizes patient outcome and minimizes risk and costs.

Student time distribution: Inpatient 45%, Outpatient 55%, Conferences/Lectures 5-10%; Primary Care 25%, Subspecialty Care 75%
Major teaching responsibility: Attendings and fellows
Patients seen/weekly: 20
On call/weekend responsibility: Varies

M25 825 CARDIAC ARRHYTHMIAS AND ELECTROPHYSIOLOGY
Instructor(s): Timothy Smith, Ph.D., M.D., 454-7877
Location: Barnes-Jewish Hospital
Elective Contact: Timothy Smith, Ph.D., M.D., or Yvonne O’Connell, 454-7834
Other Information: Students meet in the Cardiology Division, 13th Floor Northwest Tower, 8 a.m. first day of elective or page the EP Fellow at 424-4680.
Enrollment limit per period: 2
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

This elective provides the student with exposure and teaching in the diagnosis and treatment of complex cardiac rhythm disturbances. Specifically, the student is expected to evaluate patients referred for evaluation and treatment of complex or life-threatening rhythm disturbances, unexplained syncope or sudden cardiac death. Rounds are made daily on hospitalized patients, and students are welcome to observe electrophysiology studies or implantation of pacemakers and defibrillators. This elective also provides an intensive opportunity to learn clinical electrocardiography and the systematic use of anti-arrhythmic drugs. Finally, since patients with chronic, complex rhythm disturbances frequently have organic heart disease, a broad-based exposure to general cardiology is also part of this elective.

Student time distribution: Inpatient 80%, Outpatient 10% (optional), Conferences/Lectures 10%; Subspecialty Care 100%
Major teaching responsibility: Attending physician
Patients seen/weekly: 2 new consults/day
On call/weekend responsibility: None

M25 827 HEART FAILURE/CARDIAC TRANSPLANTATION
Instructor(s): Gregory Ewald, M.D., 454-7009
Location: Barnes-Jewish Hospital, North Campus, Suite 4455
Elective Contact: Gregory Ewald, M.D., 454-7009
Other Information: Students should page the attending physician, 8 a.m. first day of elective.
Enrollment limit per period: 2
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

This rotation is intended to provide trainees with a comprehensive experience managing patients with advanced heart failure. In addition to daily rounds, trainees are invited to attend both heart failure and transplant clinics. Further, the curriculum is supplemented by a comprehensive syllabus that contains the critical literature pertinent to this patient population. The trainees will also have experience with the evaluation of patients for operative heart failure therapies and will have the opportunity to observe these surgical procedures.
Student time distribution: Inpatient 70%, Outpatient 20%, Conferences/Lectures 10%; Subspecialty Care 100%
Major teaching responsibility: Attendings
Patients seen/weekly: 30
On call/weekend responsibility: None

**M25 830 DERMATOLOGY**
Instructor(s): Dermatology staff, 454-8622
Location: 7705 Wohl Hospital Building
Elective Contact: Rosemarie Brannan, 454-8622
Other Information: First Monday of rotation students will attend both the 7:30 a.m. lecture in the Dermatology Library, 7706 Wohl Hospital Building and the 9 a.m. orientation, Room 116 Wohl Hospital Building.
Enrollment limit per period: 4
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 29, 33, 37, and 41.

The aim of this elective is to provide a guide for the student so that s/he is able to appreciate dermatology within the broader perspectives of medicine and biology. Emphasis will be placed on the dermatologic variations encountered in a normal physical examination of the skin, the identification of common skin diseases, dermatologic clues to systemic disease, as well as those dermatologic conditions that are life-threatening. The student will participate in outpatient care in the Barnes-Jewish Hospital and affiliated clinics. Students will attend all clinical teaching rounds and conferences in addition to the basic science and cutaneous histopathology conferences. M25 830 is essentially the same as the third-year Dermatology Clerkship. Students are limited to taking either one or the other — NOT BOTH. Students are also limited to taking either M25 830/Dermatology or M25 831/Pediatric Dermatology fourth-year electives — NOT BOTH.

Student time distribution: Inpatient 25%, Outpatient 50%, Conferences/Lectures 25%; Specialty Care 100%
Major teaching responsibility: Course Master for rotation, private attending and senior resident
Patients seen/weekly: 25-50
On call/weekend responsibility: None

**M25 831 PEDIATRIC DERMATOLOGY**
Instructor(s): Susan J. Bayliss, M.D., 454-2714
Location: 3N48 Children’s Hospital
Elective Contact: Rosemarie Brannan, 454-8622
Other Information: Call 454-2714 prior to first day of elective. Reporting time is 7:30 a.m. first day of elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 29, 33, 37, and 41.

This clinical rotation will be available to students interested in dermatology, pediatrics or both. Students will follow the dermatology rotation (M25 830) with an emphasis on pediatric dermatology by attending pediatric dermatology clinics, seeing consults, etc. Enthusiastic students will have an opportunity to write up a case report if they wish, but need to notify Dr. Bayliss before the course. Students can take either this elective or M25 830/Dermatology — NOT BOTH.

Student time distribution: Inpatient 1%, Outpatient 74%, Conferences/Lectures 25%; Subspecialty Care 100%
Major teaching responsibility: Single attending
Patients seen/weekly: 50-100
On call/weekend responsibility: None

**M25 836 CLINICAL GASTROENTEROLOGY AND HEPATOLOGY**
The GI Hepatology elective is integrated into a very active inpatient/outpatient and endoscopy service at Barnes-Jewish Hospital. Students will participate in the evaluation of inpatients and outpatients with a spectrum of gut and liver disorders, will make patient rounds with the faculty and fellows, and have responsibility for patients on whom consultations have been requested. In addition, they will observe biopsy, endoscopic and intubation techniques and participate in outpatient clinic and GI conferences.

Student time distribution: Inpatient 65%, Outpatient 25%, Conferences/Lectures 10%; Subspecialty Care 100%
Major teaching responsibility: Attending and fellows
Patients seen/weekly: 12 new
On call/weekend responsibility: None

M25 838 MEDICINE CONSULT SERVICE
Instructor(s): John Cras, M.D., 362-170
Location: Barnes-Jewish Hospital, West Pavilion Corridor main level
Elective Contact: Mary Russell, 362-1707, mrussell@wustl.edu
Other Information: Students should contact Mary Russell, 362-1707, one to two weeks prior to first day of elective for information on where to meet.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41. Two week rotations are also available.

The focus of the Medicine Consult Service elective is the evaluation and management of medically complex patients admitted to the hospital on non-medicine services. The issues involved with perioperative management are particularly stressed. The student will function as a member of the consult service team. Duties will include performing initial consultations and follow-up care under the supervision of a Hospital Medicine attending and a senior medical resident. Attendance at Department of Medicine and division conferences is encouraged.

Student time distribution: Inpatient 90%, Conferences/Lectures 10%; Primary Care 100%
Major teaching responsibility: Consult Service attending (from the Division of Hospital Medicine)
Patients seen/weekly: 10-15
On call/weekend responsibility: None

M25 844 HEMATOLOGY AND HEMOSTASIS
Instructor(s): Morey Blinder, M.D., and Evan Sadler, M.D., 362-8857
Location: 8441 Clinical Sciences Research Building
Elective Contact: Morey Blinder, M.D., 362-8857
Other Information: Students meet in Barnes-Jewish Hospital North, 7900 Nursing Division, 8 a.m. first day of elective.
Enrollment limit per period: 2
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

Activities planned include work-up of patients at Barnes-Jewish Hospital under the supervision of the hematology fellow and his staff consultant; attendance at clinical rounds three to five hours weekly; participation in outpatient clinics; experience in various procedures, especially blood and bone marrow morphology and in interpretation of coagulation tests. Weekly student rounds with a senior staff person.

Student time distribution: Inpatient 80%, Outpatient 10%, Conferences/Lectures 10%; Subspecialty
M25 847 BONE AND MINERAL DISEASES
Instructor(s): Michael Whyte, M.D.; Kathryn Diemer, M.D.; Roberto Civitelli, M.D.; and Carolyn Jachna, M.D.
Location: Barnes-Jewish Hospital; Barnes-Jewish Hospital West County; Shriners Hospital for Children
Elective Contact: Michael Whyte, M.D., (314) 872-8305
Other Information: Please contact Dr. Whyte a week before elective for instruction and meeting location.
Enrollment limit per period: 2
Valid start weeks for 4-week blocks are: Weeks 1, 5, 17, 21, 25, 29, 33, 37, and 41.

The course is designed to acquaint the student with the clinical, radiological and pathological manifestations and treatment of disorders of bone and mineral metabolism, including osteoporosis, Paget’s disease of bone, hyperparathyroidism, osteomalacia, and more rare disorders of bone development and homeostasis. The student will rotate through clinics of the Division of Bone and Mineral Diseases and see patients at Barnes-Jewish Hospital, Barnes-Jewish West County Hospital and Shriners Hospital for Children.

Acquired and heritable bone diseases will be studied in the context of derangements of mineral homeostasis with emphasis on vitamin D and peptide hormone metabolism and skeletal formation and remodeling. The role of noninvasive methods for measuring bone mass in the diagnosis and management of skeletal diseases also will be stressed. Faculty and medical students will be present interesting cases for discussion or the students can present a pertinent topic related to bone metabolism they have researched during their rotation.

Responsibilities: Shriners Hospital Wednesday a.m. (Dr. Whyte); CAM, second and third Monday (a.m.), and fourth Thursday (p.m.) of each month; Barnes-Jewish West County Professional Building 2; Tuesdays or Wednesdays, p.m. Metabolic Bone Disease Case Conference, Friday 8 a.m. Room 2206, Kingshwy Bldg; Avioli Musculoskeletal Research Seminars, Friday 9 a.m. Brown Room, Steinberg Building.

Student time distribution: Outpatient 85%, Conferences/Lectures 15%; Subspecialty Care 100%

M25 850 HEMATOLOGY AND ONCOLOGY IV
Instructor(s): Scot Hickman, M.D., and Vorachart Auethavekiat, M.D., 289-6308
Location: St. Louis VA Medical Center — John Cochran Division
Elective Contact: Scot Hickman, M.D., 289-6308
Other Information: Students should contact Dr. Hickman prior to first day of elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

The student will have major inpatient and outpatient exposure to the management of the following: non-small cell and small cell lung cancer, carcinoma of the colon, prostate cancer, anemia, lymphoma and leukemia. A wide variety of more esoteric tumors and hematological pathology may be encountered. In addition to diagnosis, staging and management, general oncological topics such as pain management, hypercalcemia of malignancy and malignant effusions will be discussed. The weekly schedule includes morphology sessions, multidisciplinary conferences and tutorial sessions with the student alone, which will require prior literature review.

Student time distribution: Inpatient 25%, Outpatient 70%, Conferences/Lectures 5%; Primary Care 25%, Subspecialty Care 75%
Major teaching responsibility: Attendings and some fellow teaching input as well
Patients seen/weekly: 25
On call/weekend responsibility: None

**M25 853 BONE AND JOINT INFECTION DISEASE CONSULT**
Instructor(s): Jonas Marschall, M.D., 454-8214, jmarscha@dom.wustl.edu
Location: 15th Floor, Northwest Tower
Elective Contact: Cindy Waterman or Alicia Cicerelli, 454-8214
Other Information: Students should page the Bone and Joint attending at 510-3805 at 8 a.m. on the first day of the elective.
Enrollment limit per period: 8
Valid start weeks for 2-week blocks are: Weeks 3, 7, 11, 15, 19, 23, 27, 31, 35, 39, and 43. Must be done in conjunction with two weeks of General Infectious Disease

Study of infectious diseases of the bones and joints, including infections in both native and prosthetic joints. The elective is designed to teach students the fundamentals of evaluating clinical orthopedic infections and formulating plans for workup and therapy. Students see consultations in infectious diseases in every part of Barnes-Jewish Hospital under the supervision of a faculty member who rounds with them every day. They work closely with the infectious diseases attending and nurse practitioner, follow their own patients and play an important role in their management. They are expected to read the literature about their patients and participate in clinical conferences. They attend teaching rounds and conferences and lectures in infectious diseases. They also learn appropriate use of antibiotics and antifungal agents. The role of surgical and medical management is discussed, and the students will interact with surgical staff in understanding the risks and outcomes of these common infections. Two weeks of General Infectious Disease are a prerequisite to this course.

Student time distribution: Inpatient 90%, Conferences/Lectures 10%, Subspecialty Care 100%
Major teaching responsibility: Single Attendings
Patients seen/weekly: 20
On call/weekend responsibility: None

**M25 854 TRANSPLANT INFECTION DISEASE**
Instructor(s): Steve Lawrence, M.D., 454-8214, slawrenc@dom.wustl.edu
Location: 15th Floor, Northwest Tower
Elective Contact: Cindy Waterman or Alicia Cicerelli, 454-8214
Other Information: Students should page the Transplant fellow at 360-1129 at 8 a.m. on the first day of the elective.
Enrollment limit per period: 8
Valid start weeks for 2-week blocks are: Weeks 3, 7, 11, 15, 19, 23, 27, 31, 35, 39, and 43. Must be done in conjunction with two weeks of General Infectious Disease

Study of infectious diseases in patients who have had bone marrow or solid organ transplants or who have a hematologic malignancy. The elective is designed to teach students the fundamentals of evaluating clinical infections in these complex and interesting patients and formulating plans for workup and therapy. Students see consultations in every part of Barnes-Jewish Hospital under the supervision of a faculty member who rounds with them every day. They work closely with infectious disease fellows, follow their own patients and play an important role in their management. They are expected to read the literature about their patients and participate in clinical conferences. They attend teaching rounds and conferences and lectures in infectious diseases. They also learn appropriate use of antibiotics, antifungal and antiviral agents in this highly immune-suppressed population. A wide distribution of infectious diseases is covered including management of neutropenic fever, invasive fungal infections in the transplant population, acute and chronic infections, infection prophylaxis and monitoring and interactions between immunosuppressive agents and antibiotics.

Student time distribution: Inpatient 90%, Conferences/Lectures 10%, Subspecialty Care 100%
Major teaching responsibility: Single Attending and Fellow
Patients seen/weekly: 6
M25 856 INFECTIOUS DISEASE: CARE OF HIV-INFECTED PATIENTS
Instructor(s): Nur Onen, M.D., 454-8023
Location: St. Louis Children’s Hospital, Barnes-Jewish Hospital, plus other ambulatory sites.
Elective Contact: Dawn-Michele Cannon, 454-8225
Other Information: Students should contact Dr. Onen one week prior to the start of rotation. Students report to the ID Clinic/ACTU, Storz Building, 4570 Children's Place, 9 a.m. first day of elective.
Enrollment limit per period: 4
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

This elective is designed to introduce students to the care of HIV-infected individuals (adults, adolescents and children) and of HIV-exposed infants. Care of the HIV-infected patient encompasses not only the medical aspects, but also the psychosocial aspects of care. The elective will involve rotation through several clinics including the maternal-HIV clinic, pediatric and adolescent HIV clinics and several adult HIV clinics, along with participation in community-wide social service meetings, home visits and exposure to the retrovirus laboratory and the AIDS Clinical Trials unit. In addition, the student will spend part of his/her time rotating in the general ambulatory infectious diseases clinics (pediatric and adult ID).

Student time distribution: Outpatient 65%, Conferences/Lectures 15%, Other 20%; Subspecialty Care 100%
Major teaching responsibility: Attendings listed above as course instructors
Patients seen/weekly: 20
On call/weekend responsibility: None

M25 858 AMBULATORY INFECTIOUS DISEASE
Instructor(s): Nigar Kirmani, M.D., 747-1214
Location: 15th Floor, Northwest Tower and Storz Building
Elective Contact: Lori Watkins, 747-1214
Other Information: Students should report to the ID Clinic in the Storz Building, 8 a.m. first day of elective.
Enrollment limit per period: 8
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

The elective is designed to teach students the fundamentals of evaluating clinical infections in the outpatient setting. Students see patients under the supervision of a faculty member. Students will participate in the care of HIV-infected or otherwise immunosuppressed patients as well as general infectious disease and travel patients. The clinic is the primary provider for HIV-infected patients, and students will learn the pathogenesis of HIV, become familiar with most antiretroviral medications, and have the opportunity to learn about opportunistic infections and their prophylaxis. They will also have the opportunity to see patients with bone and joint infections, endovascular infections, endemic and opportunistic mycoses, sexually transmitted diseases and travel plans. Patients seen will have a wide range of acute and chronic infections with a heavy emphasis on HIV/AIDS, including indigent and insured patients, of both sexes and a wide range of ages. The students will play an important role in the management of these patients. They are expected to read the literature about their patients and participate in clinical conferences.

Student time distribution: Outpatient 90%, Conferences/Lectures 10%, Primary Care 20%; Subspecialty Care 100%
Major teaching responsibility: Clinic Attendings
Patients seen/weekly: 15
On call/weekend responsibility: None

M25 859 GENERAL INPATIENT INFECTIOUS DISEASE
Instructor(s): Rachel Presti, M.D., 454-8214, rpresti@dom.wustl.edu
Location: 15th Floor, Northwest Tower
Elective Contact: Cindy Waterman or Alicia Cicerelli, 454-8214
Other Information: Students should page Infectious Disease Fellows at either 424-2718 or 424-2720 on the first morning of the elective.
Enrollment limit per period: 8
Valid start weeks for 2- or 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.
Two-week blocks must be done in conjunction with Transplant Infectious Disease or Bone and Joint Infectious Disease.

Study of patients with infectious diseases, including inpatient care of HIV infected patients and general infectious disease consults. The elective is designed to teach students the fundamentals of evaluating clinical problems in infection and formulating plans for workup and therapy. Students see consultations in infectious diseases in every part of Barnes-Jewish Hospital under the supervision of a faculty member who rounds with them every day. They work closely with medical residents and infectious disease fellows, follow their own patients and play an important role in their management. They are expected to read the literature about their patients and participate in clinical conferences. They attend teaching rounds and conferences and lectures in infectious diseases. They also learn appropriate use of antibiotics, antifungal and antiviral agents. A wide distribution of infectious diseases is covered including community-acquired acute and chronic infections, opportunistic infections in HIV-infected patients, hospital-acquired infections and basic infection control practices. This is a four-week rotation. Two-week rotations are allowed, but must be done in conjunction with two weeks of Transplant Infectious Disease or Bone and Joint Infectious Disease.

Student time distribution: Inpatient 90%, Conferences/Lectures 10%; Subspecialty Care 100%
Major teaching responsibility: Single attending and fellow
Patients seen/weekly: 7 new consults, 15 total
On call/weekend responsibility: None

M25 861 ONCOLOGY — INPATIENT
Instructor(s): Alex Denes, M.D., 362-4803
Location: Division 7900, Seventh Floor, CAM
Elective Contact: Helen Black, 747-5677
Other Information: Students meet on the Seventh Floor of CAM, POD B, Medical Oncology Outpatient Area, 8 a.m. first day of elective.
Enrollment limit per period: 6 students per block, on average one per attending
Valid start weeks for 4-weeks blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

Medical Oncology is a complex subspecialty that is undergoing a rapid evolution as a result of new systemic treatment approaches that stem from biological insights into the nature of cancer. During the course of the elective, medical students will be able to interact with attending physicians and patients for bedside teaching and attend tumor boards and lectures focused on the care of patients with solid tumors. At the end of the rotation, the students will appreciate the principles of our approach to cancer patients and should have gained insights into the pharmacological basis for systemic cancer treatment. The ethical and medical challenges of caring for patients with advanced incurable malignancies will also be an important theme, as well as the conduct of clinical research in this patient population. Students will learn to care for hospitalized patients suffering from complications from their cancer or from toxicities due to treatments. Oncologic emergencies will be covered. Issues such as palliative care treatment options and end-of-life decision making will be explored as well.

Student time distribution: Inpatient 90%, Conferences/Lectures 10%; Subspecialty Care 100%
Major teaching responsibility: All Medical Oncology Attendings
Patients seen/weekly: 50
On call/weekend responsibility: None

M25 862 INPATIENT INTERNAL MEDICINE/ONCOLOGY — FIRM
Instructor(s): Anna Roshal, M.D.; and Alex Denes, M.D., 362-5677
Location: North Campus, 7900 Inpatient Floor
Elective Contact: Helen Black, 362-5677
Other Information: Students meet in North Campus, 7900 Inpatient Floor, 7:30 a.m. first day of elective. Enrollment limit per period: 2
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

Students will function as subinterns on the resident and intern team, supervised by the attending Medical Oncologist. They will see patients who have a cancer diagnosis and are admitted for either treatment or complications of their disease, including complicated symptom control issues. Most common cancers that are seen are lymphoma, lung cancer, GI malignancies, sarcomas and breast cancer. Students will also be exposed to complex psychosocial issues surrounding end-of-life discussions with patients and their families and learn about managing complex symptomatology frequently encountered in this population. There are scheduled twice-weekly formal teaching lectures on oncologic emergencies and other topics such as neutropenic fever, pain management and management of specific cancer types.

Major learning goals:
(1) Become familiar with frequent complications of cancer treatment such as neutropenic fever, nausea/vomiting, diarrhea, infectious complications and their management.
(2) Become familiar with oncologic emergencies (spinal cord compression, hypercalcemia, neutropenic sepsis) and their management.
(3) Become more comfortable handling patients and families requiring difficult psychosocial and end-of-life discussions.

Student time distribution: Inpatient 100%; Subspecialty Care 100%
Major teaching responsibility: Dr. Denes and Dr. Roshal
Patients seen/weekly: 50
On call/weekend responsibility: One-in-four call

M25 863 EMERGENCY ULTRASOUND
Instructor(s): Deborah Kane, M.D., and staff, 747-4156
Location: Barnes-Jewish Hospital, North Campus
Elective Contact: Mary Hummert, 747-4156
Other Information: Students meet at the Emergency Department at Barnes Jewish Hospital at 10 a.m. on the first day of the elective.
Enrollment limit per period: 1 unless otherwise approved by course master
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

This rotation will focus on ultrasound and all of its many applications and uses in the Emergency Department. Students will participate in the performance of bedside ultrasound of patients in the Emergency Department. Common applications of emergency ultrasound include the FAST exam, pelvic ultrasound, Abdominal Aortic Aneurysm (AAA), vascular access, renal, gallbladder, and DVT. In general, the student will be in the Emergency Department during weekdays to perform these exams. Students will not be involved in direct patient care during this rotation. Students will have access to a lecture bank of the common applications. In addition, the student will meet with the Ultrasound Director 1-2 times/week to review images and have direct hands-on instruction. At the end of the rotation, the student should have gained the knowledge of basic emergency ultrasound including its indications and applications; as well as becoming more adept at the performance of ultrasound.

Student time distribution: Outpatient 80%, Conferences/Lectures 20%; Primary Care 40%, Subspecialty Care 60%
Major teaching responsibility: Attendings
Patients seen/weekly: 25
On call/weekend responsibility: None

M25 865 INTENSIVE CARE MEDICINE — BARNES-JEWISH HOSPITAL NORTH
Instructor(s): Warren Isakow, M.D., and staff, 454-8762
Location: Barnes-Jewish Hospital, North Campus
Elective Contact: Lisa Wetzel, 454-8762
Other Information: Students meet at the MICU (8th Floor, Barnes-Jewish Hospital, North Campus), 8
a.m. first day of elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

This elective in intensive care is offered in the Intensive Care Unit at Barnes-Jewish Hospital, North Campus. This unit has 10 intensive care beds providing intensive nursing care and life-support technology. The patients represent a mixture of patients with primarily medical problems. Patient care responsibility includes night call. In addition to patient responsibility, there are regularly scheduled conferences and attending rounds.

Student time distribution: Inpatient 100%; Subspecialty Care 100%
Major teaching responsibility: Attendings and residents
Patients seen/weekly: 8
On call/weekend responsibility: Every third night

M25 867 MEDICAL INTENSIVE CARE
Instructor(s): Warren Isakow, M.D., 454-8762
Location: Barnes-Jewish Hospital, South Campus
Elective Contact: Lisa Wetzel, 454-8762
Other Information: Students report to the Medical Intensive Care Unit, 8300 Barnes-Jewish Hospital, South Campus, 7:30 a.m. first day of elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

This elective is offered as an opportunity to gain additional experience in acute, primary care medicine. The elective is an advanced course in patient care involving complex medical problems. Responsibilities involve working up new patients with the MICU team, case presentations and attendance at conferences. Conferences consist of attending rounds Monday through Saturday, radiology rounds Monday through Saturday, pulmonary conference and medical grand rounds on Thursday, and critical care conference once each month. Call schedule is every third night.

Student time distribution: Inpatient 90%, Conferences/Lectures 10%; Subspecialty Care 100%
Major teaching responsibility: Attendings and residents
Patients seen/weekly: 3
On call/weekend responsibility: Yes

M25 869 PALLIATIVE MEDICINE
Instructor(s): Maria Dans, M.D., 362-5800, mdans@dom.wustl.edu
Location: 3320 Suite, Kingshighway Building, North Campus
Elective Contact: Administrative Contact: Nicole Williams, 747-5361, nsw2227@bjc.org
Other Information: Please email the course master and administrative contact at least one week before start of elective. Reporting time is 8:45 a.m. first day of elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

The Palliative Medicine elective will focus on the care of patients with life-threatening or debilitating illness throughout the course of their care. Skills in symptom management, communication and interdisciplinary team-based care will be the focus. Students will spend the majority of their time on the BJH Palliative Care Service. Based on the individual student's interest, there may also be opportunities to work with the BJC Hospice Team and the St. Louis Children's Hospital WINGS program and Palliative Care Service.

Students will learn to assess and treat refractory symptoms, participate in complicated advanced care planning and gain an understanding of rational polypharmacy through consultation on end-of-life issues and symptom management. While in the hospital, students will be responsible for seeing patients upon initial assessment as well as delivering follow-up care with the team. Patients will be seen for both
end-of-life care as well as symptom management. Students will participate in conversations with patients regarding goals of care, delivering bad news and withholding/withdrawing care. Students will attend interdisciplinary team meetings. They may also make home visits with hospice care providers, if desired. Emphasis will also be placed on observing and understanding the psychosocial and spiritual needs of the patients, as well as the impact of the burden on caregivers.

Student time distribution: Inpatient 85%, Conferences/Lectures 15%; Subspecialty Care 100%
Major teaching responsibility: BJH Palliative Care Attendings (Maria Dans, M.D., and Kathleen Garcia, M.D.); BJH Palliative Care Team Members; BJC Hospice Medical Director (Bernard Shore, M.D.); SLCH WINGS Program Medical Director (Elliot Gellman, M.D.); SLCH Palliative Care Service Medical Director (Joan Rosenbaum, M.D.)
Patients seen/weekly: 10
On call/weekend responsibility: None

M25 870 ENDOCRINONOELOGY, DIABETES AND METABOLISM
Instructor(s): Clay F. Semenkovich, M.D., and staff, 362-7617
Location: Eighth Floor, Southwest Tower, Barnes-Jewish Hospital South Campus
Elective Contact: Karen Muehlhauser, 362-7617
Other Information: Students meet on Eighth Floor Southwest Tower, Barnes-Jewish South Campus, 8:15 a.m. first day of elective.
Enrollment limit per period: 2
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

In general, the four-week rotation will be divided into two weeks general endocrinology and two weeks diabetes. Students taking this elective see patients with endocrine and metabolic diseases in the Outpatient Consultation offices and inpatients at Barnes-Jewish Hospital. They will present these cases at formal rounds. They will also participate in informal rounds with the division and at divisional seminars. Extensive interaction with patients with diabetes and a diabetes education program are included, as is involvement with patients with thyroid, pituitary, adrenal, gonad, metabolic bone disease and lipid disorders. Ample opportunities will be provided for discussions of patient problems with the members of the division.

Student time distribution: Inpatient 60%, Outpatient 30%, Conferences/Lectures 10%; Subspecialty Care 100%
Major teaching responsibility: Faculty consultant for inpatients, individual faculty one-on-one for outpatients and division chief for both
Patients seen/weekly: 8-10
On call/weekend responsibility: Elective for students

M25 871 ONCOLOGY — OUTPATIENT
Instructor(s): Steven Sorscher, M.D., 362-9319
Location: Siteman Cancer Center, CAM Building
Elective Contact: Caroline Koenig, 747-8475
Other Information: Students meet on the Seventh Floor, Siteman Cancer Center, CAM Building, 4921 Parkview Place, 8:30 a.m. first day of elective.
Enrollment limit per period: 2
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

Students will gain experience in the initial treatment of newly diagnosed malignancies and the outpatient management of oncology patients. Participation in multidisciplinary tumor conferences will stress a combined-modality approach to management, incorporating chemotherapy, radiotherapy and surgery. Students will see patients with a variety of malignancies, including lymphoma, myeloma and tumors of the lung, breast and colon. Management of hypercalcemia and other paraneoplastic syndromes, as well as cancer pain management will be covered. Students will have the opportunity to see how most oncologists spend 90 percent of their workday. They will observe different styles that oncologists have in presenting news about prognosis, treatment options and other information to patients while they also learn about the molecular basis for cancer, the mechanisms of action for our therapies (particularly the
newer agents which target specific molecular abnormalities) and the key studies that justify the use of therapies (e.g. randomized studies showing that after surgery, chemotherapy will reduce the risk of recurrence from a particular cancer with a particular regimen). By spending time with clinicians, students will learn how to identify hereditary syndromes, use drugs for symptom relief and also learn how radiographic and laboratory tests allow oncologists to care for patients.

Student time distribution: Outpatient 85%, Conferences/Lectures 15%; Subspecialty Care 100%
Major teaching responsibility: Oncology attendings and occasionally fellows
Patients seen/weekly: 30-50
On call/weekend responsibility: None

**M25 877 INTENSIVE ECG INTERPRETATION**
Instructor(s): Robert E. Kleiger, M.D.; 454-7089; rkleiger@dom.wustl.edu
Location: 13134 Northwest Tower
Elective Contact: Robert Kleiger, M.D.; 454-7089; rkleiger@dom.wustl.edu
Other Information: Contact Marge Leaders in the Northwest Tower on the first day of elective at 10 a.m.
Enrollment limit per period: 2
Valid start weeks for 2-week blocks are: Weeks 1, 3, 5, 7, 11, 13, 15, 17, 19, 27, 29, 31, 33, 35, 37, 39, 41, and 43.

The student, during the two-week elective, will read 20-25 ECGs obtained from the Barnes-Jewish Heart Station and then over read by an experienced electrocardiographer. There will also be didactic sessions covering infarction, ventricular hypertrophy, heart block, arrhythmias and aberrant conduction.

Student time distribution: Inpatient 0%, Outpatient 0%, Conferences/Lectures 100%; Subspecialty Care 100%
Major teaching responsibility: Attending
Patients seen/weekly: n/a
On call/weekend responsibility: None

**M25 880 PULMONARY MEDICINE — BARNES-JEWISH HOSPITAL**
Instructor(s): Daniel Rosenbluth, M.D., and staff, 454-8762
Location: 15th Floor, Northwest Tower
Elective Contact: Lisa Wetzel, 454-8762
Other Information: Students should page Pulmonary Consult Fellow, 7:30 a.m. first day of elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, 37, and 41.

Students will acquire skills in the evaluation and management of patients with pulmonary diseases and in the interpretation of pulmonary function tests. They will gain experience in outpatient Lung Center and attend regular pulmonary and critical care medicine conferences.

Student time distribution: Inpatient 60%, Outpatient 20%, Conferences/ Lectures 20%; Subspecialty Care 100%
Major teaching responsibility: Multiple attendings, fellows and residents
Patients seen/weekly: 20
On call/weekend responsibility: None

**M25 882 PULMONARY MEDICINE — ST. LOUIS VA MEDICAL CENTER**
Instructor(s): Carlos Daughaday, M.D., 289-6306
Location: St. Louis VA Medical Center — John Cochran Division
Elective Contact: Carlos Daughaday, M.D., 289-6306
Other Information: Students meet in 6C-MICU St. Louis VA Medical Center, 7:30 a.m. first day of elective.
Enrollment limit per period: 2
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.
Students will participate in several ambulatory care activities of the Pulmonary Section, including outpatient consultations of common respiratory disorders such as COPD, obstructive sleep apnea, lung cancer and tuberculosis, and follow-up of primary care patients with pulmonary disease. In addition, students will round in medical intensive care units, interpret pulmonary function tests, participate in bronchoscopy and attend scheduled teaching conferences of the Pulmonary Division.

Student time distribution: Inpatient 30%, Outpatient 50%, Conferences/Lectures 20%; Subspecialty Care 100%
Major teaching responsibility: Several attendings
Patients seen/weekly: 6-10 (by student)
On call/weekend responsibility: None

**M25 884 BONE MARROW TRANSPLANTATION AND STEM CELL BIOLOGY**
Instructor(s): John F. DiPersio, M.D., Ph.D., 362-9339
Location: Bone Marrow Transplant Unit 13-100
Elective Contact: John F. DiPersio, M.D., Ph.D., or Kimberly Kuehler, 454-8306
Other Information: Students meet in the Bone Marrow Transplant Unit, 8:30 a.m. first day of elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

Intense four-week clinical rotation exposing interested fourth-year medical students to the clinical world of bone marrow transplantation and to the basic science of hematopoiesis, leukemia and stem cell biology. Students will be primarily responsible for the care of autologous and allogeneic BMT recipients and those patients being treated for a variety of hematologic malignancies such as AML, ALL, multiple myeloma and Non-Hodgkin’s Lymphoma. In addition they will be exposed to methods of stem cell harvest, cryopreservation and immunophenotyping. This rotation plans to provide motivated students with an ideal mix of clinical medicine and basic science.

Student time distribution: Inpatient 60%, Outpatient 20%, Conferences/ Lectures 20%; Subspecialty Care 100%
Major teaching responsibility: Attending on service as well as all BMT physicians
Patients seen/weekly: 10-20
On call/weekend responsibility: None

**M25 885 OCCUPATIONAL/ENVIRONMENTAL MEDICINE**
Instructor(s): Bradley Evanoff, M.D., M.P.H., 454-8638
Location: 1st Floor, Wohl Hospital Building
Elective Contact: Bradley Evanoff, M.D., M.P.H., 454-8638
Other Information: Students should meet on First Floor, Wohl Hospital Building, 9 a.m. first day of elective.
Enrollment limit per period: 1 (2, by special arrangement)
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41. (Students may take this elective for up to 12 weeks.)

This elective is designed to introduce students to research and practice in the prevention of work-related injuries and illnesses, and prevention of health effects related to environmental exposures. Preventive activities will include work site visits and intervention projects, as well as involvement with work site health promotion and policy making. Research projects involve epidemiology and intervention projects in work-related injury and musculoskeletal disorders. Specific activities are flexible depending on the students’ interests.

Students may elect to participate in the Interdisciplinary Environmental Clinic at Washington University. Based in the law school, the clinic involves interdisciplinary teams of students (law, engineering, environmental science) taking principal responsibility, under faculty supervision, for cases and projects on behalf of environmental and community organizations. The medical student(s) assist clinic students by evaluating the human health impacts involved in one or more of the clinic’s cases, and presenting such
information to the client organization(s) and others. Among the cases on which medical students might participate are: (1) air pollution associated with factories in the St Louis metropolitan area; (2) lead poisoning of children and adults in St. Louis and surrounding towns; (3) air and water pollution caused by concentrated animal feeding operations (factory farms) in Missouri. Students choosing this option will work with the Environmental Clinic staff and with Dr. Evanoff to evaluate and present evaluations of human health impacts of environmental exposures.

Student time distribution: Conferences/Lectures 10%, Policy activities/Research 90%; Subspecialty Care 100%
Major teaching responsibility: Attending
Patients seen/weekly: 10
On call/weekend responsibility: None

M25 887 CLINICAL CARDIOVASCULAR MEDICINE
Instructor(s): Thomas F. Martin, M.D., F.A.C.C.; and Timothy J. Martin, M.D., F.A.C.C., C.C.D.S., (573) 308-1301
Location: Phelps County Regional Medical Center, Rolla, MO
Elective Contact: Annette Wells, (573) 308-1301 awells@dom.wustl.edu
Other Information: Students should arrive at Washington University Heart Care Institute in Rolla, 1050 W. 10th Street, Suite 500 at 8 a.m. the first day of elective, and will be escorted to the unit where Dr. Martin is rounding.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 25, 29, 33, and 37.
Clinical cardiology with some internal medicine in a rural setting. Inpatient and outpatient care. Diagnostic testing. Device implants and follow-up care. Cardiac catheterization. Peripheral vascular angiography and intervention. Room and board provided.

Student time distribution: Inpatient 50%, Outpatient 50%; Subspecialty Care 100%
Major teaching responsibility: Attending
Patients seen/weekly: 100
On call/weekend responsibility: None

M25 890 CLINICAL NEPHROLOGY
Instructor(s): Steven Cheng, M.D., 362-3204
Location: Chromalloy American Kidney Center, Barnes-Jewish Hospital
Elective Contact: Ene Stubenrouch, 362-7211
Other Information: Students meet in the Acute Dialysis Center, Division 14300, Barnes-Jewish Hospital, 8 a.m. first day of elective. Ask for the renal fellow on the consult service.
Enrollment limit per period: 2
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.
Students assist in both the inpatient and outpatient areas to diagnose patients with acute and chronic renal failure, glomerulonephritis and electrolyte disorders. The student is a full member of the inpatient renal consult service, diagnosing and treating patients with acute and chronic renal disease and electrolyte disorders. Students will learn electrolyte management, drug dosing, dialysis procedures and complications, kidney biopsy reading, and the management of acute and chronic renal failure. Students are also encouraged to spend two or three half-days in the outpatient center rotating to the General Renal Clinics and the Transplant Clinic. Throughout the rotation, students work closely with an attending and a renal fellow.

Student time distribution: Inpatient 80%, Outpatient 10%, Conferences/Lectures 10%; Primary Care 20%, Subspecialty Care 80%
Major teaching responsibility: Three attendings and three renal fellows
Patients seen/weekly: Four consults per week
On call/weekend responsibility: Saturday a.m. rounds desirable but not required
M25 893 ADULT ALLERGY AND CLINICAL IMMUNOLOGY
Instructor(s): H. James Wedner, M.D., 454-7376
Location: 15th Floor, Northwest Tower
Elective Contact: Jill Munoz, 454-7376
Other Information: Students meet Kristy Smith in the Allergy and Immunology division office, 15th Floor, Northwest Tower, 8 a.m. first day of elective.
Enrollment limit per period: 2
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

Students will participate in the allergy consult service at Barnes-Jewish Hospital, North and South Campuses. The student will serve as the primary allergy consult for inpatient and Emergency Room consultation and present each patient to the allergy fellows on call and the attending physician. Students will attend The Adult Allergy Clinic, Pediatric Allergy Clinic, and the outpatient clinics at The Asthma & Allergy Center at Barnes-Jewish West County Hospital. Conferences on selected topics in allergy and clinical immunology will be held with the attending staff two to three afternoons a week.

Student time distribution: Inpatient 10%, Outpatient 75%, Conferences/Lectures 15%; Subspecialty Care 100%
Major teaching responsibility: Attending and staff
Patients seen/weekly: 12
On call/weekend responsibility: Optional

M80 809 AMBULATORY CARE — JACQUELINE MARITZ LUNG CENTER
Instructor(s): Daniel Rosenbluth, M.D., 454-8762
Location: Barnes-Jewish Hospital, North Campus, Lung Center, Eighth Floor CAM
Elective Contact: Lisa Wetzel, 454-8762
Other Information: Students meet in the Lung Center, Eighth Floor CAM, Barnes-Jewish Hospital, North Campus, 8 a.m. first day of elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 17, 21, 25, 29, 33, 37, and 41.

The Jacqueline Maritz Lung Center houses the ambulatory care activities of the Divisions of Pulmonary Medicine, Thoracic Surgery and Allergy/Immunology, as well as the pulmonary function laboratory. The student will rotate through (1) both general pulmonary and subspecialty clinics in Pulmonary Medicine (cystic fibrosis, transplantation, emphysema, etc.), (2) Thoracic Surgery clinic, (3) Allergy/Immunology clinic, and (4) interpretation of pulmonary function tests. Chest imaging is also emphasized in the evaluation process. The rotation can be streamlined to meet areas of emphasis desired by individual students.

Student time distribution: Outpatient 100%, Conferences/Lectures 3-5/week; Primary Care 15%, Subspecialty Care: 85%
Major teaching responsibility: Multiple attendings
Patients seen/weekly: >20
On call/weekend responsibility: None

Research

(M25 900)

Dana R. Abendschein, Ph.D., 9924 Clinical Sciences Research Building, 362-8925. Research in this translational physiology laboratory is focused on development of novel antithrombotic approaches for use during acute myocardial infarction, stroke and surgery where vascular injury is an underlying mechanism. Current studies are designed to define the efficacy of targeting antithrombotics to the surface of injured vascular cells and activated platelets on thrombus progression. One approach uses nanoparticles covered with epitopes to bind exposed receptors on thrombus and containing inhibitors of coagulation or platelet activation. Students will be expected to participate in experiments using animal
models and will develop skills in experiment design, vascular physiology, clinical antithrombotic therapy, coagulation, histopathology and statistics.

John P. Atkinson, M.D., 10th Floor Clinical Sciences Research Building, 362-8391. A clinical research elective is offered in evaluation of patients with complement deficiency states and undiagnosed rheumatic disease syndromes.

Roberto Civitelli, M.D., 502-3 Yalem, and Seventh Floor Steinberg Building, North Campus, 454-8408. The biology of cell-cell interactions and communication in bone via gap junctions and cell adhesion molecules. Function of connexins and cadherins in transcriptional control of osteoblast differentiation, osteoclastogenesis, and mechanotransduction. Modulation of mesenchymal lineage allocation and osteogenic differentiation by cadherins and beta-catenin signaling.

Philip E. Cryer, M.D., 6609 Wohl Clinic, 362-7635. Studies of the physiology of glucose counterregulation and its pathophysiology, and relation to clinical hypoglycemia, in people with diabetes.

Nicholas O. Davidson, M.D., 910 CSRB North Tower, 362-2027. Genetic pathways for nonalcoholic fatty liver disease (NAFLD) and colorectal cancer development. We have two major areas of research interest. Our laboratory is interested, first, in the molecular mechanisms of hepatic steatosis, and the pathogenesis of NAFLD. This is the most prevalent liver disease in the U.S., likely affecting a quarter of the population. We have generated genetically manipulated mouse strains that offer insights into the mechanisms of hepatic steatosis. The student would work as part of a team, designing and conducting experiments that will test hypotheses concerning the mechanisms and consequences of hepatic steatosis. These studies will primarily involve mouse genetics, examining the expression of candidate genes under a variety of nutritional and pharmacologic settings that modulate hepatic lipid metabolism. In addition, we are using microarrays to study the spectrum of genetic changes that may predict the extent of hepatic lipid accumulation in patients with steatohepatitis. Our goal is to test hypotheses using mouse genetics and to extend these studies to examine the same pathways in humans with NAFLD. Our second area of interest concerns the genetic pathways involved in colorectal cancer, the second leading cause of cancer-related deaths. We have developed a novel strain of mice in which the dominant effects of mutations in the APC tumor suppressor gene have been abrogated through deletion of an RNA binding protein, apobec-1. This deletion has a major effect on the expression of cox-2, abrogating the increase in expression seen in human colonic adenomas and wild type mouse intestinal adenomas. These findings suggest that apobec-1 is a genetic modifier of colon cancer development. We will study the importance of apobec-1 expression in human colon cancer specimens and continue our murine genetic studies of this novel pathway for modulating colon cancer development and progression.

Thomas M. DeFer, M.D., tdefer@dom.wustl.edu, 6604 Wohl Hospital Building, 362-8050, Special Projects in Medical Education. Through special arrangement with and approval by the Course Master, fourth-year students will participate in special projects in medical education. Typical projects will require approximately four weeks to complete. These four weeks can occur consecutively (preferred) or be spread out somewhat as needed. Medical education projects should be aimed at improving the curriculum, student experience and/or administration of the Internal Medicine Clerkship or the Subinternship. Interested students should contact the Course Master via phone or email to discuss the proposed project. Those who are interested but would like guidance in designing a project should also contact the Course Master. This is open only to Washington University School of Medicine students.

Matthew Ellis, MB, BChir, Ph.D., Room 724, Southwest Tower, 747-3613. Genomics of Breast Cancer. The demonstration that the HER2 gene was amplified in breast cancer heralded the "genomic era" for this disease, which ultimately led to major clinical advances for HER2-positive disease. The HER2 discovery was based on a search for cancer specific anomalies in the cellular homologs of the acutely transforming retroviral oncogenes described in birds and mammals. However, HER2 gene amplification is now recognized to be only one of a large number of somatic mutations that occur in breast cancer. In the last
10 years, my clinical and laboratory efforts have focused on the development of a luminal (hormone receptor positive) breast cancer genome atlas to elucidate the complexity of the somatic changes in the breast cancer genome responsible for tumors resistant to current therapies. During these efforts we established a body of work on the practice of treating postmenopausal women with large palpable hormone receptor-rich tumors with four months of an aromatase inhibitor. The ultimate scientific goal of these efforts is to create specimen banks and biomarker data from thousands of patients to create sufficient statistical power to robustly link genomic screens to clinical outcomes so we can eventually focus our basic science efforts on the most lethal genetic events.

Over the last year, we have undertaken a comprehensive analysis of the tumor samples accrued, including "whole genome" gene expression chips, high resolution array comparative hybridization analysis and candidate gene sequencing. The gene lists we are currently generating, particularly those from the marriage of expression profiling and array comparative hybridization, suggest a host of new therapeutic targets are ready to be exploited. Functional characterization of these genes has begun, and this effort is a major focus in the laboratory. Elective students will focus on projects that relate to individual oncogene candidates. The scope of the project will be commensurate with elective time commitment, but participation may include interpretation of genomic data, confirmatory studies on gene overexpression in cell lines and tissues and functional studies using gene transfer, gene knock-down and pharmacological targeting to verify the identity of bone fide therapeutic targets for further investigation. Attendance at weekly lab meetings is expected.

Bradley Evanoff, M.D., M.P.H., 454-8638. Occupational medicine epidemiology research. My research involves the use of epidemiology methods to characterize associations between diseases and work-related exposures. I am also doing studies that evaluate the detection and treatment of work-related musculoskeletal diseases. During an elective in occupational medicine epidemiology research, students will learn how to use epidemiologic methods to investigate disease processes by working on a mutually agreed-on topic of interest related to occupational diseases. Other activities can include work site visits and intervention projects, as well as involvement with work site health promotion and policy making. Elective length is variable depending on individual circumstances. Please contact Dr. Evanoff to discuss this research.


Richard W. Gross, M.D., Ph.D., 4525 Scott Avenue, East Building, 362-2690. Lipid mediators of signal transduction in the cardiovascular system. Characterization of regulatory mechanisms responsible for the liberation of lipid second messengers during cellular activation.

Marc R. Hammerman, M.D., 7704 Wohl Clinic, 362-8233. Studies characterizing the transplantation of kidney and pancreatic anlage as a means to "grow new organs" in the settings of end-stage chronic renal failure and diabetes mellitus.

Keith A. Hruska, M.D., Fifth Floor, McDonnell Pediatric Research Building, 286-2772. Our laboratory’s focus is on two aspects of kidney diseases: the progression of chronic kidney disease (CKD) and the syndrome of the CKD-mineral bone disorder (CKD-MBD). The latter is an important cause of mortality associated with CKD. We have discovered the pathogenesis of the CKD-MBD in early stage 2 CKD. We have ongoing studies of CKD stimulated vascular calcification in which we have discovered the mechanism of atherosclerotic palque calcification stimulated by phosphorus. We are analyzing phosphorus as a cardiovascular risk factor, and new therapies for chronic kidney disease, the CKD-MBD and vascular calcification.

Sandor J. Kovacs, Ph.D., M.D., 9965 Clinical Sciences Research Building, 362-8901. For students with math, physics and engineering background. Cardiovascular biophysics research elective concentrates on physiologic modeling and comparison of model predictions to in vivo human data. Minimum of eight weeks of elective time.

Jack Ladenson, Ph.D., 454-8436. Development of monoclonal and single-chain antibodies for use in research and in diagnostic testing.

Marc S. Levin, M.D., and Deborah C. Rubin, M.D., 922/924 Clinical Sciences Research Building, 362-8933, 362-8935. Students will be members of a collaborative research team headed by Drs. Levin and Rubin (Department of Medicine) investigating the mechanisms underlying the intestinal adaptive response that occurs to compensate for loss of functional small intestine. A second project focuses on epithelial-mesenchymal interactions and their role in regulating gut epithelial proliferation carcinogenesis and the normal and cancer stem cell niche. Specific mechanisms under investigation include the role of retinoids and nuclear receptor signaling and the function of an immediate early gene Tis7 on gut adaptation following resection or injury. The role of myofibroblast protein epimorphin in regulating cell proliferation and colon carcinogenesis is being explored. The student will have the opportunity to learn basic molecular biology and physiology as it relates to small intestinal growth and function. Examples of techniques that are used in these studies include small-animal surgery and colitis and cancer models (mice and rats), molecular biological techniques including PCR, Northern blotting, vector construction for production of transgenic and knockout mouse models, in situ hybridization and immunohistochemistry.


Jeffrey D. Milbrandt, M.D., Ph.D., 101 Biotechnology Center, 362-4650. We have several ongoing projects in our laboratory. (1) The biological function of the GFL family of neurotrophic factors (GDNF, neurturin, persephin and artemin) that signal through a receptor complex containing the Ret tyrosine kinase. These factors promote survival of multiple neuronal populations including dopaminergic neurons, which degenerate in Parkinson’s disease, motor neurons, which are affected in Lou Gehrig’s disease and most neurons of the peripheral nervous system. (2) The biological roles of Egr2/Nab2 in regulating the Schwann cell myelination program and how abnormal function of these transcription factors result in peripheral neuropathies. (3) The development of prostate cancer, especially the role of Egr1 in regulating the PIN to invasive carcinoma transition and the role of the Nkx3.1 homeodomain protein in tumor initiation.

Jason C. Mills, M.D., Ph.D, Room 1030 CSRB North Tower, 362-4213. We investigate the differentiation of epithelial stem cells in the upper GI tract. We study how genes regulate differentiation in mouse models and in vitro in tissue culture, and we correlate our findings with human tissue specimens. Specific projects include: (1) understanding how inflammation leads to aberrant differentiation (metaplasia), which is a precursor for cancer; (2) elucidating how master regulatory transcription factors like Xbp1 and Mist1 coordinate the massive cytoskeletal and organellar expansion of specialized secretory cells as they differentiate from stem cells; and (3) comparing and contrasting the roles of Xbp1 and Mist1 in development of plasma cells (where both genes are also expressed) and in gastrointestinal secretory cells.

Stanley Misler, M.D., Ph.D., 815 Yalem Research Building, Barnes-Jewish Hospital, 454-7719. Stimulus-secretion coupling in endocrine cells (B-islet cells and adrenal chromaffin cells) examined using single-cell assays of secretion (capacitance measurements, amperometry).
Michael Mullins, M.D., and Lawrence M. Lewis, M.D., mullinsm@wusm.wustl.edu, 747-5585 or Lisa Hayes, hayesli@wusm.wustl.edu, 362-4362. Emergency Medicine Clinical Research. Emergency medicine clinical research involves the gamut of research designs ranging from retrospective cohort studies (The Use of B Hydroxy Butyrate Point-of-Care Testing in Diabetic Ketoacidosis), to prospective clinical trials (Biomarkers in Traumatic Brain Injury), to the evaluation of health care systems and emergency department processes (A Comparison of the Canadian Triage Acuity Scale to the Emergency Severity Index to Detect Serious Time-sensitive Medical Conditions), to analyzing health policy issues (Rate of Follow-up to a Primary Care Clinic and Subsequent Emergency Department Utilization among an Urban ED Population). Students will learn the basic clinical research designs and will be able to articulate the benefits and drawbacks of each. They will be involved in hypothesis generation and study design for projects that are at that stage. For ongoing projects, they will learn about the informed consent process and be involved in screening for study subjects and subject selection and enrollment. They will be allowed to consent for studies judged to be minimal risk. Students will be taught important rules regarding data acquisition and entry, particularly as it relates to standards that have been set for the medical literature. They will learn about bias and inter-rater reliability. Students will participate in data entry, data analysis and subsequent abstract/manuscript preparation based on their level of interest and ability for time commitment. Students will meet weekly with one of the course masters to discuss study progress and to identify any roadblocks to study completion. These meetings will also serve as a forum for one-on-one education of the student regarding study methodology, ethical issues in research and various resources available to the clinical researchers at Washington University.

Ginger E. Nicol, M.D., 4412 Renard Hospital, 362-5939. Clinical research concerning substrate (glucose and lipid) metabolism and the regulation of weight and body composition in persons with mental illness, particularly concerning the effect of psychotropic medications. This elective offers the student a broad exposure to clinical research protocols, including protocols in adults and children. Students will have an opportunity to focus on a particular project of interest.

Richard E. Ostlund, M.D., 8804 Wohl Hospital Building, 362-8286. Our laboratory focuses on the prevention and treatment of coronary heart disease by studying cholesterol absorption, detoxification and elimination from the body. Direct patient studies that use new stable isotopic cholesterol tracers and mass spectrometry techniques complement in vitro work on the biochemistry of cholesterol transport in cultured cells.

M. Alan Permutt, M.D., Fifth Floor, Wohl Hospital Building, 362-8680 or 249-8683. Studies are being conducted to define the genetic susceptibility to diabetes in humans and experimental animal models. Lab methods include DNA sequencing, genotyping genetic variants in genomic DNA, creation of transgenic animals and characterization of expression levels in various tissues through analysis of RNA and protein. Another important activity is the elucidation of mechanisms involved in pancreatic islet beta cell failure to produce insulin in type 2 diabetes. Here we study insulinoma cells in culture, isolated islets and mice created to overexpress or eliminate critical genes involved in insulin production and secretion.

Katherine Ponder, M.D., 8818 Cancer Science Research Building, 362-5188, kponder@wustl.edu. Gene Therapy for Lysosomal Storage Diseases. Our laboratory is interested in using gene therapy to treat lysosomal storage diseases such as mucopolysaccharidosis (MPS). We have developed a retroviral vector that can be efficiently delivered to the liver of mice and dogs, and results in expression that is sufficient to reduce many of the clinical manifestations of these genetic diseases. Current studies focus upon assessing the therapeutic effect of gene therapy on sites that are affected in MPS such as the heart, aorta, bones and joints, and developing vectors that might be translated into human patients. In addition, we are evaluating the pathogenesis of disease in MPS, which appears to involve the upregulation of degradative proteases in the aorta and possibly other sites. A better understanding of the pathogenesis of disease might result in additional therapies for MPS.

Clay F. Semenkovich, M.D., Eighth floor, Southwest Tower, 362-4454. Fatty acid metabolism and its role
in atherosclerosis, diabetes, hypertension and obesity. The modulation of respiratory uncoupling for the treatment of aging, obesity and vascular disease.

Phyllis K. Stein, Ph.D., Room 13116 Northwest Tower, 286-1350. Clinical Significance of Heart Rate Variability and ECG-Derived Waveform Parameters Obtained from Continuous Ambulatory Monitoring. This elective affords the opportunity to perform research in heart rate variability or in other measurements, like QT variability or T-wave alternans that can be derived from continuous ECG monitoring from Holter recordings or polysomnography recordings in the sleep lab. One area of active research is the identification of heart rate patterns associated with obstructive and central sleep apneas and hypopneas and the relationship of previously unappreciated cycling heart rate patterns and outcomes. Data are also available from mice. Many possible projects are available using our many large existing datasets, using the thousands of stored studies in the sleep lab or involving de novo data collection in a clinical or animal population. Also, many possible directions for this research are available from applying traditional and nonlinear HRV to different populations, developing methods to quantify ultradian heart rate variability patterns, to developing novel ECG analysis techniques, etc. Also, we are involved with the Cardiovascular Health Study (CHS), a large population-based longitudinal study of risk factors for heart disease and stroke among community-dwelling people >65 years old. There is a subset of this population who had Holter recordings (~1400 at baseline, ~800 of the same people five years later, and ~370 minority subjects recorded at the same time as the second CHS recording). These recordings have already been analyzed by us, so there is a large amount of heart rate variability and heart rate pattern data available. There is also a subset of the CHS and of another study (EPHESUS) who are known to have died suddenly, and we have developed a matched control group in order to examine ECG-based differences in those who died suddenly. We also have electronic sleep studies at two time points for about 300 of the CHS Holter participants who also participated in the Sleep Heart Health Study. We are also analyzing an additional ~1500 sleep studies from CHS participants who did not have Holter recordings. Thus, there is also an opportunity in the CHS dataset for studies on the relationship of heart rate variability and changes in heart rate variability over time and a huge number of clinical and demographic factors among the elderly. Currently we are studying the relationship of Holter-based HRV and sleep apnea patterns to the development of atrial fibrillation post-cardiac surgery and collaborating in a study of treatment of depression in treatment-resistant depressed post-MI patients, a study of sickle cell patients and one of heart rate variability and echo parameters in elderly African Americans.

Dwight A. Towler, M.D., Ph.D., 514 Yalem Research Building, Barnes-Jewish Hospital, North Campus, 454-7434. Tremendous unmet needs exist in musculoskeletal medicine. Osteoporosis and osteoarthritis are recognized as common and clinically important, but other serious skeletal disorders also afflict our society. In the setting of type 2 diabetes mellitus (T2DM), lower-extremity musculoskeletal disease is prevalent, costly and exceedingly difficult to manage, with fracture, arthropathy, ischemia, ulcer, infection and amputation commonly confronting patients and clinicians. Aortofemoral medial artery calcification is a strong predictor of risk for lower-extremity amputation in patients with T2DM. While not occluding the lumen, mural elastinolysis and medial calcification compromise arterial elasticity — a material property necessary for Windkessel physiology that ensures normal tissue perfusion throughout the cardiac cycle. Peripheral arterial disease is also associated with higher rates of hip bone loss and increased fracture risk in the elderly diabetic patient. During diabetic arterial calcification, the Msx2-Wnt signaling cascade that controls orthotopic craniofacial bone formation is activated ectopically in the aortic valve and vessel wall. Diabetes and reactive oxygen species induce expression of Msx2 in arterial myofibroblasts, upregulate aortic Wnt gene expression and activate pro-calcific and pro-fibrotic canonical Wnt signaling in the valve and tunica media. By studying Msx2 actions, we have identified that paracrine Wnt/Dkk signals control arteriosclerosis T2DM by regulating myogenic and osteogenic lineage allocation of vascular mesenchymal progenitors. Inflammatory redox cues initiated by TNF-alpha and osteopontin (OPN) modulate the activation of this arterial injury response, which appears to be sustained by myofibroblast mitochondrial dysfunction. We now study how strategies that target vascular Wnt and OPN signaling regulate diabetic arteriosclerosis, arterial compliance (ex vivo video microplethysmography) and lower extremity perfusion (laser Doppler perfusion imaging) in diabetic vascular disease.

John Turk, M.D., Ph.D., Eighth Floor, Southwest Tower, 362-8190. Phospholipid signaling mechanisms in
pancreatic islets. Experience in mass spectrometric analysis of complex lipids is available.

H.J. Wedner, M.D., 5002 Steinberg Pavilion, Barnes-Jewish Hospital, North Campus, 454-7937 or 454-7377. Asthma Care in the Inner City. Students will participate in ongoing studies of the delivery of asthma care to inner-city children and adults. The emphasis will be on direct contact between the asthmatic patients and the student, along with an asthma counselor.

H.J. Wedner, M.D., 5002 Steinberg Pavilion, Barnes-Jewish Hospital, North Campus, 454-7937 or 454-7377. Biology of pollen and fungal allergens. Our laboratory has been characterizing the important allergic proteins from molds and pollen. The allergens are identified using skin test-sensitive individuals, and the proteins are isolated and characterized by a combination of physiochemical and molecular biological techniques. These studies should lead to better forms of allergy immunotherapy. Students will participate in the isolation, characterization and modification of major allergens from a number of molds including Stachybotrys atata, Epicoccum nigrum and several pollens including those from white oak and Parthenium hysterophoros, a newly recognized allergen.

Faculty

Victoria J Fraser, MD  Head of the Department of Internal Medicine
Elliot Efrem Abbey, MD  Professor of Clinical Medicine
Camille N. Abboud, MD  Professor of Medicine
Basem Abdeen, MD  Instructor in Clinical Medicine
Shadi Abdelnour  Instructor in Clinical Medicine
Dana Ray Abendschein, PHD  Associate Professor of Medicine
Barry K Abramson, MD  Instructor in Clinical Medicine
Nada A Abumrad, PHD  Robert C Atkins Professor of Obesity Research in Medicine
Tracy Adair-Kirk, PHD  Research Assistant Professor of Medicine
Susan R Adams, MD  Instructor in Clinical Medicine
Tara Joshi Adhikari, MBBS  Instructor in Medicine
Douglas R Adkins, MD  Professor of Medicine
Kelly Lynn Agarwal, MD  Instructor in Medicine
Arpit Agrawal, MD  Instructor in Medicine
Abdulla Akfaly, MD  Instructor in Clinical Medicine
Belal Outhman Al Khiami, MD  Instructor in Medicine
Bassam Albarcha, MD  Instructor in Clinical Medicine
Jorge M Alegre, MD  Instructor in Clinical Medicine
Muhammad A Ali, MD  Instructor in Clinical Medicine
Zarmeena Ali, MBBS  Instructor in Medicine
David Hershel Alpers, MD  William B Kountz Professor of Gerontology in Medicine
Abeer Said Alqaisi, MD  Instructor in Clinical Medicine
Luciano C. Amado, MD  Assistant Professor of Medicine
Jamaluddin Faisal Amanullah  Instructor in Clinical Medicine
Amit P. Amin, MD  Assistant Professor of Medicine
Milan J. Anadkat, MD Assistant Professor of Medicine (Dermatology)
Frank Kim Anderson, MD Instructor in Clinical Medicine (Dermatology)
Scott J Anderson, MD, PHD Instructor in Clinical Medicine
George Aansstas Instructor in Clinical Medicine
Anna Maria Arroyo Plasencia, MD Instructor in Medicine
Saira M Asadullah, MD Instructor in Clinical Medicine
Phillip V. Asaro, MD Assistant Professor of Emergency Medicine in Medicine
Jeffrey Jay Atkinson, MD Assistant Professor of Medicine
John Patterson Atkinson, MD Samuel Grant Professor of Medicine
Crystal Lynn Atwood, MD Instructor in Medicine
Chandra Aubin, MD Associate Professor of Emergency Medicine in Medicine
Vorachart Auethavekiat, MD Assistant Professor of Medicine
James G Avery, MD Associate Professor of Clinical Medicine
Riad Azar, MD Associate Professor of Medicine
Hilary M Babcock, MD, MPH Assistant Professor of Medicine
Richard G. Bach, MD, MS Associate Professor of Medicine
Leonard B Bacharier, MD Professor of Medicine
Maria Quintos Baggstrom, MD Assistant Professor of Medicine
Om Parkash Bahl, MS Assistant Professor of Clinical Medicine
Thomas C Bailey, MD Professor of Medicine
Gregory Eden Baker, MD Instructor in Clinical Medicine
Fred J Balis, MD, MS Assistant Professor of Clinical Medicine
David Ban, MD Associate Professor of Clinical Medicine
James William Banks, MD Instructor in Clinical Medicine
Abraham Barake, MD Associate Professor of Clinical Medicine
Thomas J Baranski, MD, PHD Associate Professor of Medicine
Peggy Barco, MED Instructor in Medicine
Rachel Hannah Bardowell, MD Instructor in Medicine
Philip M Barger, MD Assistant Professor of Medicine
Ernie-Paul Barrette, MA, MD Associate Professor of Medicine
Thomas Joseph Bartholet, MD Instructor in Clinical Medicine
Nancy Lee Bartlett, MD, MS Koman Professor of Medical Oncology in Medicine
Robert W Barton, MD, PHD Assistant Professor of Clinical Medicine
Frederick D Bauschard, MD Assistant Professor of Clinical Medicine (Dermatology)
Daniel B Bauwens, MD Instructor in Clinical Medicine
Michael D Bavlsik, MD Assistant Professor of Clinical Medicine
Rebecca Ann Bavolek, MD Instructor in Emergency Medicine in Medicine
Susan Joy Bayliss, MD Professor of Medicine (Dermatology)
Richard C Bell, MD Instructor in Clinical Medicine (Dermatology)
C. Elliott Bell Jr, MD Instructor in Clinical Medicine
William Waite Benedict, MD  Instructor in Clinical Medicine
Susan Berdy, MD  Assistant Professor of Clinical Medicine
Daniel Ralph Berg, MD  Assistant Professor of Clinical Medicine
Douglas E Berg, PHD  Professor of Medicine
Michael A Berk, MD  Professor of Clinical Medicine
Carlos Bernal-Mizrachi, MD  Assistant Professor of Medicine
Aaron M Bernstein, MD  Assistant Professor of Clinical Medicine
Keith A Bernstein, MD  Instructor in Clinical Medicine
Marc Jordan Bernstein, MD  Associate Professor of Clinical Medicine
Douglas R Berson, MD  Instructor in Clinical Medicine
Anita R. Bhandiwad, MD  Assistant Professor of Medicine
Henish Ashish Bhansali, MD  Instructor in Medicine
Mythili C. Bharadwaj  Instructor in Clinical Medicine
Rakhee Kapadia Bhayani, MD  Assistant Professor of Medicine
Stanley I Biel, MD  Instructor in Clinical Medicine
Joseph John Billadello, MD  Associate Professor of Medicine
Ellen F Binder, MD  Associate Professor of Medicine
Aaron Birenbaum, MD  Assistant Professor of Clinical Medicine
William D Birenbaum, MD  Instructor in Clinical Medicine
Clifford Allen Birge, MD  Assistant Professor of Clinical Medicine
Stanley J Birge, MD  Associate Professor of Medicine
Thomas M Birkenmeier, MD  Assistant Professor of Medicine
Kumar Sanjeev Bishnupuri, MS, PHD  Research Instructor in Medicine
Valerie Blanc, MS, PHD  Research Instructor in Medicine
Melvin S Blanchard, BBA, MD  Associate Professor of Medicine
Melvin S Blanchard, BBA, MD  Director of Residency Program, Department of Internal Medicine
Richard Bligh, MD  Instructor in Clinical Medicine
Morey A Blinder, MD  Associate Professor of Medicine
Donald Allen Blum  Assistant Professor of Clinical Medicine
Imre Bodo  Adjunct Instructor in Medicine
Michael Bolger  Instructor in Clinical Medicine
Matthew James Bonzelet, MD  Instructor in Clinical Medicine
Jonathan S Boomer, PHD  Research Instructor in Medicine
Adrianus C Boon, MS, PHD  Assistant Professor of Medicine
Benjamin A Borowsky, MD  Professor of Clinical Medicine
Jonathan D Bortz, MD  Instructor in Clinical Medicine
Ron Bose, MD, PHD  Assistant Professor of Medicine
Matthew S Bosner, MD  Assistant Professor of Clinical Medicine
Anne M Bowcock, PHD  Professor of Medicine (Dermatology)
William G Bowen, MD  Associate Professor of Clinical Medicine
Lewis Robert Chase, MD Professor of Medicine
Alexander Chi Chen, MD Assistant Professor of Medicine
Chien-Huan Chen, MD, PHD Assistant Professor of Medicine
Edward C. Chen, MD Instructor in Clinical Medicine
Feng Chen, PHD Associate Professor of Medicine
Jane Chen, MD Associate Professor of Medicine
Junjie Chen, PHD Research Instructor in Medicine
Phyllis Chen, MD Instructor in Clinical Medicine
Qing Chen, MD, MS Instructor in Clinical Medicine
Ying Chen, MD, PHD Assistant Professor of Medicine
Zhouji Chen, MS, PHD Research Assistant Professor of Medicine
Steven Chih Nung Cheng, MD Assistant Professor of Medicine
Su-Li Cheng, MS, PHD Research Associate Professor of Medicine
Praveen R Chenna, MBBS Instructor in Medicine
Jaebok Choi, BE, MS, PHD Research Assistant Professor of Medicine
Philip Chu Pak-Yu, MD Instructor in Clinical Medicine
Duck Sung Chun, MD Instructor in Clinical Medicine
Jeffrey Peter Ciaramita Instructor in Clinical Medicine
Matthew Aaron Ciorba, MD Assistant Professor of Medicine
Geoffrey Cislo, MD Assistant Professor of Medicine
Roberto Civitelli, MD Sydney M and Stella H Schoenberg Professor of Medicine
David B Clifford, MD Professor of Medicine
Dorothy Jean Cline, MD Instructor in Clinical Medicine (Dermatology)
James Close, MD Instructor in Clinical Medicine
William Edward Clutter, MD Associate Director of the House Staff Training Program, Department of Internal Medicine
William Edward Clutter, MD Associate Professor of Medicine
Shari J Cohen, MD Assistant Professor of Clinical Medicine
Brian G Cohn, MD Instructor in Emergency Medicine in Medicine
Susan R Colbert-Threats, MD Assistant Professor of Clinical Medicine
Graham A Colditz, DRPH, M PH, MBBS Professor of Medicine
Danita L Cole, MD Instructor in Clinical Medicine
Patricia L Cole, MA, MD Associate Professor of Clinical Medicine
Roger Barto Cole, MD, MS, PHD Instructor in Clinical Medicine
Lloyd W Coleman, MS, PHD Research Instructor in Medicine
Laura Ann Colletti-Mann, MD Associate Professor of Medicine (Pending Executive Faculty Approval)
Marco Colonna, MD Professor of Medicine
Arthur Hamilton Combs, MD Associate Professor of Clinical Medicine
Daniel Horatio Cooper, MD Assistant Professor of Medicine
Ralph Copp Jr, MD Assistant Professor of Clinical Medicine
Lynn Anne Cornelius, BN, MD Winfred A and Emma R Showman Professor of Dermatology in Medicine
John Bernard Costello, MD Instructor in Clinical Medicine
Martha Laurin Council, MD Assistant Professor of Medicine (Dermatology) (Pending Executive Faculty Approval)
Daniel W Coyne, MD Professor of Medicine
Johnetta M Craig, MBA, MD Instructor in Clinical Medicine
John Jeffrey Cras, MD, MS Assistant Professor of Medicine
Peter A. Crawford, MD, PHD Assistant Professor of Medicine
Charles Crecelius, MD, PHD Assistant Professor of Clinical Medicine
Sharon Cresci, MD Assistant Professor of Medicine
Stephen R Crespin, MD Associate Professor of Clinical Medicine
Jeffrey S Crippin, MD Professor of Medicine
Philip E Cryer, MD Irene E and Michael M Karl Professor of Endocrinology and Metabolism in Medicine
Phillip S. Cuculich, MD Assistant Professor of Medicine
Robert Culverhouse, MA, PHD Research Assistant Professor of Medicine
David T Curiel, MD, PHD Professor of Medicine
Ann Marie Dale, PHD Research Assistant Professor of Medicine
William H Danforth, MD Professor of Medicine
Erik D. Daniels, MD Instructor in Clinical Medicine
John S Daniels, MA, MD Associate Professor of Clinical Medicine
Rand E Dankner, MD Associate Professor of Clinical Medicine
Maria CristinaDans, MD Assistant Professor of Medicine
Bhajan Shewaldas Dara, MD Instructor in Clinical Medicine
Lakshman Darsi, MBBS Assistant Professor of Medicine
Sundeep Das, MD Instructor in Clinical Medicine
Themistocles Dassopoulos, MD Associate Professor of Medicine
Carlos Colton Daughaday, MD Professor of Medicine
John D Davidson, MD Professor of Clinical Medicine
Nicholas O Davidson, MBBS Professor of Medicine
Victor G Davila-Roman, MD Professor of Medicine
Andrea Jill Davis, MD, MSN Instructor in Clinical Medicine
Thomas M De Fer, MD Professor of Medicine
Lisa De Las Fuentes, MD Assistant Professor of Medicine
Vincent R De Mello, MD, MS Assistant Professor of Clinical Medicine
Anne V Dean, MD Instructor in Clinical Medicine
Angeline Diane DeiSanti, MD Assistant Professor of Medicine
Jennifer A. Delaney, MD Instructor in Clinical Medicine
James Albert Delmez, MD Professor of Medicine
Rowena Bayudan Delos Santos Assistant Professor of Medicine
Bethany L Dement, MD Instructor in Medicine
David G. DeNardo, PHD Assistant Professor of Medicine
Alex Eugene Denes, MD Associate Professor of Medicine
Sunny Desai, MS  Instructor in Clinical Medicine
Anjali Desai Deshpande, MPH, PHD  Research Assistant Professor of Medicine
Vladimir Novak Despotovic, MD  Assistant Professor of Medicine (Pending Executive Faculty Approval)
Robert H Deusinger, MS, PHD  Associate Professor of Medicine
Neelendu Dey, MD  Instructor in Medicine
Michael Diamond, MD, PHD  Professor of Medicine
Judith A Dibble, MD  Instructor in Clinical Medicine
Brian K Dieckgraefe, MD, PHD  Associate Professor of Medicine
Kathryn M Diemer, MD  Associate Professor of Medicine
James A Diestelhorst, MD  Instructor in Clinical Medicine
Li Ding, PHD  Assistant Professor of Medicine
John F Dipersio, MD, PHD  Virginia E and Sam J Golman Professor of Medicine
Marilyn Disch, MD  Instructor in Clinical Medicine
Richard M Divalerio, MD  Instructor in Clinical Medicine
Abhinav Diwan, MD  Assistant Professor of Medicine
Martin A Docherty, MD  Assistant Professor of Emergency Medicine in Medicine
Irl Joseph Don, MD  Associate Professor of Clinical Medicine
James W Donnelly, MD  Instructor in Clinical Medicine (Dermatology)
Balraj Doray, PHD  Research Instructor in Medicine
Gerald W. Dorn II, MD  Philip and Sima K Needleman Professor of Medicine
William H Dribben, MD  Assistant Professor of Emergency Medicine in Medicine
Erik R Dubberke, MD, MPH  Assistant Professor of Medicine
James Matthew DuBois, BFA, M PHIL, PHD  Adjunct Professor of Medicine
Maria C Dumadag-Sabio, MD  Instructor in Clinical Medicine
William C Dunagan, MD, MS  Professor of Medicine
Julia Passyn Dunn, MD, MS  Assistant Professor of Medicine
William Charles Eades Jr, BEE  Research Assistant Professor of Medicine
Dayna S Early, MD  Professor of Medicine
Royal J Eaton, MD  Instructor in Clinical Medicine
Charles S Eby, MD  Professor of Medicine
Steven A. Edmundowicz, MD  Professor of Medicine
Charmaine E. Edwards, MD  Instructor in Clinical Medicine
John R. Edwards, PHD  Assistant Professor of Medicine
Tatiana Efimova, MS, PHD  Assistant Professor of Medicine (Dermatology)
Russell E Eggebrecht, MD  Associate Professor of Clinical Medicine
Ali A Ehsani, MD  Professor of Medicine
Zamir Eidelman, MD  Associate Professor of Clinical Medicine
Arthur Z Eisen, MD, MS  Professor of Medicine (Dermatology)
Seth A Eisen, MD, MS  Adjunct Professor of Medicine
Linda G Eissenberg, PHD  Research Instructor in Medicine
Lamice R. El-Kholy, MS Instructor in Clinical Medicine
John Ellena, MD Associate Professor of Clinical Medicine
Matthew James Ellis, MBBCH, PHD Professor of Medicine
Charlene Ann Ellsworth, MD, PHD Instructor in Clinical Medicine
Jill Elizabeth Elwing, MD Assistant Professor of Medicine
James Michael Epstein, MD Instructor in Clinical Medicine
Neil A Ettinger, MD Assistant Professor of Clinical Medicine
Bradley A Evanoff, M PH, MD Richard A and Elizabeth Henby Sutter Professor of Occupational, Industrial, and Environmental Medicine in Medicine
Alex S Evers, MD Professor of Medicine
Carol Jane Evers, MD Instructor in Clinical Medicine
Gregory A Ewald, MD Associate Professor of Medicine
Elisa Fabbrini, MD, PHD Research Assistant Professor of Medicine
Mitch N Faddis, MD, PHD Associate Professor of Medicine
Akinrinola Fatoki, MS Instructor in Clinical Medicine
Todd A Fehninger, MD, PHD Assistant Professor of Medicine
Yunfeng Feng, MS, PHD Research Instructor in Medicine
Herman L Ferrell, MD Instructor in Clinical Medicine
Brian N. Finck, MS, PHD Assistant Professor of Medicine
Lewis Conrad Fischbein, MD Associate Professor of Clinical Medicine
Peter Uwe Fischer, MS, PHD Research Associate Professor of Medicine
Simon Fisher, MD, MS, PHD Associate Professor of Medicine
Norman Fishman, MD Assistant Professor of Clinical Medicine
Sean C. Fitzmaurice, MD Instructor in Emergency Medicine in Medicine
Jaquelyn F Fleckenstein, MD Professor of Medicine
Justin Douglas Floyd, DOST Assistant Professor of Clinical Medicine
Gregory DeWitt Folkert, MD Instructor in Medicine in Emergency Medicine
Emily Fondahn, MD Instructor in Medicine
Luigi Fontana, MD, PHD Research Associate Professor of Medicine
Victoria J Fraser, MD Busch Professor of Medicine
James Matthew Freer, MD Assistant Professor of Medicine
Deborah Frenchie, MD Instructor in Clinical Medicine
Brian R. Froelke, MD Assistant Professor of Emergency Medicine in Medicine
Brian M Fuller, MD Assistant Professor of Anesthesiology
Michael Paul Fuller, MD Associate Professor of Clinical Medicine
Suzanne Furesz, Instructor in Clinical Medicine
Brian F Gage, MD, MS Professor of Medicine
Daniel Gaitan, MD Associate Professor of Clinical Medicine
Arthur H Gale, MD Associate Professor of Clinical Medicine
Jacob M Gandlmayr, MD Instructor in Medicine
Scott D. Groesch, MD  Instructor in Clinical Medicine
John R Groll, MD  Instructor in Clinical Medicine
Robert John Gropler, MD  Associate Professor of Medicine
Richard Warren Gross, AB, MD, PHD  Professor of Medicine
Brian Anthony Grus, MD  Instructor in Clinical Medicine
Nancy Z Guggenheim, MD  Instructor in Clinical Medicine
Guner B Gulmen, MD, PHD  Assistant Professor of Clinical Medicine
Vyjanthanath R. Gunasingham, MD  Instructor in Clinical Medicine
Mark Cobb Gunby, DOST  Assistant Professor of Clinical Medicine
Maria Gurrieri, DIP, MD  Instructor in Clinical Medicine
Alexandra Gutierrez, M PH, MD  Assistant Professor of Medicine
Chandra Prakash Gyawali, MD  Professor of Medicine
Ramsey R Hachem, MD  Associate Professor of Medicine
Hicham Hachem Baydoun, MS, PHD  Research Instructor in Medicine
Matthew D Hageman, MD  Instructor in Clinical Medicine
Ashfaq H Hakim, MBBS, MD  Instructor in Clinical Medicine
Sarah Eliza Halcomb, PHD  Research Instructor in Medicine
Stephanie M Hammer, MD  Instructor in Clinical Medicine
Marc Randall Hammerman, MD  Chromalloy Professor of Renal Diseases in Medicine
Dong-Ho Han, MS, PHD  Research Associate Professor of Medicine
Zahirul Haque  Instructor in Clinical Medicine
Anisa Hassan, MD  Instructor in Clinical Medicine
Thomas F Hastings, MD  Instructor in Clinical Medicine
Jonathan William Heidt, MD  Instructor in Emergency Medicine in Medicine
James N Heins, MD  Adjunct Professor of Medicine
James N Heins, MD  Professor of Clinical Medicine
Laura Elaina Heitsch, MD  Assistant Professor of Emergency Medicine in Medicine (Pending Executive Faculty Approval)
Jeffrey P. Henderson, MD, PHD  Assistant Professor of Medicine
Katherine Eileen Henderson, MD  Assistant Professor of Clinical Medicine
Kristina Louise Henderson, MD  Instructor in Clinical Medicine
Catherine Hermann, M ENG, MD  Instructor in Clinical Medicine
Scot G Hickman, MD  Professor of Medicine
Stuart T. Higano, MD  Instructor in Clinical Medicine
SueLin Ming Hilbert, MD  Instructor in Emergency Medicine in Medicine
Thomas C Hill, MD  Instructor in Emergency Medicine in Medicine
Elizabeth Hilliker, MA, MD  Assistant Professor of Emergency Medicine in Medicine
Paul Flack Hintze, MD  Assistant Professor of Clinical Medicine
Angela Christine Hirbe, MD  Instructor in Medicine
Amy L Hoerr, MD  Instructor in Clinical Medicine
J. Langston Hoffman, MD Instructor in Clinical Medicine
Sandra S Hoffmann, MD Instructor in Clinical Medicine
Christopher Lee Holley, MD, PHD Instructor in Medicine
John Otto Holloszy, MD Professor of Medicine
Christopher Vincent Holthaus, MD Instructor in Emergency Medicine in Medicine
Michael J Holtzman, MD Selma and Herman Seldin Professor of Medicine
Neal Holzum Instructor in Clinical Medicine
Barry Allen Hong, MDI, PHD Professor of Medicine
Joshua L. Hood, MD Research Instructor in Medicine
Bruce Jay Hookerman, MD Assistant Professor Emeritus of Clinical Medicine (Dermatology)
Barbra A Horn, MD Instructor in Clinical Medicine
Ian Kerst Hornstra, MD, PHD Assistant Professor of Medicine (Dermatology)
Helen Hornfeck Host Research Assistant Professor of Medicine
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Eva A Hurst, MD Assistant Professor of Medicine (Dermatology)
Mark Albert Hurt, MD Instructor in Clinical Medicine (Dermatology)
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Warren Isakow, MD Assistant Professor of Medicine
Eva Susanne Istvan, PHD Research Assistant Professor of Medicine
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Daryl Jacobs, MD, ME Instructor in Clinical Medicine
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Meagan A. Jacoby, MD, PHD instructor in Medicine
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Judy Lee Jang, MD, MHS Assistant Professor of Medicine
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Susan M. Joseph, MD Assistant Professor of Medicine
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Deborah Shipley Kane, MD Instructor in Emergency Medicine in Medicine
Robert S Karsh, MD Adjunct Professor of Medicine
Robert S Karsh, MD Professor of Clinical Medicine
Victoria Kaskutas, MHS, OTD Assistant Professor of Medicine
Andrew M. Kates, MD Associate Professor of Medicine
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Martin Hurley Kerrigan, MD Assistant Professor of Medicine
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Thomas B Kibby, MD, MPH Instructor in Emergency Medicine in Medicine (Pending Dean's Approval)
George Kichura, MD Instructor in Clinical Medicine
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Charles John Kilo, MD Instructor in Clinical Medicine
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Beverly A Logan-Morrison, MD  Instructor in Clinical Medicine
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Jose A Madrazo, MD  Assistant Professor of Medicine
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Leonard B Maggi Jr, PHD  Research Assistant Professor of Medicine
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Vasant Muralidharan, MS, PHD Research Instructor in Medicine
Amy Musiek, MD Assistant Professor of Medicine (Dermatology)
Laura P Musselman, PHD Research Instructor in Medicine
Umadevi Muthyala Instructor in Clinical Medicine
Elna M Nagasako, MD, PHD Instructor in Medicine
Anne Kathryn Nagler, MD Instructor in Clinical Medicine
Jyotirmaya Nanda Instructor in Clinical Medicine
Nicola Napoli Adjunct Research Assistant Professor of Medicine
Michael Edward Nassif, MD Instructor in Medicine
Fatiha Nassir, MS, PHD Research Assistant Professor of Medicine
Michael J. Naughton, MD Assistant Professor of Medicine
Rosanne S Naunheim, MD Associate Professor of Emergency Medicine in Medicine
Robert F Nease Jr, MA, PHD Adjunct Associate Professor of Medicine
Burton M Needles, MD Instructor in Clinical Medicine
Jeanne M Nerbonne, PHD Professor of Medicine
Elizabeth P. Newberry, PHD Research Assistant Professor of Medicine
Rodney D Newberry, MD Associate Professor of Medicine
Amy C Ney, MD Instructor in Clinical Medicine (Dermatology)
Kim Mai Thi Nguyen, MD Instructor in Medicine
Nguyet Minh Nguyen, MD Assistant Professor of Medicine
Scott Monroe Nordlicht, MD Professor of Medicine
Deborah Veis Novack, MD, PHD Associate Professor of Medicine
Kara Sternhell Nunley, MA, MD Assistant Professor of Medicine (Dermatology)
Diana Robertovna Nurutdinova, MD Instructor in Medicine
Samuel R Nussbaum, MD Professor of Clinical Medicine
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G Patrick O'Donnell, MD Instructor in Clinical Medicine
Adewole L. Okunade, PHD Research Assistant Professor of Medicine
George Charles Oliver, MD Professor Emeritus of Clinical Medicine
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Robert F Onder Jr, MD Assistant Professor of Clinical Medicine
Nur Fiona Onen, MBCHB Assistant Professor of Medicine
S. Michael Orgel, MD Instructor in Clinical Medicine
Matthew J Orland, MD Associate Professor of Clinical Medicine
David William Ortbals, MD  Assistant Professor of Clinical Medicine
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Theodore Otti  Instructor in Clinical Medicine
Edgar Turner Overton, MD  Adjunct Assistant Professor of Medicine
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Hua Pan, MS, PHD  Research Instructor in Medicine
Peter D Panagos, MA, MD  Associate Professor of Emergency Medicine in Medicine
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William A Peck, MD  Alan A and Edith L Wolff Distinguished Professor
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Richard A Pierce, PHD  Research Associate Professor of Medicine
Bryan Douglas Piotrowski, MD  Instructor in Clinical Medicine
Helen Piwnica-Worms, PHD  Professor of Medicine
<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Timothy Joseph Pluard, MD</td>
<td>Assistant Professor of Medicine</td>
</tr>
<tr>
<td>Doug Pogue, MD</td>
<td>Instructor in Clinical Medicine</td>
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<td>Robert Francis Poirier Jr, MD</td>
<td>Assistant Professor of Emergency Medicine in Medicine</td>
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<td>Adjunct Professor of Medicine</td>
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<td>Professor of Medicine</td>
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<td>Assistant Professor of Clinical Medicine</td>
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<td>Iskra Pusic, MD</td>
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<td>Michelle Anne Hurchla Pyles, PHD</td>
<td>Research Instructor in Medicine</td>
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<td>Usman Qayyum</td>
<td>Instructor in Clinical Medicine</td>
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<td>Patricia M Quinley, MD</td>
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<td>Research Associate Professor of Medicine</td>
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<td>Assistant Professor of Clinical Medicine (Dermatology)</td>
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<td>Instructor in Clinical Medicine</td>
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Craig K Reiss, MD Sam and Marilyn Fox Distinguished Professor of Medicine
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Hilary Elizabeth Lee Reno, MD, MS, PHD Instructor in Medicine
Stacey L. Rentschler, MD, MS, PHD Assistant Professor of Medicine (Pending Executive Faculty Approval)
Nicholas R Renz, Instructor in Emergency Medicine in Medicine (Pending Dean's Approval)
Michael P Rettig, PHD Research Assistant Professor of Medicine
Michael W Rich, MD Professor of Medicine
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Gerald Stephen Shatz, MD Assistant Professor of Clinical Medicine
Nidal Shawahin, MD Instructor in Clinical Medicine
Vidal T. Sheen, MD Instructor in Clinical Medicine
David M. Sheinbein, MD Associate Professor of Medicine (Dermatology)
Amy Lynn Sheldahl, MD Instructor in Medicine
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James Andrew Stokes, MD Instructor in Clinical Medicine
Gregory A Storch, MD Professor of Medicine
Cristina Strong, PHD Assistant Professor of Medicine (Dermatology)
Xiong Su, PHD Assistant Professor of Medicine
Hamsa Subramanian Instructor in Clinical Medicine
David J Suk, MD Instructor in Medicine
Shelby A Sullivan, MD Assistant Professor of Medicine
Kaharu Sumino, M PA, MD, PHD Assistant Professor of Medicine
William Craig Summers, MD Instructor in Clinical Medicine
Walton Sumner II, MD Associate Professor of Medicine
Rama Suresh, MBBS Assistant Professor of Medicine
Rudee Suwannasri, MD Instructor in Clinical Medicine
Bridgette B Svancarek, MD Instructor in Emergency Medicine in Medicine
Elzbieta Anna Swietlicki, MS, PHD Research Instructor in Medicine
Steven D Taff, DED, MS Instructor in Medicine
Mohammad Tahir, MD Instructor in Clinical Medicine
Benjamin R Tan, MD Associate Professor of Medicine
David Tan, MD Assistant Professor of Emergency Medicine in Medicine
Kongsak Tanphaichitr, MD Professor of Clinical Medicine
Richard S Tao, MD, MIM Instructor in Emergency Medicine in Medicine
Nicholas P Taraska, MD Instructor in Clinical Medicine
Steven L Teitelbaum, MD Professor of Medicine
Arnold S Tepper, MD Instructor in Clinical Medicine
Wanda T Terrell, MD Associate Professor of Clinical Medicine
Shilpa Thakur Instructor in Clinical Medicine
George K. Thampy, MD Instructor in Clinical Medicine
Daniel Leonidas Theodoro, MD Assistant Professor of Emergency Medicine in Medicine
J. Allen Thiel, MD Associate Professor of Clinical Medicine
Mark S Thoelke, MD, PHD Associate Professor of Medicine
Erica Sharp Thomson, MD Instructor in Medicine
Erik P Thyssen, MD Assistant Professor of Clinical Medicine
Sharon F Tiefenbrunn, MD Instructor in Clinical Medicine (Dermatology)
Lawrence S Tierney, MD Associate Professor of Clinical Medicine
Jeffrey P Tillinghast, MD Associate Professor of Clinical Medicine
Garry S Tobin, MD Associate Professor of Medicine
Douglas M Tollefsen, MD, PHD Professor of Medicine
Michael H. Tomasson, MD Associate Professor of Medicine
Waseem Touma, MD Instructor in Clinical Medicine
Dwight A Towler, MD, PHD Ira M Lang Professor of Medicine
Robert R Townsend, MD, MS, PHD Professor of Medicine
Elizabeth A Tracy, MD Instructor in Clinical Medicine
David D Tran, MD, PHD Assistant Professor of Medicine
Sandeep Kumar Tripathy, MD, PHD Assistant Professor of Medicine
Elbert P Trulock III, MD Rosemary and I Jerome Fiance Professor of Pulmonary Medicine in Medicine
Katherine S Tsai, MD Instructor in Clinical Medicine
David J Tucker, MD Assistant Professor of Clinical Medicine
Dolores R Tucker, MD Assistant Professor of Clinical Medicine (Dermatology)
Stacey S Tull, M PH, MD Assistant Professor of Clinical Medicine (Dermatology)
John W Turk, MD, PHD Professor of Medicine
Peter G Tuteur, MD Associate Professor of Medicine
Robert C. Uchiyama, MD Instructor in Clinical Medicine
John H Uhlemann, MD Assistant Professor of Clinical Medicine (Dermatology)
Fumihiko Urano Associate Professor of Medicine (Pending Executive Faculty Approval)
Geoffrey L Uy, MA, MD Assistant Professor of Medicine
Albert Lee Van Amburg Iii, MD Assistant Professor of Clinical Medicine
Brian Andrew Van Tine, MD, PHD Assistant Professor of Medicine
Emmanuel A Venkatesan Assistant Professor of Clinical Medicine
Kiran Raj Vij, MD Assistant Professor of Medicine

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Ravi Vij, MBBS  Associate Professor of Medicine
Anitha Vijayan, MD  Professor of Medicine
Dennis T Villareal, MD  Adjunct Associate Professor of Medicine
Herbert W Virgin IV, MD, PhD  Professor of Medicine
Oksana Volshetyn, MD  Assistant Professor of Medicine
Benjamin Allen Voss, MD  Instructor in Clinical Medicine
Stanley G Vriezelaar, MD  Instructor in Clinical Medicine
Harry Lee Wadsworth, MD  Instructor in Clinical Medicine
Nina Delaney Wagner-Johnston, MD  Assistant Professor of Medicine
Jason Cass Wagner, MD  Assistant Professor of Emergency Medicine in Medicine
Stanley M Wald, MD  Associate Professor of Clinical Medicine
David Wallace, MD  Instructor in Clinical Medicine
David A Walls, MD  Instructor in Clinical Medicine
Sarah N. Walsh  Instructor in Clinical Medicine (Dermatology)
Matthew John Walter, MD  Assistant Professor of Medicine
Richard Coburn Walters, MD  Instructor in Clinical Medicine (Dermatology)
Andrea Wang-Gillam, MD  Assistant Professor of Medicine
Jean S Wang, MD, PhD  Assistant Professor of Medicine
Lawrence L. Wang, MD, PhD  Instructor in Clinical Medicine (Dermatology)
Saiama Naheed Waqar, MD  Instructor in Medicine
Corinna Hendrell Warren, MD  Instructor in Clinical Medicine
David K. Warren, MD, MPH  Associate Professor of Medicine
Lukas Delbert Wartman, MD  Instructor in Medicine
Andrzej J. Wasiak, MD, PhD  Assistant Professor of Clinical Medicine
Scott P Wasserstrom, MA, MD  Instructor in Clinical Medicine
Amy L. Waterman, MA, PhD  Associate Professor of Medicine
Jason Dean Weber, PhD  Associate Professor of Medicine
H. James Wedner, MD  Professor of Medicine
Xiaochao Wei, PhD  Research Instructor in Medicine
Kevin D Weikart, MD  Instructor in Clinical Medicine
Gary J Weil, MD  Professor of Medicine
Katherine N Weilbaecher, MD  Associate Professor of Medicine
Carla Joy Weinheimer, MS  Research Assistant Professor of Medicine
Leonard B Weinstock, MD  Associate Professor of Clinical Medicine
Steven Jay Weintraub, MD, MS  Assistant Professor of Medicine
Edmond Weisbart  Assistant Professor of Clinical Medicine
Alan N Weiss, MD  Professor of Medicine
Edward P Weiss, MS, PhD  Adjunct Research Assistant Professor of Medicine
Peter Douglas Weiss, MD  Instructor in Clinical Medicine
John Sutton Welch, MD, PhD  Assistant Professor of Medicine
Alvin S Wenneker, MD Professor of Clinical Medicine
Brian T Wessman, Assistant Professor of Emergency Medicine in Medicine
Peter Westervelt, MD, PHD Associate Professor of Medicine
Darren E Wethers, MD Instructor in Clinical Medicine
Alison J Whelan, MD Professor of Medicine
Brian Stephen White, PHD Research Assistant Professor of Medicine (Pending Executive Faculty Approval)
Neil Harris White, MD Professor of Medicine
Michael Peter Whyte, MD Professor of Medicine
Burton M Wice, PHD Research Associate Professor of Medicine
Cynthia A Wichelman, MD Associate Professor of Emergency Medicine in Medicine
Samuel A Wickline, MD Professor of Medicine
John F Wiedner, MD Instructor in Clinical Medicine
Deborah A Wienski, MD Instructor in Clinical Medicine
Tanya M Wildes, MD Assistant Professor of Medicine
Denise Wilfley, PHD Professor of Medicine
Caroline G Wilker, MD Instructor in Clinical Medicine
Michael P Williams, PHD Adjunct Instructor in Medicine
Nancy J Williams, MD Instructor in Clinical Medicine
George A Williams III, MA, MD Assistant Professor of Clinical Medicine
R. Jerome Williams Jr, MD Associate Professor of Clinical Medicine
Monita Elaine Wilson, MS, PHD Research Associate Professor of Medicine
Patrick H Win, Instructor in Clinical Medicine
David William Windus, MD Professor of Medicine
Karen Winters, MD Associate Professor of Medicine
Chad Alan Witt, MD Assistant Professor of Medicine (Pending Executive Faculty Approval)
Keith Frederic Woeltje, MD, PHD Professor of Medicine
Edward M Wolfe, MD Instructor in Clinical Medicine (Dermatology)
Gerald Wolff, MD Assistant Professor of Clinical Medicine
Nathan E Wolins, PHD Research Assistant Professor of Medicine
John A Wood, MD Associate Professor of Clinical Medicine
Michele C Woodley, MD Assistant Professor of Clinical Medicine
Megan Elizabeth Wren, MD Associate Professor of Medicine
Jeffrey M Wright, MD Assistant Professor of Clinical Medicine
Xiaobo Wu, MD Research Instructor in Medicine
Yan Xie, MD, MS Research Instructor in Medicine
Naga M Yalla, MD Instructor in Medicine
Kathryn Ayako Yamada, PHD Research Professor of Medicine
Kui Yang, ME, PHD Research Instructor in Medicine
Kevin E Yarasheski, MA, PHD Professor of Medicine
Timothy Teng-Kay Yau, MD Assistant Professor of Medicine
Department's Website

http://internalmed.wustl.edu/

Department of Molecular Microbiology

The Department of Molecular Microbiology teaches introductory courses in microbiology and pathogenic microorganisms for first-year medical students and graduate students. In conjunction with the DBBS program in Molecular Microbiology and Microbial Pathogenesis, the department also offers a number of advanced courses, primarily designed for graduate students, but open to medical students. Advanced elective research activities are offered by faculty in the department.


Courses

First Year

M30 526 MICROBES AND PATHOGENESIS
Instructors: Henry V. Huang, PhD, 362-2755; Scott Hultgren, PhD, 362-6772

The challenge of this course is to emphasize the importance of understanding molecular and cellular paradigms of how pathogenic microbes interact with their hosts and cause disease. Selected pathogenic microbes, including bacteria, viruses, parasites and fungi, will be utilized as models to explain general principles of host-pathogen interactions and their consequences. Mechanisms by which microbes evade host defenses to cause acute and chronic infections will be highlighted. Problems facing the medical community in the 21st century such as rising antibiotic resistance and tropical diseases will be addressed. The main objective of this course is to teach students how to think about microbial pathogenesis in a way that will provide them a conceptual framework that relates mechanisms of pathogenesis to
Fourth Year

Electives

At present, the primary enrollees in the following courses are students working for a PhD degree in one of the basic sciences. However, these courses are recommended for interested medical students, especially those who may be considering a career in medical research, such as MSTP students. MSTP students can take Bio 5392 in place of the Medical Microbiology course (M30 526). Emphasis is placed on the organization and function of living systems at the molecular level. The courses combine formal lectures with student-directed seminars. Course descriptions are presented under Division of Biology and Biomedical Sciences.

L41 (Bio) 5217 SPECIAL TOPICS IN MICROBIAL PATHOGENESIS
L41 (Bio) 5392 MOLECULAR MICROBIOLOGY AND PATHOGENESIS

Note — The number preceding the course title indicates that the course carries credit in the Graduate School of Arts & Sciences.

Research

(M30 900)  
Cross-listed with L41 (Bio) 590

John P. Atkinson, M.D., 10th Floor, Clinical Sciences Research Building, 362-8391. Basic and clinical investigations of complement receptors and regulatory proteins including their roles in protecting self-tissue from damage, serving as a receptor for pathogens and inducing T regulatory cells. Poxviruses and flaviviruses that produce virulence factors which mimic the host's complement regulators are a recent focus.


Stephen M. Beverley, Ph.D., Ninth Floor, McDonnell Pediatric Research Building, 747-2630. Molecular genetics of protozoan parasites and tropical diseases; biosynthesis of the parasite surface, genomics, virulence and drug action or resistance.

Michael Caparon, Ph.D., 10th Floor, McDonnell Pediatric Research Building, 362-1485. Molecular genetics and pathogenicity of the streptococci and other pathogenic gram positive bacteria.

Michael S. Diamond, M.D., Ph.D., Seventh Floor, McDonnell Pediatric Research Building, 362-2842. The research in our laboratory focuses on the interface between viral pathogenesis and the host immune response. Four globally important positive strand RNA viruses are studied, including West Nile, Dengue, Chikungunya and hepatitis C virus. Studies are focused on identifying the host and viral factors that modulate the severity of an infection, the structural and molecular basis of antibody-mediated protection and mechanisms of viral immune evasion. Our laboratory utilizes an array of approaches including those used in molecular virology, cell biology, structural biology, systems biology, cellular immunology and in vivo models of pathogenesis.
Tamara L. Doering, M.D., Ph.D., 10th Floor, McDonnell Pediatric Research Building, 747-5597. The Doering lab studies the opportunistic fungal pathogen, Cryptococcus neoformans, with the dual motivations of elucidating basic biology and identifying potential drug targets. Projects include studies of the synthesis and regulation of the main cryptococcal virulence factor, its polysaccharide capsule, and investigation of host fungal interactions. Current approaches include those of biochemistry, cell and molecular biology, and genetics; studies also include high-throughput analysis of host-pathogen interactions and computational approaches to reconstructing the capsule regulatory network.


David B. Haslam, M.D., Sixth Floor, McDonnell Pediatric Research Building, 286-2888. Our laboratory is investigating the trafficking of shiga toxin within human cells. In particular, we are searching for small molecules that inhibit toxin trafficking. These will be used as tools to study the pathway, and some might be developed as potential therapeutic agents.

Jeffrey P. Henderson, M.D., Ph.D., 10th Floor, BJC Institute of Health Building, 747-0240. Basic and translational investigation of Gram-negative bacterial pathophysiology. We make extensive use of mass spectrometry to understand how bacteria use small molecules and proteins for nutrient theft and defense from the host immune system. Where possible, we use these methods to better understand the host-pathogen interface in patients. We have used this information to identify and design agents that specifically target pathogenic strains.


Scott J. Hultgren, Ph.D., 10th Floor, McDonnell Pediatric Research Building, 362-6772. Pathogenic mechanisms and disease outcomes in the urinary tract. Work in the Hultgren lab blends multiple scientific disciplines to elucidate bacterial and host mechanisms that determine the onset, course and outcome of interactions between a host mucosal surface and bacterial pathogens. Using genetics, genomics, biochemistry, structural biology, high-resolution imaging, animal models, clinical studies and combinatorial chemistry, we have illuminated new ways in which intracellular lifestyles and community behavior play critical roles in the pathogenesis of urinary tract infection. We have uncovered new principles of adhesive pill biogenesis in Gram-negative bacteria by the chaperone/usher pathway; delineating the fine molecular details of a donor strand complementation and exchange mechanism by which the energy of final subunit folding is used to complete assembly and extrusion of pili across the outer membrane. We revealed how UPEC use type 1 pili to invade and establish biofilm-like intracellular bacterial communities within bladder cells as part of a mechanism that subverts host defenses and how quiescent intracellular reservoirs can seed recurrent infections. We have uncovered complex networks that govern mucosal epithelial response to infection, which we have shown determines disease outcome. Further, we have made seminal contributions to our understanding of the pathogenesis and response to other uropathogens, polymicrobial infections and catheter-associated UTIs and to the mechanisms by which bacteria form a directed amyloid fiber, curli, which is important in biofilm formation. Together, this work is changing the way UTIs are evaluated, re-shaping models of bacterial infections in general and spawning new technologies to design novel vaccines and anti-microbial therapeutics to diagnose, treat and/or prevent UTIs and their sequelae.

David A. Hunstad, M.D., Room 6106, McDonnell Pediatric Research Building, 286-2710. The laboratory studies the molecular mechanisms by which conserved, general periplasmic chaperones, such as SurA, contribute to the assembly and presentation of surface virulence factors by Gram-negative pathogens. In addition, we are evaluating the utility of novel silver-based antimicrobial compounds in special
populations with UTI. Our goals are to discover novel targets for interventions that will prevent and treat Gram-negative infections of the urinary tract, gastrointestinal tract and central nervous system.

Amanda Lewis, Ph.D., 10th Floor, BJC Institute of Health, 286-0016. Polymicrobial Infection and Women’s Health. Our lab is using biochemical, cellular and animal models to study infectious processes of the female urogenital tract that involve multiple bacterial species. For example, bacterial vaginosis (BV) is a polymicrobial imbalance of the vaginal flora characterized by reductions in beneficial lactobacilli and an overgrowth of mostly Gram-negative bacteria. BV is the most common of all vaginal infections and is associated with increased risk of adverse pregnancy outcomes and greater susceptibility to sexually transmitted infections. We are collaborating with clinical investigators to define molecular and biochemical processes of BV and identify patient groups most at risk for adverse events. Another active area of study in the lab involves polymicrobial urinary tract infection (UTI). We have developed a mouse model of polymicrobial UTI and are currently defining novel processes, bacterial factors and the impact of host that contribute to susceptibility.

Lee Ratner, M.D., Ph.D, 562 McDonnell Medical Sciences Building, 362-8836. Human Retrovirus Research. Studies of human retrovirus replication and pathogenesis. These include studies of the 1) human T-cell leukemia virus receptor, regulation by interferon and transformation of T-cells, 2) HIV interaction with co-receptors and pre-integration complex transport to the nucleus, and 3) xenotropic-murine related retrovirus in prostate cancer.

Robert Schreiber, Ph.D., Room 7749, Seventh Floor, Clinical Sciences Research Building, 362-8747. Tumor immunology focusing on mouse models of cancer and cancer immunoediting. Biochemistry and biology of cytokines, their receptors and cytokine receptor signaling with particular emphasis on IFNa/b and IFNg.

L. David Sibley, Ph.D., Ninth Floor, McDonnell Pediatric Research Building, 362-8873. We study the intracellular survival mechanisms of protozoan parasites, focusing on the model parasite Toxoplasma gondii. Current approaches include high-resolution microscopy, genetic mapping of virulence traits, comparative genomic analyses and development of animal models for studying pathogenesis and resistance.


Gregory Storch, M.D., 2N52 St. Louis Children’s Hospital, 454-6079. In this elective, the student will participate in a research project involving the application of techniques of molecular biology, especially the polymerase chain reaction and nucleotide sequencing, to the diagnosis of the infectious diseases. Infectious agents currently under investigation include human cytomegalovirus, Epstein-Barr virus, BK polyoma virus, Ehrlichia and respiratory viruses. Studies are also directed at molecular detection and analysis of resistance to antimicrobial agents.

Patrick M. Stuart, Ph.D., 1217B McMillan, 362-9336. Virology. Investigate the role viral-induced immune responses play in corneal pathology seen in both primary and recurrent herpes infections of the eye. Characterize the role that apoptotic pathways play in herpetic diseases of the eye. To develop and characterize anti-herpetic vaccines as well as immunologically-based tolerance procedures that are effective in preventing recurrent herpetic keratitis.

Phillip I. Tarr, M.D., Sixth Floor, McDonnell Pediatric Research Building, 286-2848. Opportunities in
Enteric Human Microbiology. We have a variety of relevant research opportunities available to us in our laboratory. Most efforts center around the intense genetic studies of already isolated bacteria, including pathogens and commensal organisms. The specimen archive is obtained from children with diagnosed enteric infections or other inflammatory disorders of the gut, including inflammatory bowel disease as well as ulcerative colitis and necrotizing enterocolitis. Additionally, we have a very large biomass archive, consisting of stool from patients during or before events, most particularly necrotizing enterocolitis. In our efforts, we study the bioactivity and genetics of the microbial populations, and we also interrogate the human enteric response to these populations. We use a variety of techniques, including classic monomicrobial sequencing and sequence and phylogenetic analyses, polymicrobial censusing (usually 16 rRNA analysis) and shotgun DNA sequencing (using massively parallel technology), transcriptional sequencing and proteomics. All projects attempt to amalgamate data from the fields of microbial evolution, microbial pathogenesis, microbial ecology and host response to dissect the relation between the enteric biomass and human health and disease. Rotating (elective) students will be assigned a feasible project that attempts to answer a well-circumscribed question, or develop a broadly useful reagent or technique, within the constraints of a time-limited rotation.

Niraj H. Tolia, Ph.D., Eighth Floor, McDonnell Pediatric Research Building, 286-0134. Structural and Mechanistic Studies of Malaria Pathogenesis. Our lab is interested in the molecular events that occur during erythrocyte invasion by Plasmodium parasites. We use the tools of structural biology, biochemistry and biophysics to examine proteins and protein complexes associated with these events.

Herbert Virgin, M.D., Ph.D., 1754 West Building, 362-9223. We work on issues at the interface of virology and immunology by analyzing aspects of immunity that control infection and aspects of viral structure/genetics that contribute to virulence, disease and oncogenesis. We study the pathogenesis and latency of the dsDNA enveloped murine gammaherpesvirus 68 as well as RNA viruses MNV-1 and Sindbis virus.

Joseph P. Vogel, Ph.D., 10th Floor, McDonnell Pediatric Research Building, 747-1029. Legionella pneumophila, the causative agent of Legionnaires’ pneumonia, replicates inside alveolar macrophages by preventing phagosome-lysosome fusion.

David Wang, Ph.D., Eighth Floor, McDonnell Pediatric Research Building, 286-1123. Discovery and characterization of novel viruses. We use functional genomic technologies to identify novel viruses from a variety of clinical samples from diseases of unexplained etiology. We then use epidemiologic and molecular/cellular strategies to define the relevance of newly identified viruses to human disease. A range of new viruses, including polyomaviruses, astroviruses and picornaviruses are under investigation.

Dong Yu, Ph.D., 9220D McDonnell Pediatric Research Building, 362-7367. Human cytomegalovirus (HCMV) is an important human pathogen that causes severe and life-threatening disease in people with a compromised immunity, is the most common infectious cause of birth defects in newborns and has been associated with various vascular diseases. In my laboratory, students have opportunities to use genetic, biochemical, genomic and cell biology approaches to study key viral and cellular processes that are pivotal to HCMV biology and pathogenesis. In particular, they will investigate the role of viral genes in HCMV infection, decipher the unique molecular biology of HCMV clinical isolates, and use mouse model of mouse CMV infection as a surrogate model for dissecting the mechanism of HCMV infection and pathogenesis in vivo.

Faculty

Stephen M Beverley, PHD Head of the Department of Molecular Microbiology
John Patterson Atkinson, MD Professor of Molecular Microbiology
Wandy L. Beatty, PHD Research Assistant Professor of Molecular Microbiology
Douglas E Berg, PHD Alumni Professor of Molecular Microbiology
Stephen M Beverley, PHD Marvin A Brennecke Professor of Molecular Microbiology
Adrianus C Boon, MS, PHD Assistant Professor of Molecular Microbiology
Tamara L. Brent, MD, PHD Professor of Molecular Microbiology
Michael G Caparon Jr., PHD Professor of Molecular Microbiology
Susan E Cullen, PHD Adjunct Professor of Molecular Microbiology
Michael Diamond, MD, PHD Professor of Molecular Microbiology
Deborah E Dobson, PHD Research Associate Professor of Molecular Microbiology
Karen W Dodson, PHD Research Instructor in Molecular Microbiology
Daniel E Goldberg, MD, PHD Professor of Molecular Microbiology
Dennis E Hallahan, MD Professor of Molecular Microbiology
David B Haslam, MD Associate Professor of Molecular Microbiology
Jeffrey P. Henderson, MD, PHD Assistant Professor of Molecular Microbiology
Henry V Huang, PHD Associate Professor of Molecular Microbiology
Scott James Hultgren, PHD Helen L Stoever Professor of Molecular Microbiology
David A Hunstad, MD Assistant Professor of Molecular Microbiology
Asis Khan, MS, PHD Research Instructor in Molecular Microbiology
Anthony Kulczycki Jr, MD Associate Professor of Molecular Microbiology
Amanda Lark Lewis, PHD Assistant Professor of Molecular Microbiology
Jennifer K Lodge, PHD Professor of Molecular Microbiology
Elaine Rene Mardis, PHD Professor of Molecular Microbiology
Audrey R Odom, MD, PHD Assistant Professor of Molecular Microbiology
Paul D Olivo, MD, PHD Adjunct Assistant Professor of Molecular Microbiology
Edward J Pearce, PHD Professor of Molecular Microbiology
Lee Ratner, MA, MD, PHD Professor of Molecular Microbiology
Charles M Rice III, PHD Adjunct Professor of Molecular Microbiology
Robert D Schreiber, PHD Professor of Molecular Microbiology
Jahangheer S. Shaik, MS, MS1, PHD Research Instructor in Molecular Microbiology (Pending Dean's Approval)
Laurence David Sibley, PHD Alan A. and Edith L. Wolff Distinguished Professor
Laurence David Sibley, PHD Professor of Molecular Microbiology
Christina Leigh Stallings, MA, MS, PHD Assistant Professor of Molecular Microbiology
Gregory A Storch, MD Professor of Molecular Microbiology
Phillip Irwin Tarr, MD Professor of Molecular Microbiology
Niraj Harish Tolia, PHD Assistant Professor of Molecular Microbiology
Herbert W Virgin IV, MD, PHD Professor of Molecular Microbiology
Joseph Paul Vogel, PHD Associate Professor of Molecular Microbiology
David Wang, PHD Associate Professor of Molecular Microbiology
Gary J Well, MD Professor of Molecular Microbiology
George Matthew Weinstock, PHD Professor of Molecular Microbiology
Department’s Website

http://www.microbiology.wustl.edu/

Department of Neurological Surgery

Instruction in neurological surgery begins with an introduction to the anatomy and physiology of the nervous system presented in the first-year course in neural sciences directed by the Department of Anatomy and Neurobiology with participation of the neurosurgery faculty. In the second year, the Department of Neurological Surgery presents the course in Diseases of the Nervous System in conjunction with the Departments of Neurology, Pathology, Molecular Biology and Pharmacology, Medicine and Pediatrics. The course emphasizes how knowledge derived from basic or clinical investigations leads to improvements in clinical care. In the third year, students may elect to participate in a four-week Neurosurgery clerkship which introduces them to the clinical care of patients with diseases of the nervous system. Neurosurgical faculty members work with the neurologists in providing lectures, demonstrations and teaching exercises in patients with neurological diagnoses as part of the Clinical Medicine course. Students may elect to fulfill their Neurology requirement by rotating on the neurosurgery service. Students may also choose neurosurgery as part of the Surgical Specialty rotations. Neurosurgical diagnosis, critical care, operative treatment and ethical issues in patient management are emphasized. In the fourth year, students may choose from several advanced electives including clinical externships in neurosurgery and experiences in basic or clinical/translational research.

Neurological Surgery Divisions

The Division of Pediatric Neurosurgery: Jeffrey R. Leonard, MD; Matthew D. Smyth, MD; Tae Sung Park, MD; David D. Limbrick Jr., MD, PhD.

Based in St. Louis Children's Hospital, the Division of Pediatric Neurosurgery of the Department of Neurosurgery provides neurosurgical care for the many disorders that are unique to the developing nervous system, from the premature infant to the young adult. Subspecialty areas include pediatric neuro-oncology, spastic cerebral palsy, craniofacial disorders, obstetrical brachial plexus injuries and epilepsy surgery. Active areas of clinical and basic research include pediatric head trauma, brain tumors, epilepsy and neonatal brain injury and hydrocephalus.

The Center for Innovation in Neuroscience and Technology: Eric C. Leuthardt, MD (director)

The multidisciplinary center is based in the Department of Neurosurgery with participation from multiple departments in the medical school and across the University campus. Current active participants include neurosurgery faculty members Ralph G. Dacey Jr., MD, chairman; Colin Derdeyn, MD, with the Division of Neuroradiology; Steve Peterson, MD, with the Department of Neurology/Neurobiology; Frank C-P Yin, PhD, chairman and Daniel Moran, PhD, with the Department of Biomedical Engineering; Philip Bayly, PhD, and Guy Genin, PhD, with the Department of Mechanical Engineering; Bill Smart, PhD, with the Department of Computer Science; F. Scott Kieff, JD, with the School of Law and adjunct professor in the Department of Neurosurgery; and Michael Marrah with the Office of Technology Management.

The James L. O’Leary Division of Experimental Neurology and Neurological Surgery: Thomas A. Woolsey, MD (director)

The O’Leary Division was created in 1980 to formalize a long-standing tradition of providing unique opportunities for residents, fellows and others to engage in basic research as part of this academic training program. The division pioneered techniques to study brain structure and activity, with a focus on developmental and adult nervous system plasticity. Trainees have published fundamental work on mechanisms of activity-based changes to cerebral blood flow, a novel stroke model, new understanding of impacts of glioblastoma growth on cortical structure and function, and novel approaches to visualizing and analyzing dynamic changes in structure and function. The division currently collaborates widely on
projects conducted in and outside WUSM including: faculty in this Department and the departments of Neurology, Anatomy and Neurobiology, Biomedical Engineering, Earth and Planetary Sciences, Electrical and Systems Engineering, Pediatrics, Otolaryngology and Radiology.

Areas of neurosurgical specialization include:

Cerebrovascular Surgery: Michael R. Chicoine, MD; Ralph G. Dacey Jr., MD; Robert L. Grubb Jr., MD; Keith M. Rich, MD; Gregory J. Zipfel, MD

Cranial Base Surgery: Michael R. Chicoine, MD; Robert L. Grubb Jr., MD; Gregory J. Zipfel, MD

Epilepsy Surgery: Joshua L. Dowling, MD; Eric C. Leuthardt, MD

Neuro-Oncology: Michael R. Chicoine, MD; Ralph G. Dacey Jr., MD; Albert Kim, MD; Keith M. Rich, MD; Eric C. Leuthardt, MD

Pediatric Neurosurgery: Jeffrey R. Leonard, MD; Matthew D. Smyth, MD; Tae Sung Park, MD; David D. Limbrick Jr., MD, PhD

Peripheral Nerve Surgery: Wilson Z. Ray, MD

Pituitary Surgery: Michael R. Chicoine, MD; Ralph G. Dacey Jr., MD; Gregory J. Zipfel, MD

Spinal Neurosurgery: Wilson Z. Ray, MD; Paul Santiago, MD; Todd J. Stewart, MD; Neill M. Wright, MD; Eric C. Leuthardt, MD

Stereotactic Radiosurgery: Michael R. Chicoine, MD; Ralph G. Dacey Jr., MD; Joshua L. Dowling, MD; Keith M. Rich, MD; Matthew D. Smyth, MD; Eric C. Leuthardt, MD

Surgical Management of Pain: Joshua L. Dowling, MD

Courses

First Year

Selectives

M04 5667 MICROCIRCULATION
Instructor: Jeffrey M. Gidday, PhD, 286-2795
The homeostatic functions of the microcirculation include the active regulation of metabolite exchange with parenchymal cells, immune surveillance and a multifaceted response to injury and disease. This elective provides an overview of the normal and abnormal cell biology and physiology of the microcirculation. Four sessions will be organized around conceptual presentations and laboratory demonstrations by the instructor, and two-part topic presentations by students following independent library research that focuses on basic physiology and clinically relevant pathophysiology. Basic physiology research topics might include: regulation of tissue blood flow and vascular tone, propagated vasodilation, hemodynamics and rheology of erythrocytes and leukocytes, cell biology of the endothelium, control of capillary permeability and angiogenesis. Common disease entities involving microcirculatory dysfunction include: stroke and myocardial ischemia, diabetes, inflammation, tumor angiogenesis, sickle cell anemia, retinopathy of prematurity, pulmonary edema, various autoimmune diseases, as well as the adaptive cardiovascular responses to exercise or high altitude. (This selective is cross-listed in the Department of Cell Biology and Physiology.)

M04 5878 INTRODUCTION TO CLINICAL NEUROSURGERY
Instructor: Jeffrey Leonard, MD, 454-4630
The objective for this selective course is to expose students to the various fields of neurosurgery. Students attend X-Ray/Case Management conferences and Grand Rounds. There are nine sessions for the semester: two case management conferences, two Grand Rounds and five discussions. Students (discussion leaders) are assigned to relevant literature to present. Discussion dates and discussion leaders are chosen at the introductory meeting. The course also exposes students to tools they can use in critical reading of medical literature. During the semester, as opportunities allow, patients with the disease processes being discussed are brought to class, and students are lead on rounds to discuss the various patients in the hospital at that time.

**Third Year**

**Third-Year Clerkship Opportunities**

Students may elect to obtain their neurology clerkship experience on the neurosurgery service, or they can choose neurosurgery as part of the surgical specialty rotations. Third-year students participate with the residents and attendings on hospital rounds, evaluate patients in the neurosurgery outpatient department and participate in the neurosurgical operating room. The main objectives of the rotation include: 1) the evaluation of comatose or head-injured patients; 2) clinical presentation, diagnostic work-up and treatment of cervical and lumbar disc disease; and 3) evaluation and treatment of patients with hemorrhagic and ischemic stroke.

**Fourth Year**

**Elective**

**M40 805 NEUROSURGERY**

Instructor(s): David Limbrick, M.D., Ph.D., 454-2810

Location: Department of Pediatric Neurosurgery, St. Louis Children's Hospital, 4 South 20, 8 a.m. first day of elective.

Elective Contact: David Limbrick, M.D., Ph.D., 454-2810

Other Information: Students should contact Dr. Limbrick prior to the first day of the elective.

Enrollment limit per period: 4

Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

The goal is to provide an overview of neurological surgery. The fourth-year medical student will participate in patient work-ups, pre, intra- and postoperative care, and diagnostic procedures. Students will also scrub in cases with senior level and chief residents, assisting with neurosurgical procedures and observing the more critical portions of these procedures. It is expected that they will learn how to perform basic neurosurgical procedures such as lumbar punctures, ICP monitor placement and ventricular drain placement. Fourth-year medical students are encouraged to participate in Grand Rounds, Neurosurgery Resident Curriculum conference and Journal Club with the neurosurgery residents. At least one day/week is spent in an outpatient neurosurgery office setting. A week spent on the pediatric service at St. Louis Children's Hospital is also strongly encouraged as a component of this fourth-year elective.

Student time distribution: Inpatient 80%; Outpatient 20%, Conferences/Lectures 10%; Subspecialty Care 100%

Major teaching responsibility: N/A

Patients seen/weekly: 125

On call/weekend responsibility: None

**Research**

*(M40 900)*
Michael R. Chicoine, M.D., Fifth Floor, McMillan Hospital Building, 362-4313. Outcomes analysis for adult patients with brain tumors. Current clinical studies focus on outcomes of patients with benign and malignant brain tumors utilizing a prospective brain tumor database. Particular emphasis includes the impact of intraoperative MRI upon outcomes for patients with brain tumors and other diseases.

Ralph G. Dacey, Jr., M.D., Fifth Floor, McMillan Hospital Building, 362-3571. Research on the cerebral microcirculation and ischemia/reperfusion: Our studies focus on examination of molecular mechanisms in the endothelial cells and smooth muscle cells in the intracerebral microcirculation and the contribution of glial cells to their impairment after hypoxia/reoxygenation. In vitro techniques for studying isolated perfused microvessels are used to examine questions centered on endothelial smooth muscle and glial cell integration of cerebral blood flow responses.

Hans H. Dietrich Ph.D., Fifth Floor, McMillan Hospital Building, 362-3656. Pathophysiology of the cerebral microcirculation in Alzheimer’s disease and diabetes: Alzheimer’s disease and diabetes impair the vascular function of the cerebral microcirculation. We use in vitro techniques for studying isolated perfused microvessels from genetic models of the respective diseases to examine the impairment of molecular mechanisms involved in endothelial and smooth muscle integration of cerebral blood flow regulation. Based on our studies, we devise and test treatments to alleviate the observed microvascular dysfunction.

Jeffrey M. Gidday, M.D., 286-2795. Research in our laboratory is aimed at elucidating the mechanisms responsible for the promotion of robust neuronal and vascular protection against ischemic injury in CNS tissues (a phenotype called “ischemic tolerance”) in response to sublethal hypoxic “preconditioning” stress. (See Gidday, Nat. Neurosci. Rev. 7: 437,2006). Our current focus is on vascular mechanisms of ischemic tolerance and anti-inflammatory responses that may underlie it. We also investigate the molecular mechanisms of vascular dysfunction in brain and retina in response to ischemia. Our studies employ videomicroscopic methods in transgenic mice and other animals to directly visualize oxidative (oxygen and nitrogen radicals), inflammatory (polymorphonuclear leukocytes) and proteolytic (matrix metalloproteinases and neutrophilic proteases) injury processes in the CNS microcirculation. Cerebral and retinal endothelial cell cultures are also used concomitantly as in vitro models of microvascular injury and protection.

David D. Limbrick, M.D., Ph.D., Suite 4S20, St. Louis Children’s Hospital, 454-2810. Clinical and translational research into newborn brain injuries, including post-hemorrhagic hydrocephalus. Main research areas include cerebrospinal fluid protein markers of disease, MRI diffusion tensor imaging and prospective clinical trials. Also, multi-institutional clinical research opportunities exist for syringomyelia associated with Chiari I malformation.

T. S. Park, M.D., 1S46 St. Louis Children’s Hospital, 454-2810. Outcome studies of selective dorsal rhizotomies for treatment of spastic cerebral palsy in children, and brachial plexus repair for birth injury are ongoing projects.

Keith M. Rich, M.D., Fifth Floor, McMillan Hospital Building, 362-3566. Research on neuronal and glioma cellular apoptosis after treatment with DNA-damaging agents. Techniques include growing human brain tumor cells in culture, bioassay for apoptosis with fluorescent staining, protein immunoblotting and PCR.

Neill M. Wright, M.D., Fifth Floor, McMillan Hospital Building, 362-3630. Clinical outcomes studies focusing on the treatment and results of cervical spine surgery. Several active research opportunities include the evaluation of novel surgical techniques for treatment of the atlantoaxial (C1-2) segment, the use of synthetic bone in cervical spine surgery, the relationship between cervical spondylosis and dizziness, and the critical evaluation of certain intra-operative techniques and surgical practices.
Gregory J. Zipfel, M.D., Fifth Floor, McMillan Hospital Building, 747-8871. Our cerebrovascular research laboratory has two main interests: (1) examining the pathophysiologic effects of amyloid-β peptide on cerebral arteriolar function, and determining the manner and extent to which such effects contribute to diseases such as ischemic brain injury, cerebral amyloid angiopathy and Alzheimer’s disease; and (2) exploring the molecular basis and therapeutic intervention for vasospasm and cognitive deficits following experimental aneurysmal subarachnoid hemorrhage.

Faculty

Ralph G Dacey Jr, MD Head of the Department of Neurological Surgery
Tammie Lee Smith Benzinger , MD, PHD Assistant Professor of Neurological Surgery
Keith Happ Bridwell , MD Professor of Neurological Surgery
Jacob M Buchowski , MD, MS Associate Professor of Neurological Surgery
Andreas H Burkhalter , MS, PHD Associate Professor of Neurobiology in Neurological Surgery
Michael R Chicoine , MD Associate Professor of Neurological Surgery
Michael R Chicoine , MD August A. Busch, Jr. Distinguished Professor
Dewitte T Cross III, MD Professor of Neurological Surgery
Ralph G Dacey Jr, MD Henry G and Edith R Schwartz Professor of Neurological Surgery
Colin Pieter Derdeyn , MD Professor of Neurological Surgery
Hans H Dietrich , MS, PHD Assistant Professor of Neurological Surgery
Michael N Diringer , MA, MD Professor of Neurological Surgery
Joshua L Dowling , MD Associate Professor of Neurological Surgery
Robert E Drzymala , PHD Professor of Neurological Surgery
Jack R. Engsberg , MS, MS1, PHD Professor of Neurological Surgery
Mokhtar H Gado , MBBCH, MS Professor of Neurological Surgery
Jeffrey M. Gidday , PHD Associate Professor of Neurological Surgery
Robert L Grubb Jr, MD Professor of Neurological Surgery
David H Gutmann , MD, MS, PHD Professor of Neurological Surgery
Byung Hee Han , PHD Assistant Professor of Neurological Surgery
Matthew A Howard Adjunct Assistant Professor of Neurological Surgery
William Edward Janes Instructor in Neurological Surgery
Sarah C. Jost Adjunct Assistant Professor of Neurological Surgery
Michael Patrick Kelly , MD Assistant Professor of Neurological Surgery
Albert H Kim , MA, MD, PHD Assistant Professor of Neurological Surgery
Lawrence G Lenke , MD Professor of Neurological Surgery
Jeffrey R. Leonard , MD Associate Professor of Neurological Surgery
Eric Claude Leuthardt , MD Associate Professor of Neurological Surgery
David D Limbrick Jr, MD, PHD Assistant Professor of Neurological Surgery
Christopher J Moran , MD Professor of Neurological Surgery
Tae Sung Park , MD Shi Hui Huang Professor of Neurological Surgery
Steven E Petersen , PHD Associate Professor of Neurological Surgery (Neuropsychology)
Wilson Z Ray, MD  Assistant Professor of Neurological Surgery (Pending Executive Faculty Approval)
Keith M Rich, MD  Professor of Neurological Surgery
K. Daniel Riew, MD  Professor of Neurological Surgery
Paul Santiago, MD  Associate Professor of Neurological Surgery
Gerwin Schalk  Adjunct Assistant Professor of Neurological Surgery
Timothy L Shurtleff, MS  Instructor in Neurosurgery
Julie Martha Silverstein, MD  Assistant Professor of Neurological Surgery
Matthew D Smyth, MD  Associate Professor of Neurological Surgery
Todd J. Stewart, MD  Associate Professor of Neurological Surgery
Rene Tempelhoff, MD  Professor of Neurological Surgery
Thomas A Woolsey, MD  George H and Ethel R Bishop Scholar in Neuroscience in Neurological Surgery
Thomas A Woolsey, MD  Professor of Experimental Neurological Surgery
Neill Marshall Wright, MD  Herbert Lourie Professor of Neurological Surgery
Hiroko Yano, MS, PhD  Assistant Professor of Neurological Surgery
Liya Yuan, MS, PhD  Research Instructor in Neurological Surgery
Lukas P Zebala, MD  Assistant Professor of Neurological Surgery
Yanli Zhu, MD, MS  Research Instructor in Neurological Surgery
Gregory Joseph Zipfel, MD  Associate Professor of Neurological Surgery

Department's Website
http://neurosurgery.wustl.edu/

Department of Neurology

Neurology concerns itself with the diseases of brain, spinal cord, peripheral nerves and muscles. An introduction to the anatomy and physiology of the nervous system is presented in the first-year neuroscience course by the Department of Anatomy and Neurobiology, with participation of faculty from the Department of Neurology. A first-year selective titled Clinical Correlations in Neuroscience is available, which is an opportunity for interested students to shadow physicians in neuro-related fields and attend basic science or clinical conferences. Another first-year selective titled Alzheimer’s Disease (AD) in the Clinic and the Lab is also available, which is an opportunity for interested students to get an overview of the most exciting areas of AD clinical and science research. In the second year, the Department of Neurology presents the course Diseases of the Nervous System in conjunction with the Departments of Pathology and Immunology, Neurological Surgery and Ophthalmology. The course emphasizes the pathophysiology, pathology, clinical manifestations and treatment of the major neurological and neurosurgical diseases. The department also participates in the Practice of Medicine course, providing lectures, demonstrations and teaching exercises with patients in neurological physical diagnosis.

In the third year, a four-week clerkship in Neurology introduces students to the clinical care of patients with diseases of the nervous system. Questions pertaining to neurosurgical treatment, neurorehabilitation and ethical issues in management also are addressed. In the fourth year, opportunities exist for many varieties of advanced clinical or research experience. A four-year residency program prepares medical graduates for specialization in neurology. Subspecialty fellowship programs routinely provide additional training in dementia, epilepsy, electrophysiology, electromyography, sleep medicine, cerebrovascular disease and stroke, neuroimmunology, neurological critical care,
neuromuscular disease, neuropsychology and movement disorders.

Thirteen divisions and sections are in the department including the Division of Adult Neurology, the Division of Pediatric and Developmental Neurology and the Division of Neurorehabilitation. See www.neuro.wustl.edu for details.

**Division of Neuropsychology:** Steven Petersen, PhD (division director), Francis Miezin, BS, MS, Bradley Schlaggar, MD, PhD, Gordon Shulman, PhD

**Division of Pediatric and Developmental Neurology:** Michael Noetzel, MD (division director), Mary Bertrand, MD, Janice Brunstrom, MD, Michael Ciliberto, MD, Anne Connolly, MD, Edwin Dodson, MD, Paul Golumbek, MD, PhD, Christina Gurnett, MD, PhD, David Gutmann, MD, David Hinkle, MD, Douglas Larsen, MD, Amy Licis, MD, Soe Mar, MD, Jeffrey Neil, MD, PhD, Arthur Prensky, MD, Bradley Schlaggar, MD (division associate director), PhD, Christopher Smerly, MD, Liu Lin Thio, MD, PhD, Jean Thurston, MD, Judy Weisenberg, MD, Michael Wong, MD, PhD, Kelvin Yamada, MD, John Zempel, MD, PhD, Craig Zaidman, MD

**Aging and Dementia Section:** John Morris, MD (section head), Randall Bateman, MD, Virginia Buckles, PhD, Nigel Cairns, PhD, MRCPath, David Carr, MD, John Cirrito, PhD, Mary Coats, MSN, Anne Fagan, PhD, Nupur Ghoshal, MD, PhD, Jason Hassenstab, PhD, David Holtzman, MD (department chair), Terri Hosto, MSW, Eugene Johnson, Jr., PhD, Jungsu Kim, MD, PhD, Pamela Millsap, MSN, Krista Moulder, PhD, Catherine Roe, PhD, B. Joy Snider, MD, PhD, Christy Tomlinson, MSN.

**Hope Center for Neurological Disorders (specifically those faculty in the Department of Neurology):** Allison Goate, D.Phil (director), Randall Bateman, MD, David Brody, MD, PhD, Janice E. Brunstrom, MD, John Cirrito, PhD, Maurizio Corbetta, MD, Anne Cross, MD, Marc Diamond, MD, Anne Fagan Niven, PhD, Christina Gurnett, MD, PhD, David Holtzman, MD (department chairman), Krzysztof Hyrc, PhD, Mark Jacquin, PhD, Eugene Johnson Jr., PhD, Jin-Moo Lee, MD, PhD, Jeffrey Neil, MD, PhD, Joel Perlmutter, MD, Anneliese Schaefer, PhD, Bradley Schlaggar, MD, B. Joy Snider, MD, PhD, Liu-Lin Thio, MD, PhD, Michael Wong, MD, PhD, Jian Xu, PhD, Kelvin A. Yamada, MD

**Cerebrovascular Disease Section:** Jin-Moo Lee, MD, PhD (section head), David Carpenter, MD, Maurizio Corbetta, MD, Michael N. Diringer, MD, Andria Ford, MD, Ahmed Hassan, MD, Laura Heitch, MD, Salah Keyrouz, MD, Renee Van Stavern, MD, Allyson Zazulia, MD

**Clinical Neurophysiology Section:** Muhammad Al-Lozi, MD, Edward Hogan, MD (section heads), Mary Bertrand, MD, Michael Ciliberto, MD, Anne Connolly, MD, Keith Day, MD, PhD, Stephen Duntley, MD, Lawrence Eisenman, MD, PhD, Christina Gurnett, MD, PhD, Amy Licis, MD, Glenn Lopate, MD, Luigi Maccotta, MD, PhD, Simya Rashid, DO, Liu Lin Thio, MD, PhD, Judy Weisenberg, MD, Michael Wong, MD, PhD, Kelvin Yamada, MD, John Zempel, MD, PhD

**Pediatric Epilepsy and Sleep Section:** Stephen Duntley, MD (section co-head), Liu Lin Thio, MD, PhD (section co-head), Mary Bertrand, MD, Michael Ciliberto, MD, Edwin Dodson, MD, Lawrence Eisenman, MD, PhD, Christina Gurnett, MD, PhD, Jean Holowach-Thurston, MD, Amy Licis, MD, Jay Piccirillo, MD, Simya Rashid, DO, Beth Ward, MD, Judy Weisenberg, MD, Michael Wong, MD, PhD, Kelvin Yamada, MD, John Zempel, MD, PhD

**Adult Epilepsy Section:** Edward Hogan, MD, Laurence Eisenman, MD, PhD, Keith Day, MD, PhD, Luigi Maccotta, MD, PhD, Simya Rashid, DO

**Neuroimaging Section:** Jin-Moo Lee, MD, PhD (section head), Beau Ances, MD, Kevin Black, MD, Maurizio Corbetta, MD, Colin Derdeyn, MD, Francis Miezin, MS, Jeffrey Neil, MD, PhD, Joel Perlmutter, MD, Steven Petersen, PhD, Bradley Schlaggar, MD, PhD, Gordon Shulman, PhD, Tom Videen, PhD, Allyson Zazulia, MD

**Neuroinfectious Disease Section:** David Clifford, MD (section head), Beau Ances, MD

**Neurofibromatosis and Neuro-Oncology:** David Gutmann, MD, PhD

**Movement Disorders Section:** Joel Perlmutter, MD (section head), Kevin Black, MD, Meghan Campbell, PhD, Susan Criswell, MD, Marc Diamond, MD, Gammon Earhart, PhD, Erin Foster, OTD, Johanna Hartlein, APRN, Tamara Hershey, PhD, Morvarid Karimi, MD, Paul Kotzbauer, MD, PhD, William
Courses

First Year

Selectives

M04 5017 01 CLINICAL CORRELATIONS IN NEUROSCIENCE
Instructor: Allyson Zazulia, MD, 362-2560

Clinical faculty for this selective are members of the following departments or divisions: Neurology, Pediatric Neurology, Neurological Surgery, Neuro ICU, Radiology, Pathology and Immunology, and Psychiatry. Students will shadow physicians, attend rounds and meet for seminars and demonstrations to discuss particular patient cases and research studies. Teaching Objective: to gain exposure to medical career options involving neuroscience.

M04 582 01 ALZHEIMER’S DISEASE IN THE CLINIC AND THE LAB
Instructors: John C. Morris, MD, and other faculty affiliated with the Knight Alzheimer’s Disease Research Center, Department of Neurology. For information, contact Jennifer Phillips at 286-2882 or phillipsj@braxas.wustl.edu.

Alzheimer’s disease (AD) affects more than 5 million Americans, and will increase substantially as our population ages. Of the top 10 causes of death in the United States, AD is the only disease without any way to prevent, cure or slow the progression. The cost of caring for AD patients has been estimated at over $172 billion annually, and the human toll on patients and family members can be devastating. Patients and families turn to primary care and specialist physicians (e.g., neurologists, psychiatrists, geriatricians) for answers to their plight. The good news for physicians is that research on AD is moving at a rapid pace. Exciting advances in our understanding of AD etiology, early diagnosis and treatment are changing the landscape of dementia care.

Students in this course are offered a dynamic and interactive overview of the most exciting areas of AD clinical and science research from one of the top Alzheimer’s disease research centers in the world. Find out how amyloid plaques and other AD-related abnormalities form in the brain and new discoveries about
their possible reversal! The course includes lecture and student presentation components, plus opportunities to observe patients and families in an active neurology memory disorder clinic, participate in neuropathology evaluations of demented individuals, experience and administer psychometric evaluation tools and interact with investigators from the fields of molecular genetics, cell biology and neuropathology.

Second Year

M35 632 DISEASES OF THE NERVOUS SYSTEM
Instructor: Allyson Zazulia, MD, 362-2560

The goal of this course is to provide an introduction to diseases of the central and peripheral nervous systems, including their clinical manifestations, pathology, pathophysiology and pharmacotherapy. The course includes reading assignments, lectures, laboratories, conferences and clinical presentations.

Third Year

M35 720 NEUROLOGY CLERKSHIP
Instructor: Robert Naismith, MD, 362-3998

A full-time, four-week clerkship is provided on the inpatient neurology services at Barnes-Jewish Hospital south. Patients are assigned to students, who evaluate and follow them with the resident staff and discuss them regularly in conferences with the senior neurological staff. Students also work in the neurology clinic under staff supervision and attend a series of lectures on neurosurgical problems. The goal of this rotation is to gain expertise in the evaluation and treatment of patients with neurologic diseases.

Up to two students may elect to obtain their clerkship experience on the neurosurgery service. Up to two students may elect a two-week experience in either inpatient or outpatient pediatric neurology. Students participate in the neurology specialty clinics at St. Louis Children’s Hospital, working under the supervision of pediatric neurology fellows and senior staff.

M25 730 PHYSICAL MEDICINE AND REHABILITATION CLERKSHIP
Instructor: Oksana Volshteyn, MD, 454-7757

The clerkship in PM&R for third-year medical students provides an opportunity to gain basic knowledge and clinical skills in evaluation and management of a wide range of neurological and musculoskeletal diseases and conditions that require specialized rehabilitative medical and therapeutic care. Students spend two weeks on the Spinal Cord Injury Unit (SCI) and two weeks on the Brain Injury (BI) and Stroke Unit at The Rehabilitation Institute of St. Louis. Students are expected to be a part of the rehabilitation team, follow two to three patients, participate in daily morning rounds, participate in performing consults and attend team meetings and family conferences.

Students are required to attend several outpatient clinics such as SCI, BI, Amputee and Stroke. During the entire rotation, students work together with PM&R residents and fellows, and under direct guidance of the neurorehabilitation faculty. The usual duty hours are 7-7:30 a.m. to 5 p.m. on weekdays and 8 a.m. to noon on Saturdays. There is no night call.

Students are required to attend all PM&R curriculum lectures and conferences. On the first day of rotation, students meet with the PM&R program director to go over goals, objectives and schedules. Upon
completion of the rotation, students are required to fill out the evaluation form to provide feedback regarding the rotation experience.

Fourth Year

Electives

L41 (Bio) 5663 NEUROBIOLOGY OF DISEASE
A description of this course may be found under Division of Biology and Biomedical Sciences. This course is offered in alternate years. The faculty member in charge of the course should be contacted for specific times. Note — the number preceding the course title indicates that the course carries credit in the Graduate School of Arts and Sciences.

M35 815 CONSULT NEUROLOGY
Instructor(s): Robert Naismith, MD, 362-3998
Location: Barnes-Jewish Hospital including Medical Floors, Surgery Floors, Neuro ICU and Emergency Department
Elective Contact: Lorraine Edrington, 362-3998
Other Information: Visiting students will attend Orientation on the first day of the elective. Fourth-year Washington University medical students may begin with their team if they are comfortable with the rotation and already went through the course.
Enrollment limit per period: 2
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

The student will evaluate patients with neurological manifestations of medical, surgical and psychiatric diseases. The student will participate in caring for patients under the supervision of the consult resident and attending physician. The student also will attend weekly clinical conferences, including Neurology Grand Rounds.

Student time distribution: Inpatient 90%, Outpatient 5%, Conferences/ Lectures 5%; Subspecialty Care 100%
Major teaching responsibility: Single attending and resident
Patients seen/weekly: 10-15
On call/weekend responsibility: No call/weekends until noon Saturday

M35 816 INPATIENT NEUROLOGY SUBINTERNSHIP
Instructor(s): Robert Naismith, MD, 362-3998
Location: 11400 and 11500 Barnes-Jewish Hospital
Elective Contact: Lorraine Edrington, 362-3998
Other Information: Visiting students will attend Orientation on the on the first day of the elective. Fourth-year Washington University medical students may begin with their team if they are comfortable with the rotation and already went through the course.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

Students will function as a subintern on the inpatient neurology service under the supervision of the junior resident, the chief resident and the attending physicians. The student will also attend weekly clinical conferences. This elective would be a good option for Washington University students who are interested in a career in neurology, or would like additional neurology experience before their residency. It would also be good for visiting students interested in neurology who would like a closer look at our program.

Student time distribution: Inpatient 100%
Major teaching responsibility: Attending physicians, chief residents, junior resident
Patients seen/weekly: 6
On call/weekend responsibility: Every sixth night

**M35 830 NEURO-ONCOLOGY**
Instructor(s): David H. Gutmann, MD, PhD, 362-7379
Location: Suite C, sixth floor, Center for Advanced Medicine
Elective Contact: David H. Gutmann, MD, PhD, 362-7379
Other Information: Students should report to Suite C, sixth floor, Center for Advanced Medicine, 8:30 a.m. first day of elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

Provide an outpatient-oriented combined pediatric and adult neuro-oncology experience for fourth-year medical students. (1) Attend multidisciplinary adult and pediatric neuro-oncology clinics and case conferences (tumor boards); (2) Attend adult and pediatric radiation oncology clinics; (3) Attend neuropathology brain tumor review; (4) Participate in subspecialty brain tumor clinics; (5) Attend monthly brain tumor research conferences.

Student time distribution: Outpatient 90%, Conferences/Lectures 10%; Subspecialty Care 100%
Major teaching responsibility: Team teaching in clinic
Patients seen/weekly: 50 patients
On call/weekend responsibility: None

**M35 851 CLINICAL ASPECTS OF AGING AND DEMENTIA**
Instructor(s): John C. Morris, MD, and B. Joy Snider, MD, PhD, Jennifer Phillips, MPA (coordinator), 286-2882
Location: Knight Alzheimer's Disease Research Center (ADRC) 4488 Forest Park Ave. (two-story brick building at intersection with Taylor)
Elective Contact: Jennifer Phillips, MPA (coordinator), 286-2882, phillipsj@wustl.edu
Other Information: Contact Jennifer Phillips at least one week prior to first day of elective to set up orientation.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 9, 13, 17, 21, 33, and 37.

This elective focuses on the characterization of the clinical and cognitive features of healthy brain aging and the distinction of dementia from healthy aging. Experienced clinicians will review the differential diagnosis of dementia with the students, including Alzheimer's disease, dementia with Lewy bodies, frontotemporal dementias, cerebrovascular disorders and affective disorders. The student will gain proficiency in interviewing techniques and in the neurologic examination of the geriatric patient, be introduced to neuropsychology, neuropathology, biomarkers, neuroimaging, genetics and other biomedical procedures important in the diagnostic evaluation of older adults. Experience in community assessment and long-term care is provided. Demonstration of clinical trials of experimental agents used in memory disorders and practical aspects of the management of the demented patient and his or her family is provided. An interdisciplinary approach is emphasized and students will have opportunity to interact with physicians, nurse clinicians, psychologists and social workers. Students have the option of becoming certified in the Clinical Dementia Rating, the gold standard in dementia staging.

Student time distribution: Research and Clinical Patient Evaluation 80%, Conferences/Lectures 20%; Subspecialty Care 100%
Major teaching responsibility: Attending neurologists, psychiatrists and geriatricians involved in the evaluation of memory and aging
Patients seen/weekly: 6-12
On call/weekend responsibility: None

**M35 860 PEDIATRIC NEUROLOGY**
Instructor(s): Douglas Larsen, MD, MEd, 454-6042
Location: 12th Floor, Suite 1260 Northwest Tower
We offer two senior electives that students may choose between: (1) On our Inpatient Elective, the student participates as a full member of the neurology ward team and is directly responsible for a proportion of patients on the service under the direction of the senior pediatric neurology resident. The student may take night call every third or fourth night, during which time s/he is responsible for the medical care of the entire ward, as well as for emergency admissions under supervision of a pediatric resident. Formal teaching rounds with the attending pediatric neurologist are held two to three times a week, and informal teaching rounds are held daily with the attending and senior residents. (2) On our Outpatient Elective the student will attend daily outpatient clinics, during which time s/he will be able to evaluate outpatient problems under faculty guidance. There are pediatric neurology clinics five days a week in addition to teaching conferences. This elective allows students to see many new and return patients in a tutorial type of setting since patients are immediately reviewed with senior faculty. A combination of inpatient/outpatient experiences may be arranged on an individual basis to meet the needs of the student.

Student time distribution: Inpatient rotation 80%, Outpatient rotation 80%, Conferences/Lectures 20%; Subspecialty Care 100%
Major teaching responsibility: Inpatient: Single attending and senior resident, Outpatient: Multiple attendings
Patients seen/weekly: Inpatient: 5-9, Outpatient: 20-25
On call/weekend responsibility: Inpatient: Every fourth night; Outpatient: None

M35 861 NEUROLOGY/NEUROSURGERY ICU
Instructor(s): Michael Diringer, MD, 362-2999
Location: 10400B Barnes-Jewish Hospital
Elective Contact: Liz Vansickle, 362-2999
Other Information: Students report to 10400 ICU, 7:30 a.m. first day of elective
Enrollment limit per period: 2
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

The student will be integrated into the Critical Care Team that provides care in the Neurology/Neurosurgery ICU. Diseases frequently encountered include intracerebral hemorrhage, head trauma, subarachnoid hemorrhage and stroke. The student will follow patients, participate in rounds and perform some procedures under supervision. Didactic sessions will be provided as conferences or lectures from the ICU attending.

Student time distribution: Inpatient 80%, Conferences/Lectures 20%; Subspecialty Care 100%
Major teaching responsibility: Fellows and residents
Patients seen/weekly: 25
On call/weekend responsibility: Variable

M35 865 ADULT AND PEDIATRIC EPILEPSY
Instructor(s): Edward Hogan, MD, 362-3944
Location: 11400 EMU Barnes-Jewish Hospital
Elective Contact: Donna Theiss, 362-7845, theissd@neuro.wustl.edu
Other Information: Students should meet on 11400 EMU 9 a.m. first day of elective
Enrollment limit per period: 2
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

Students will learn how epileptologists diagnose and manage epilepsy in adults and children. They will learn how to use the history and physical exam and laboratory studies such as EEG, MRI, PET and SPECT
to diagnose and manage patients with new onset epilepsy, established epilepsy, and medically
intractable epilepsy. They will become familiar with the medical management of epilepsy as well as the
treatment options for medically intractable epilepsy including surgery, the vagus nerve stimulator and
the ketogenic diet. They will also learn how to manage the co-morbid conditions that accompany epilepsy
such as depression, behavioral problems, cognitive impairment, sleep disturbance, and non-epileptic
events. Students will accomplish these goals by attending epilepsy clinics and rounding on the inpatient
epilepsy service with the epilepsy team at Barnes-Jewish Hospital and St. Louis Children’s Hospital. They
will attend the Adult Epilepsy Conference, the Pediatric Epilepsy Conference and Neurology Grand
Rounds. Students will also have the opportunity to observe epilepsy surgery if they wish. They will have
the option to present one 15-30 minute talk on a topic relevant to epilepsy.

Student time distribution: Inpatient 70%, Outpatient 10%,
Conferences/Lectures 20%; Subspecialty Care 100%
Major teaching responsibility: Attending faculty, fellows
Patients seen/weekly: 40
On call/weekend responsibility: None

M35 871 CLINICAL NEUROIMMUNOLOGY AND MULTIPLE SCLEROSIS
Instructor(s): Becky Parks, MD
Location: Third Floor McMillan Hospital Building
Elective Contact: Nanette Bladdick, 362-3307
Other Information: Contact Dr. Parks to arrange time to report on first day of elective
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 5, 13, 17, 21, 29, 33, 37, and 41.

Students will have the opportunity to interview and examine patients with multiple sclerosis or related
neuromunological disorders. They will become familiar with the differential diagnosis of MS,
appropriate laboratory evaluation and common MRI findings in MS. This elective will also familiarize
students with the various immunomodulating agents used to treat MS. In addition to learning about MS
in general, they will gain practical knowledge about evaluation and treatment of spasticity, neurogenic
bladder, fatigue, cognitive dysfunction and depression. As time allows, they may be able to observe
patient evaluations in our clinical trials.

Third-year medical students rotating as part of a core rotation will be expected to attend the required
conferences for third-year students. Students choosing this elective to gain additional experience in the
field of neurology will be expected to attend Neurology Grand Rounds on Friday morning. Students may
also attend our MS Journal Club and the MS Patient Care conference held on the first and third Thursdays
of every month, respectively.

Student time distribution: Inpatient 10%, Outpatient 80%, Conferences/Lectures 10%; Subspecialty
Care 100%
Major teaching responsibility: Becky Parks, MD
Patients seen/weekly: 30
On call/weekend responsibility: None

M80 807 PHYSICAL MEDICINE AND REHABILITATION
Instructor(s): Neringa Juknis, MD, 454-7757, juknisn@neuro.wustl.edu
Location: Suite 2304, Rehabilitation Division, Neurology Department, 4444 Forest Park
Elective Contact: Donna Barbier, 454-7757, barbierd@neuro.wustl.edu
Other Information: Students report to Suite 2304, Rehabilitation Division, Neurology Department, 4444
Forest Park, 8 a.m. first day of elective.

Rotation location: The Rehabilitation Institute of St. Louis, 4455 Duncan Ave.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

The elective is designed to provide the student with a broad introduction to the field of Physical Medicine
and Rehabilitation. The major objective of this clinical elective is to achieve greater knowledge of the neurological and musculoskeletal diseases and their treatment and gain understanding of basic principals of rehabilitation. The student will learn the clinical and rehabilitative care of patients with strokes, traumatic brain injury, spinal cord trauma and diseases, and limb amputations. Student will gain clinical skills in the evaluation and management of functional impairments. Students will be expected to participate in daily rounds on inpatient rehabilitation units with the clinical care team, follow three to five patients, attend multidisciplinary team conferences and family meetings, and attend outpatient rehabilitation clinics in spinal cord, stroke, traumatic brain injury, and amputee. Teaching and supervision is provided by the physiatry and neurology faculty of the Division of Rehabilitation. Rehabilitation and neurology residents are involved in student teaching as well. Students are required to participate in didactic teaching conferences within the PM&R residency.

This rotation is particularly useful for students considering careers in rehabilitation, neurology, geriatrics, primary care, neurosurgery or any other field that will require experience in the evaluation and management of patients with physical impairment and disabilities.

Student time distribution: Inpatient 80%, Outpatient 10%, Conferences/Lectures 10%; Subspecialty Care 100%
Major teaching responsibility: Attending faculty and residents
Patients seen/weekly: 20
On call/weekend responsibility: None

Research

(M35 900)

Beau Ances, M.D., Second Floor, Storz Building, 747-8423. Neuroimaging of Neurodegenerative Disorders. Students can work in a neuroimaging laboratory that is focused on translational discovery of neuroimaging biomarkers for neurodegenerative diseases. The laboratory focuses on the pathogenesis of HIV dementia and Alzhiemer’s disease. We are investigating the effects of neurodegenerative diseases on brain networks using blood oxygen level dependent imaging and aterial spin labeling. Multiple projects that involve bioengineering, neuroimaging and infectious disease are available depending on the interest of the student.

Randall Bateman, M.D., 304 Biotechnology Center, 747-7066. Central Nervous System protein metabolism in aging and dementia. This research elective will expose the student to translational research in the study of Alzheimer’s disease. The student will participate in multiple areas of the research including participant consent, enrollment and admission to a research hospital unit. Lumbar catheter placement and CSF sample collection will be demonstrated. The student will participate in sample analysis including processing for mass spectrometry quantitation, ELISA and western gel methods. Quantitation, analysis and modeling of the data will be taught in the context of data interpretation and study design.

Maurizio Corbetta, M.D., 4525 East Building, 362-7620. The elective will provide hands-on experience in using functional neuroimaging (PET and fMRI) to map regions of the human brain responsible for vision and attention, and to study recovery of function in patients with cognitive deficits (aphasia, neglect) and brain injury.

Anne H. Cross, M.D., Third Floor, McMillan Hospital Building, 362-3293. Understanding interactions of the immune system with the central nervous system as it relates to multiple sclerosis and other neuroimmunological disorders. Our goal is to understand how immune cells cross the blood-brain barrier and initiate the cascade of events leading to lesions of multiple sclerosis. The student will be given a laboratory project on which to work, which may involve animal models, cell culture or studies of human samples (CSF, blood, autopsied specimens), depending upon the individual interests. Interested students should contact Dr. Cross in advance before signing up for this research.
Marc Diamond, M.D., 305 Biotechnology Center, 286-2165. Molecular Mechanisms and Therapeutics for Neurodegenerative Diseases. Students will have the opportunity to work in a basic science laboratory that is focused on translational discovery: identifying therapeutic mechanisms and developing drugs and drug targets for neurodegenerative diseases. The laboratory is focused on pathogenesis of the tauopathies, and of Huntington disease. In the tauopathies, we are testing the hypothesis that propagation of protein misfolding occurs by transfer of protein aggregates between cells in a manner similar to prions. In Huntington disease, we are using advanced biophysical techniques to identify and characterize proteins that interact with and regulate the misfolding of mutant huntingtin. Multiple projects are available that involve biophysics, biochemistry, cell biology and animal studies, depending on the interest of the student.

Robert T. Naismith, M.D., 310B McMillan Hospital Building, 747-0432. Clinical Imaging Research in Multiple Sclerosis (8 weeks). The student will learn about neuroimaging, imaging analyses, data collection, data management and clinical study endpoints in multiple sclerosis (MS). They will observe patient participants undergoing a detailed evaluation of disability measures, such as ambulation, symptom scales, cognition, vision, upper extremity function, etc. They will witness the entire process of image acquisition, processing, analyses and data extraction. They will have the opportunity to interact with many people who are vital to the research, including research coordinators, imaging technologists, imaging physicists/chemists and specialized research clinicians (i.e. neurocognitive and physical therapy research specialists).

The student will assist with hands-on clinical investigative research. They will gain an excellent appreciation of MS, from its pathophysiology within the central nervous system to how it affects the neurological function of individuals. Through detailed and quantitative imaging analysis, the student will become very adept at analyzing brain MRI scans. They will mark and track lesions, determine their effects on clinical function, normal appearing white matter, cortex, and gray-matter structures. They will become familiar with Amira Imaging Analysis Software, SPSS Statistical Analysis Software, SIENA Volume Analysis Software and Matlab Imaging Analysis Software.

Steven E. Petersen, Ph.D., 2108 East Building, 362-3319. This lab is interested in the functional localization of higher brain processes, particularly those processes related to language, memory and visual attention. Our main approach to these issues is the use of PET and fMRI activation, but we also study task performance in normal and selected patient populations.

Joel S. Perlmutter, M.D., Second Floor, East Building, 362-6026. Pathophysiology of Movement Disorders. The lab is primarily interested in etiology, pathophysiology and treatment of basal ganglia disorders. We have several studies of PD. We investigate mechanisms of action of deep brain stimulation, a dramatic new treatment. These studies combine PET, cognitive testing and quantified measures of movement. We also test new drugs that might rescue injured nigrostriatal neurons (a model of PD). For these, we use PET to measure dopamine pathways and also quantify motor behavior. We also have an active program developing and validating neuroimaging biomarkers for PD and integrity of the nigrostriatal pathway that includes studies in people and animal models of PD. We have an active program combining a variety of approaches to develop biomarkers and investigate the pathophysiology of dementia associated with PD. We use PET to measure radioligand binding and sensorimotor processing in dystonia. We developed a new animal model of dystonia to investigate pharmacologic and physiologic changes. We use PET to investigate drug-mediated pathways in the brain and parse out the effects of selective dopaminergic agonists. We also are working to develop MR-based methods including DTI and resting state functional connectivity to investigate brain mechanisms underlying PD and dystonia.

Brad A. Racette, M.D., Fourth Floor, McMillan Hospital Building, 747-0531. Our lab is primarily interested in environmental risk factors associated with Parkinson disease. We use a variety of techniques to study these risk factors, including traditional field epidemiology, in which we evaluate workers exposed to metals; neuroimaging, in which we study the pathophysiology of toxin-mediated parkinsonism;
geographic information systems research, by where we associate passive environmental toxin exposures with incident and prevalent Parkinson disease, and neuropathologic studies in manganese-exposed workers from South Africa. There are numerous opportunities available for students to be involved with any of these projects. Students will have some clinical exposure as well to familiarize them with the pertinent clinical syndrome.

Marcus E. Raichle, M.D., Neuroimaging Laboratory, Second Floor, East Building, 362-6907. In vivo brain hemodynamic, metabolic and functional studies of human cognition and emotion using cyclotron-produced isotopes and emission tomography (PET) as well as functional magnetic resonance imaging (fMRI) in humans. See also Steven E. Petersen, Ph.D.

B. Joy Snider, M.D., Ph.D., 225 Biotechnology Center, 747-2107. Protein degradation and calcium homeostasis in cellular models of neurodegenerative disorders. We study regulation and dysfunction of the ubiquitin-proteasome system in cultured cells, including primary neuronal cultures. A second set of projects is aimed at elucidating the role of intracellular calcium homeostasis in neuronal dysfunction and death.

Gregory Wu, MD, PhD., Third Floor, McMillan Hospital Building, 362-3293. Understanding how immune responses are generated that target the central nervous system. Specifically, studies on antigen presentation cell contributions to autoimmune animal models of multiple sclerosis. Our goal is to understand what cellular interactions are critical to the development of immune-mediated demyelination.

Kel Yamada, M.D., 204 Biotechnology Center, 362-3533, 454-6120. Research on mechanisms modulating synaptic transmission in the central nervous system using electrophysiological techniques in neuronal cell cultures, in brain slices and in live rodents. Studies are relevant to epilepsy, neonatal brain injury and stroke.

Faculty

David Michael Holtzman , MD Head of the Department of Neurology
Aninda Bhat Acharya , MD Instructor in Clinical Neurology
Muhammad Taher Al-Lozi , MD, MS Professor of Neurology
Denis Ian Altman , MBBCH Associate Professor of Clinical Neurology
Lizette Alvarez-Montero , MD Instructor in Clinical Neurology
Beau Mark Ances , MD, MS, PHD Assistant Professor of Neurology
Sylvia Awadalla , MD Professor of Neurology
Robert H Baloh , MD, PHD Adjunct Assistant Professor of Neurology
Randall John Bateman , MD Associate Professor of Neurology
Randall John Bateman , MD Charles F and Joanne Knight Distinguished Professor of Neurology
M. Carolyn Baum , MA, PHD Professor of Neurology (Occupational Therapy)
Max Prely Benzaquen Instructor in Clinical Neurology
Christine R. Berg , BSOT, MS, PHD Assistant Professor of Neurology
Mary Ellen Bertrand , MD Associate Professor of Neurology
Rebecca L Birkenmeier , MS Research Assistant Professor of Neurology
Alan J Birtwistle Assistant Professor of Clinical Neurology
Neringa Juknys, MD Assistant Professor of Neurology
Morvarid Karimi, MD Assistant Professor of Neurology
Richard T. Katz, MA, MD Professor of Clinical Neurology
Salah G. Keyrouz, MD Assistant Professor of Neurology
Syed Ahmed Khader, MD Instructor in Clinical Neurology
Albert H Kim, MA, MD, PHD Assistant Professor of Neurology
Jungsu Kim, PHD Assistant Professor of Neurology
Kathleen Marie Kniepmann, DED, M PH Instructor in Neurology
Paul Thomas Kotzbauer, MD, PHD Assistant Professor of Neurology
Ashok Kumar, MD Assistant Professor of Clinical Neurology
Terrance T. Kummer, MD, PHD Instructor in Neurology (Pending Dean's Approval)
Adam J. LaBore, MD Associate Professor of Neurology
Catherine Eckels Lang, MS, PHD Associate Professor of Neurology
Douglas P. Larsen, MD Assistant Professor of Neurology
Linda J Larson-Prior, MA, PHD Research Associate Professor of Neurology
Jin-Moo Lee, MD, PHD Associate Professor of Neurology
Walter Lemann III, MD Associate Professor of Clinical Neurology
Alison M Leston, MD, PHD Assistant Professor of Clinical Neurology
Mingjie Li, MD, PHD Research Assistant Professor of Neurology
Amy K Licis, MD Instructor in Neurology
Gerald P Linette, MD, PHD Associate Professor of Neurology
Jane Loitman, MD, MS Assistant Professor of Clinical Neurology
Glenn Lopate, MD Associate Professor of Neurology
Brendan Patrick Lucey, MD Instructor in Neurology
Luigi Maccotta, MD, PHD Assistant Professor of Neurology
Christine L. MacDonald, MS, PHD Research Instructor in Neurology
John F Mantovani, MD Associate Professor of Clinical Neurology
Soe S Mar, MD Associate Professor of Neurology
Robert P Margolis, MD Assistant Professor of Clinical Neurology
John P Metzler, MD Associate Professor of Neurology
Francis M Miezin, MS Research Associate Professor of Neurology
Jeffrey D Milbrandt, MD, PHD Professor of Neurology
Timothy M Miller, MD, PHD Assistant Professor of Neurology
Pamela F Millsap, BN, MSN Research Instructor in Neurology
Kerri A Morgan, MS Instructor in Neurology
John Carl Morris, MD Harvey A and Doris H. Friedman Professor of Neurology
Krista L Moulder, PHD Research Assistant Professor of Neurology
Robert T Naismith II, MD Assistant Professor of Neurology
Jeffrey J Neil, MD, PHD Allen P. and Josephine B. Green Professor of Neurology
Anne Fagan Niven, PHD Research Professor of Neurology
Michael Justin Noetzel, MD Professor of Neurology
Barbara Jean Norton, MHS, PHD Professor of Neurology
Becky J Parks, MD Associate Professor of Neurology
David M Peeples, MD Instructor in Clinical Neurology
Karen J Pentella, MD Assistant Professor of Clinical Neurology
Joel S Perlmutter, MD Professor of Neurology
Alan Pestronk, MD Professor of Neurology
Steven E Petersen, PHD James S. McDonnell Professor of Cognitive Neuroscience in Neurology
Daniel Phillips, BE, MD Assistant Professor of Clinical Neurology
Laura Piccio, MD Research Assistant Professor of Neurology
Jose A Pineda Soto, MD Assistant Professor of Neurology
Stephanie K Powell, MS, PHD Instructor in Clinical Neurology
William John Powers, MD Adjunct Professor of Neurology
Heidi Prather, DOST Associate Professor of Neurology
Brad Alan Racette, MD Professor of Neurology
Marcus E Raichle, MD Professor of Neurology
Samiya Rashid, MD Assistant Professor of Neurology
David Martin Reisler, MPH, MD Assistant Professor of Clinical Neurology
Dave A Rengachary, MD Instructor in Clinical Neurology
Terri L Riutcel, MD Associate Professor of Neurology
Catherine M Roe, MA, PHD Research Assistant Professor of Neurology
James R Rohrbaugh, MD Associate Professor of Clinical Neurology
Joshua Bennett Rubin, MD, MS, PHD Associate Professor of Neurology
Rimma Ruvinskaya, MD Assistant Professor of Neurology
Anneliese M Schaefer, BBA, JD, PHD Research Associate Professor of Neurology
Bradley L Schlaggar, MD, PHD A Ernest and Jane G Stein Associate Professor of Neurology
Earl R Schultz, MD Professor of Clinical Neurology
Jieya Shao, PHD Research Instructor in Neurology
Christian T Sheline, PHD Adjunct Research Associate Professor of Neurology
Yvette I Sheline, MA, MD Professor of Neurology
Gordon L Shulman, MS, PHD Research Professor of Neurology
Eli R Shuter, MD Associate Professor of Clinical Neurology
Todd B Silverman Instructor in Clinical Neurology
Barry A. Singer Assistant Professor of Clinical Neurology
Christopher D Smyser, MD Assistant Professor of Neurology
Barbara Joy Snider, MD, PHD Associate Professor of Neurology
Abraham Z Snyder, MD, PHD Research Associate Professor of Neurology
Richard Brian Sommerville, MD Assistant Professor of Neurology
Tara V. Spevack, MS, PHD Instructor in Clinical Neurology
Susan L Stark, MS, PHD Assistant Professor of Neurology
Department of Obstetrics and Gynecology

The Department of Obstetrics and Gynecology has clinical teaching services located at Barnes-Jewish Hospital and Missouri Baptist Medical Center under the following director:

George A. Macones, MD, MSCE, professor and head, Department of Obstetrics and Gynecology

In addition, for the purposes of teaching, clinical care and research, the Department of Obstetrics and Gynecology is divided into subspecialty divisions under the following directors:

Gynecologic Oncology: David G. Mutch, MD
Maternal-Fetal Medicine: George A. Macones, MD, MSCE
Reproductive Endocrinology and Infertility: Randall R. Odem, MD
General Obstetrics and Gynecology: Jeffrey F. Peipert, MD, PhD
Uro-Gynecology: L. Lewis Wall, MD, PhD
Research: Kelle H. Moley, MD (Basic Research), Jeffrey F. Peipert, MD, PhD (Clinical Research)
Ob/Gyn Residency Program Director: Jeffrey F. Peipert, MD, PhD

Instruction in obstetrics and gynecology is provided during all four years of the medical curriculum, beginning with an introductory course in the first year as a component of Clinical Medicine. Teaching in the second year is designed to correlate basic science with the physiologic basis of normal pregnancy and parturition, reproductive biology, infertility and reproductive endocrinology and gynecologic malignancies. All third-year medical students participate in a six-week clinical clerkship in obstetrics and gynecology. This is divided into three two-week components of outpatient OB/GYN, inpatient obstetrics and inpatient gynecology. In the fourth year, students may elect a subinternship in the listed clinical subspecialties or a research elective.

Courses

First Year

As a component of the course in Clinical Medicine offered by the Department of Medicine, the student is introduced to the essentials in the medical history and examination for the gynecological evaluation of the adult woman patient.

Second Year

Second-year students are introduced to obstetrics and gynecology with lectures in reproductive biology that apply and expand upon pelvic anatomy and gynecologic and obstetric physiologic principles taught in the first year.

M45 635B OBSTETRICS AND GYNECOLOGY
Instructor: D. Michael Nelson, MD, PhD, 362-1016
The obstetrical component of this course emphasizes the physiologic basis of normal pregnancy, parturition, labor and delivery, and adaptations of other organ systems to pregnancy. Pathophysiology of pregnancy, pregnancy complications and deviations from normal labor will also be introduced. The gynecologic component of the course reviews embryology and genetics of practical use for clinicians. This provides a foundation to overview adolescent gynecology, amenorrhea, abnormal uterine bleeding, reproductive endocrinology, infertility, menopause, surgical anatomy, and diagnosis and treatment of gynecologic neoplasm.

Third Year
M45 730 OB/GYN CLERKSHIP
Clerkship Director: Tammy Sonn, MD
Clerkship Coordinator: Trish Werner, 362-3126
All third-year medical students participate in a six-week clinical clerkship in Obstetrics and Gynecology. This is divided into three two-week components of outpatient OB/GYN, inpatient obstetrics and inpatient gynecology. Comprehensive study of the reproductive health needs of women in both the office setting and the surgical setting is the focus of the curriculum. Students are actively involved in all settings of health care delivery: outpatient faculty clinics within all specialties, resident ambulatory clinics, operating rooms for all obstetric or gynecologic cases, inpatient floors of L&D and Gynecology, and in the ED or off-service floors seeing consults. Faculty, fellows, residents, and nurse practitioners provide teaching for this rotation. Student-directed didactics include the faculty and chief resident lecture series, surgical skills session and faculty-assigned preceptor groups that meet throughout their six-week rotation.

Fourth Year

Fourth-year students wishing to take an externship or research elective can choose from a variety of courses.

Electives

M10 823 OBSTETRICAL ANESTHESIA
Instructor(s): Swarup Varaday, MD, 362-6252
Location: Barnes-Jewish Hospital, South Campus
Elective Contact: Swarup Varaday, MD, 362-6252 or 362-2628
Other Information: Students should report to 5400 Labor and Delivery, 7 a.m. first day of elective.
Enrollment limit per period: 1
Valid start weeks for 2 or 4-week blocks are: Weeks 1, 3, 5, 7, 9, 11, 13, 15, 17, 19, 21, 23, 25, 27, 29, 31, 33, 35, 37, 39, 41, and 43.

The medical students will learn the different analgesia/anesthetic options for the labor patient. They will also learn how the physiological adaptations of pregnancy influence anesthetic management. They will be actively involved in the parturient's management, i.e., starting an IV and placement of spinal, epidural or CSE (combined spinal epidural) anesthetics. They will also attend the OB anesthesia conferences and interview patients in labor (with an OB anesthesia attending).

Student time distribution: Inpatient 90%, Conferences/Lectures 10%; Subspecialty Care 100%
Major teaching responsibility: Attending, Senior Resident
Patients seen/weekly: 20
On call/weekend responsibility: None (optional)

M45 804 OB/GYN OUTPATIENT CARE SUBINTERNSHIP
Instructor(s): Andrea L.P. Stephens, MD, 362-1016
Location: Room 311, Maternity Hospital, Barnes-Jewish Hospital, South Campus
Elective Contact: Patti Sasse, 362-1016
Other Information: Students should contact Patti Sasse one to two weeks before rotation for instructions of start time/location for first day of elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

This experience is designed to primarily acquaint the student with the diagnosis and care of outpatients. Students will work one-on-one with attending staff to focus on an overview of evaluation, diagnosis and treatment of common obstetric and gynecologic concerns. The subintern will spend one to three half days weekly participating in outpatient surgery under the supervision of attendings and house staff, and five to six additional half days in clinic and private offices. Overnight OB call will be selected over a weekend
to acquaint the student with the house staff and hospital, providing opportunity to participate in deliveries. A 30-45 minute presentation to attendings and house staff on a selected OB GYN topic will culminate the rotation.

Student time distribution: Outpatient 100%; Primary Care 100%
Major teaching responsibility: Attending staff
Patients seen/weekly: 5-20/day
On call/weekend responsibility: See above description

**M45 810 OB-GYN ENDOCRINOLOGY-INFERTILITY SUBINTERNSHIP**
Instructor(s): Randall Odem, MD, Arnold Bullock, MD, Amber Cooper, MD, Emily Junghem, MD, Sarah Keller, MD, Susan Lanzendorf, PhD, Kelle Moley, MD, and Valerie Ratts, MD, 286-2421
Location: 4444 Forest Park Ave., Suite 3100
Elective Contact: Randall Odem, MD, 286-2421
Other Information: Students report to Dr. Odem first day of elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

The subintern will participate (in the office and hospital) in the study and treatment of women with reproductive endocrine disorders and infertility. S/he will attend and present in conferences, attend surgery, observe assisted reproductive technology procedures, have assigned reading and be an integral part of the reproductive endocrine service. Opportunities for clinical research projects in reproductive endocrinology are also available.

Student time distribution: Inpatient 10%, Outpatient 75%, Conferences/Lectures 15%; Primary Care 10%, Subspecialty Care 90%
Major teaching responsibility: Attendings, fellows and resident
Patients seen/weekly: 75
On call/weekend responsibility: None

**M45 830 GYN ONCOLOGY SUBINTERNSHIP**
Instructor(s): David Mutch, MD, 362-3181
Location: Maternity Hospital, Barnes- Jewish Hospital, South Campus
Elective Contact: David Mutch, MD, 362-3181
Other Information: Students report to Dr. Mutch, 4th Floor Maternity Hospital, 9 a.m. first day of elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37 and 41.

The subintern will take part in the work-up of tumor patients prior to surgery and/or radiotherapy, assist in pelvic operations, help render perioperative care, and review pathology specimens and slides. S/he will participate in GYN Tumor Clinic sessions, make hospital rounds with house staff, accompany chief residents on consultations, and attend OB-GYN conferences. Opportunities for a clinical or basic research project in gynecologic malignancy are also available.

Student time distribution: Inpatient 70%, Outpatient 20%, Conferences/Lectures 10%; Subspecialty Care 100%
Major teaching responsibility: Attendings, fellows, and residents
Patients seen/weekly: 40
On call/weekend responsibility: Weekend rounds

**M45 840 MATERNAL-FETAL MEDICINE SUBINTERNSHIP**
Instructor(s): David Stamilio, MD, 362-8895
Location: Maternity Hospital, Barnes- Jewish Hospital, South Campus
Elective Contact: David Stamilio, MD, 362-8895
Other Information: Students report to Antepartum Service (ward 5300), 7:30 a.m. first Monday of elective. If the first day is a holiday, call ahead to Dr. Stamilio for instructions.
Enrollment limit per period: 1, unless cleared by course master.
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

Subinterns will participate in the antepartum management of high-risk hospitalized patients as well as complicated outpatients through the High-Risk Obstetrics Clinics and the Center for Diabetes in Pregnancy. Examples include diabetes, hypertension, renal disease, hematologic abnormalities, preterm labor and others. Antepartum evaluation and monitoring of the pregnant woman and her fetus are emphasized. Supervision is by the antepartum chief resident and a maternal-fetal medicine faculty member. An opportunity for intense labor and delivery experience with the night team is also encouraged. Students will spend time observing both genetic counseling and diagnostic obstetric ultrasound examinations. The student will prepare a brief talk on a topic of his/her interest during the course of the rotation.

Student time distribution: Inpatient 60%, Outpatient 35%, Conferences/Lectures 5%; Subspecialty Care 100%
Major teaching responsibility: Attendings and residents
Patients seen/weekly: Inpatient: 20; Outpatient: 20
On call/weekend responsibility: Overnight/weekend call optional — student self-scheduled

M45 843 MATERNAL-FETAL MEDICINE OUTPATIENT CARE SUBINTERNSHIP
Instructor(s): David Stamilio, MD, 362-8895
Location: Fifth floor, Center for Advanced Medicine, Ob/Gyn office
Elective Contact: David Stamilio, MD, 362-8895
Other Information: Students report to the fifth floor, Center for Advanced Medicine, Ob/Gyn office, 8 a.m. first day of elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

Students will see a variety of high-risk obstetrical patients in the outpatient setting. The student will evaluate patients from different backgrounds, including prepregnancy consultations, prenatal care consultations and initial visits. The student will also see return patients to experience the continuity of prenatal care. Students will participate in antenatal testing and learn some basic ultrasonography skills. Students will spend time with geneticists and experience counseling of a variety of genetic conditions. In addition, they will spend time on the ultrasound unit(s) observing numerous high-resolution scans. The student will be responsible for one presentation to be given to the OB teams at the end of the rotation. Students are provided independent study time to put together the presentation which should be in PowerPoint and on a topic of their choice, inspired by a patient-related clinical condition that piqued their interest during the block. In addition, the student will have the option to take overnight call or call in the Pregnancy Assessment Center to gain more hands-on experience with inpatient obstetrics. This is voluntary and not a requisite.

Student time distribution: Inpatient 5%, Outpatient 85%, Conferences/Lectures 10%; Subspecialty Care 100%
Major teaching responsibility: Maternal-Fetal Medicine Attendings
Patients seen/weekly: 40
On call/weekend responsibility: Not required, overnight call available to enhance experience

M45 856 OB/GYN ULTRASOUND — GENETICS
Instructor(s): Jeffrey Dicke, MD, 454-8135
Location: The Women’s Health Center, fifth floor, Center for Advanced Medicine and The Center for Women’s Wellness, fourth floor, Building D, Missouri Baptist Medical Center
Elective Contact: Jeffrey Dicke, MD, 454-8135
Other Information: Students should contact Dr. Dicke one week prior to first day of elective.
Enrollment limit per period: 1
Valid start weeks for 2-week blocks are: Weeks 1, 3, 5, 7, 9, 11, 13, 15, 17, 19, 21, 23, 25, 27, 29, 31, 33, 35, 37, 39, 41, and 43.
The student will learn the principles and techniques of non-invasive screening for fetal disorders, observe the performance of invasive prenatal diagnostic procedures, and learn the standards and guidelines for performance of the antepartum obstetrical ultrasound examination and female pelvic examination. The student will also gain experience in pedigree analysis and familial risk factor assessment working with genetic counselors. Opportunities for participation in clinical research are also available.

Student time distribution: Outpatient 90%, Conferences/Lectures 10%; Primary Care 30%, Subspecialty Care 70%
Major teaching responsibility: The attendings of the ultrasound section
Patients seen/weekly: 40
On call/weekend responsibility: None

M65 833 SPECIAL TOPICS IN REPRODUCTIVE HEALTH
Instructor(s): Tessa Madden, MD, 747-6495
Location: Division of Clinical Research, 4533 Clayton Ave., second floor
Elective Contact: Tessa Madden, MD, 747-6495
Other Information: Students should contact Dr. Madden a week prior to the beginning of the rotation: maddent@wustl.edu
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 17, 21, 29, 33, 37, and 41.

Students will attend a variety of outpatient clinics to interact with patients seeking different reproductive health services. These clinics include family planning and abortion services at Planned Parenthood, the County STD clinic, Adolescent and Pediatric Gynecology, Child Sexual Abuse, Teen OB clinic, the Contraceptive CHOICE Clinic and outpatient gynecology clinics at the Center for Advanced Medicine. Clinical experiences will be ambulatory. Conferences include weekly Obstetrics and Gynecology Grand Rounds, weekly Family Planning Meeting and monthly Family Planning Journal Club. Reading will include relevant articles and chapters. Students will be responsible for a brief presentation on a reproductive health topic at the conclusion of the course. Opportunities for clinical research in contraception are also available.

Student time distribution: Outpatient 100%; Primary Care 30%, Subspecialty Care 70%
Major teaching responsibility: Attendings
Patients seen/weekly: Varies
On call/weekend responsibility: None

Research

(M45 900)

Jenifer E. Allsworth, Ph.D., Jeffrey F. Peipert, M.D., Ph.D., Gina M. Secura, Ph.D., 4533 Clayton Avenue, 747-6434. Reproductive Epidemiology. In this four-week elective, students will have the opportunity to immerse themselves in an epidemiologic study examining an obstetric or gynecologic outcome. Dr. Allsworth’s research focuses on risk factors for the acquisition of sexually transmitted infections and how social factors, including race/ethnicity, poverty, discrimination and violence impact women’s reproductive health. Dr. Peipert’s research focuses on family planning, long-acting reversible contraception, sexually transmitted infections and the promotion of dual contraceptive use. Dr. Secura’s research focuses on HIV and STD risk among young men and women and contraception among women. The Division has many ongoing clinical research studies for potential collaboration, include the Contraceptive CHOICE Project. The CHOICE Project is a prospective cohort study of 10,000 women in the St. Louis region that is seeking to reduce unintended pregnancy rates in the region through the promotion of long-acting reversible contraception as well as describe method-related satisfaction, compliance and continuation rates for long- and short-acting methods. This rotation is designed for the student planning a career in academic medicine as a physician-scientist and one who is interested in considering pursuing clinical research. Prior to signing up for this course, the student must contact Dr. Allsworth to discuss the schedule and expectations of the rotation.
Irving Boime, Ph.D., 319-320 McDonnell Medical Sciences Building, 362-2556. Our laboratory is concerned with the biosynthesis of the gonadotropin hormones in the placenta and pituitary. Specifically, these interests can be divided into two general categories: (1) Structure-function studies that deal with the determinants for secretion, sorting and biological activity of these hormones. Such work includes the design of analogs for potential clinical use. (2) Factors governing expression of several placental and pituitary hormone genes. The approaches to these problems involve the use of site-directed mutagenesis and transgenic animals.

Kelle H. Moley, M.D., Indira Mysorekar, Ph.D., and Joan Riley, Ph.D., 780 McDonnell Medical Sciences Building, 362-2022. In this six-week elective, students will have the opportunity to immerse themselves in bench research in reproductive science. The three PIs willing to take students are Kelle Moley, M.D., Joan Riley, Ph.D., and Indira Mysorekar, Ph.D. Dr. Moley’s research focuses on mammalian gametes, fertilization, preimplantation development and implantation. Dr. Riley’s research centers around the immunoregulatory processes of mammalian fetomaternal interaction. The Mysorekar lab studies (1) the dynamics of tissue regeneration in the adult mammalian urinary bladder using a multipronged genetic/molecular/cellular approach; (2) cellular and hormonal mechanisms governing pathogenesis of a common infectious disease in women, namely recurrent urinary tract infections (UTIs); (3) investigation of potential infectious etiology for preterm birth in pregnant women. The main criteria for this rotation is that the student must have prior experience as an undergraduate or postgraduate in a laboratory, not including class work. This rotation is designed for the student planning a career in academic medicine as a physician-scientist and one who is interested in considering reproductive science as a field. Prior to signing up for this course, the student must contact Dr. Moley to discuss the schedule and expectations of the rotation.

Faculty

George Andrew Macones, MD, MS Head of the Department of Obstetrics and Gynecology

Jenifer Elizabeth Allsworth, AB, PHD Assistant Professor of Obstetrics and Gynecology

John K Appelbaum, MD Assistant Professor of Clinical Obstetrics and Gynecology

Tomas Ismael Aquino, Assistant Professor of Clinical Obstetrics and Gynecology

Sangeeta Kaur Babar, MD Instructor in Clinical Obstetrics and Gynecology

Margaret Elizabeth Baum, MD Instructor in Clinical Obstetrics and Gynecology

Robert L Becker, MD Assistant Professor of Clinical Obstetrics and Gynecology

James E Belcher, MD Instructor in Clinical Obstetrics and Gynecology

Joe E Belew, MD Associate Professor of Clinical Obstetrics and Gynecology

Lisa Marie Bernhard, MD Assistant Professor of Obstetrics and Gynecology

Scott W Biest, MD Assistant Professor of Obstetrics and Gynecology

Jeffrey D Bloss Adjunct Associate Professor of Obstetrics and Gynecology

Irving Boime, MS, PHD Professor of Reproductive Biology in Obstetrics and Gynecology

Kathryn L Botney, MD Instructor in Clinical Obstetrics and Gynecology

Lawrence V Boveri, MD Instructor in Clinical Obstetrics and Gynecology

Jessica Naomi Bowers Instructor in Clinical Obstetrics and Gynecology

Igor Brondz, MD Instructor in Clinical Obstetrics and Gynecology

Robert J Brown, MD Assistant Professor of Clinical Obstetrics and Gynecology

Bruce L Bryan, BE, MD Assistant Professor of Clinical Obstetrics and Gynecology

Alison Gale Cahill, MD Assistant Professor of Obstetrics and Gynecology

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Arthur L Casey, MD  Instructor in Clinical Obstetrics and Gynecology
Michael B Chen  Assistant Professor of Clinical Obstetrics and Gynecology
Ronald J Chod , MD  Adjunct Associate Professor of Obstetrics and Gynecology
Camaryn E Chrisman Robbins , M PH, MD  Assistant Professor of Obstetrics and Gynecology
Vicente M Colon-Alcaraz , MD  Assistant Professor of Clinical Obstetrics and Gynecology
Eric S Colton , MD  Instructor in Clinical Obstetrics and Gynecology
Amber Russell Cooper , MD  Assistant Professor of Obstetrics and Gynecology
James P Crane , MD  Professor of Obstetrics and Gynecology
Robert D Crist  Instructor in Clinical Obstetrics and Gynecology
Veronica Lynn Cross  Instructor in Clinical Obstetrics and Gynecology
David T Curiel , MD, PHD  Professor of Obstetrics and Gynecology
Michelle R Devera , MD  Instructor in Clinical Obstetrics and Gynecology
Jeffrey M Dicke , MD  Professor of Obstetrics and Gynecology
Russell B Dieterich , MD  Instructor in Clinical Obstetrics and Gynecology
Lakshmi Vilaya Dundoo , MS  Instructor in Clinical Obstetrics and Gynecology
David Louis Eisenberg , M PH, MD  Assistant Professor of Obstetrics and Gynecology
Josiah O. Ekunno , MD  Instructor in Clinical Obstetrics and Gynecology
Sarah K England , PHD  Professor of Obstetrics and Gynecology
Renee D Ewing , MD  Instructor in Clinical Obstetrics and Gynecology
Cathleen Rae Faris , MD  Assistant Professor of Clinical Obstetrics and Gynecology
Marsha Nicole Fisher , MD  Instructor in Clinical Obstetrics and Gynecology
Shanon Alex Forster  Instructor in Clinical Obstetrics and Gynecology
Andrew E Galakatos , MD  Professor of Clinical Obstetrics and Gynecology
Ira Clyde Gall , MD  Professor Emeritus of Clinical Obstetrics and Gynecology
Randall K. Gibb , MD  Adjunct Associate Professor of Obstetrics and Gynecology
Gordon Goldman , MD  Instructor in Clinical Obstetrics and Gynecology
Margaret Rosanna Gray-Swain , MD  Instructor in Clinical Obstetrics and Gynecology
Diana Lee Gray , MD  Professor of Obstetrics and Gynecology
Perry W Grigsby , MBA, MD, MS  Professor of Obstetrics and Gynecology
Ann Marie Gronowski , MS, PHD  Professor of Obstetrics and Gynecology
C. Richard Gulick , MD  Assistant Professor of Clinical Obstetrics and Gynecology
Andrea Ruth Hagemann , MD  Assistant Professor of Obstetrics and Gynecology
Hoosna Haque , MD  Instructor in Clinical Obstetrics and Gynecology
Richard Alan Hartman , MD  Associate Professor of Clinical Obstetrics and Gynecology
Kathleen M Hogan , MD  Instructor in Clinical Obstetrics and Gynecology
Robert Franklyn Holloway Jr  Instructor in Clinical Obstetrics and Gynecology
William Edward Houck , MD  Instructor in Clinical Obstetrics and Gynecology
David H Hua  Instructor in Clinical Obstetrics and Gynecology
Laura Hulbert , MD  Instructor in Clinical Obstetrics and Gynecology
Saji Jacob , DIP, MD, MS  Instructor in Clinical Obstetrics and Gynecology
Michael K Johnson, MD Instructor in Clinical Obstetrics and Gynecology
Sandy Lynn Jost, Adjunct Instructor in Obstetrics and Gynecology
Mark J Jostes, MD Assistant Professor of Clinical Obstetrics and Gynecology
John Patrick Judd, MD Assistant Professor of Obstetrics and Gynecology
Emily Susan Jungheim, MD Assistant Professor of Obstetrics and Gynecology
Sarah Lynn Keller, MD Assistant Professor of Obstetrics and Gynecology
Erin L King, MD Instructor in Clinical Obstetrics and Gynecology
Laurie Klabi, MD Instructor in Clinical Obstetrics and Gynecology
Jacob Klein, MD Professor of Clinical Obstetrics and Gynecology
Teresa Lee Knight, MD, MS Instructor in Clinical Obstetrics and Gynecology
Yosuke Komatsu, Instructor in Clinical Obstetrics and Gynecology
Claudia Krasnoff, MA, MD Instructor in Clinical Obstetrics and Gynecology
Frederick Thier Kraus, MD Adjunct Professor of Obstetrics and Gynecology
Christine Marie Ladd, MD Instructor in Clinical Obstetrics and Gynecology
Tony C Lam, MD Instructor in Clinical Obstetrics and Gynecology
Susan Elizabeth Lanzendorf, AA, AS, PHD Associate Professor of Obstetrics and Gynecology
Patricia Lazaroff, BN, MSN Adjunct Instructor in Obstetrics and Gynecology
Gary G Lee, DOST Instructor in Clinical Obstetrics and Gynecology
Fanee J Lekkas, MD, MS Instructor in Clinical Obstetrics and Gynecology
Edward S Levy, MD Instructor in Clinical Obstetrics and Gynecology
Amanda Lark Lewis, PHD Assistant Professor of Obstetrics and Gynecology
Lola J Loeb, MA, MD Instructor in Clinical Obstetrics and Gynecology
Ryan Eric Longman, MD Assistant Professor of Obstetrics and Gynecology
George Andrew Macones, MD, MS Mitchell and Elaine Yanow Professor of Obstetrics and Gynecology
Tessa E Madden, M PH, MD Assistant Professor of Obstetrics and Gynecology
Maria Maminta-Streiff, Instructor in Clinical Obstetrics and Gynecology
Mary Elizabeth Mani, Instructor in Clinical Obstetrics and Gynecology
Carolyn Marie Martin, MD Assistant Professor of Clinical Obstetrics and Gynecology
Leslie Stewart Massad, MD Professor of Obstetrics and Gynecology
Katherine Jahngie Mathews, M PH, MA, MD Adjunct Associate Professor of Obstetrics and Gynecology
Rebecca P McAlister, MD Professor of Obstetrics and Gynecology
Margaret McCarthy, Instructor in Clinical Obstetrics and Gynecology
Daniel S McDonald, MD Instructor in Clinical Obstetrics and Gynecology
Denise Andrea Meckler, MD Instructor in Clinical Obstetrics and Gynecology
Diane F Merritt, MD Professor of Obstetrics and Gynecology
Jerry N Middleton, MD Instructor Emeritus in Clinical Obstetrics and Gynecology
Tehmtton S Mistry, MD Instructor in Clinical Obstetrics and Gynecology
Kelle Harbert Moley, MD James Crane Professor of Obstetrics and Gynecology
Kelle Harbert Moley, MD Vice Chairman for Basic Research, Department of Obstetrics and Gynecology
Alvaro Mora, MD Instructor in Clinical Obstetrics and Gynecology
Jeffrey Stuart Mormol  Instructor in Clinical Obstetrics and Gynecology
Nathaniel H Murdock  , MD Associate Professor of Clinical Obstetrics and Gynecology
Helen I-Yun Musseemann  , MD Instructor in Clinical Obstetrics and Gynecology
David G Mutch  , MD Ira C and Judith Gall Professor of Obstetrics and Gynecology
Indira U Mysorekar  , MS, PHD Assistant Professor of Obstetrics and Gynecology
Donald Michael Nelson  , MD, PHD Virginia Lang Professor of Obstetrics and Gynecology
Marilynn Nunez  Instructor in Clinical Obstetrics and Gynecology
Oroma Beatrice Afiong Nwanodi  Instructor in Clinical Obstetrics and Gynecology
Randall Odem  , MD Professor of Obstetrics and Gynecology
Anthony O Odibo  , MD Associate Professor of Obstetrics and Gynecology
Anthony O Odibo  , MD Vice Chair of Women and Fetal Imaging
Chukwuma Mbonu Okoroji  Instructor in Clinical Obstetrics and Gynecology
Allen S Palmer  , DOST Instructor in Clinical Obstetrics and Gynecology
Laura Anne Parks  , MD Assistant Professor of Obstetrics and Gynecology
Meera Raman Patel  , MD Instructor in Clinical Obstetrics and Gynecology
Anthony Craig Pearlstone  , MD Instructor in Clinical Obstetrics and Gynecology
Jeffrey F Peipert  , MD, MHA, MPH, PHD Robert J. Terry Professor of Obstetrics and Gynecology
Jeffrey F Peipert  , MD, MHA, MPH, PHD Vice Chairman of Clinical Research, Department of Obstetrics and Gynecology
John David Pfeifer  , MD, PHD Professor of Obstetrics and Gynecology
Timothy Charles Philpott  , MD Assistant Professor of Clinical Obstetrics and Gynecology
Aaron Juan Pile  , MD Instructor in Clinical Obstetrics and Gynecology
Jorge Pineda  , MD Assistant Professor of Clinical Obstetrics and Gynecology
Matthew A Powell  , MD Associate Professor of Obstetrics and Gynecology
Jodie Rai  , MD Associate Professor of Clinical Obstetrics and Gynecology
Roxane M. Rampersad  , MD Assistant Professor of Obstetrics and Gynecology
Valerie Ratts  , MD Professor of Obstetrics and Gynecology
Amy J. Ravin  , MD Assistant Professor of Clinical Obstetrics and Gynecology
Jonathan R Reed  , MD Assistant Professor of Clinical Obstetrics and Gynecology
Angela Mary Reining  Instructor in Clinical Obstetrics and Gynecology
Lee A Rigg  , MD, PHD Associate Professor of Clinical Obstetrics and Gynecology
Joan K. Riley  , PHD Assistant Professor of Obstetrics and Gynecology
Ann Marie Rockamann  , MD Instructor in Clinical Obstetrics and Gynecology
Chinda Vanasin Rojanasathit  , MD Assistant Professor of Clinical Obstetrics and Gynecology
Jerome D Sachar  , MD Assistant Professor of Clinical Obstetrics and Gynecology
Sudha Saha  , MD Instructor in Clinical Obstetrics and Gynecology
Leslie A Scott  Instructor in Clinical Obstetrics and Gynecology
Anne R Seyer  , MD Instructor in Clinical Obstetrics and Gynecology
Anthony Lee Shanks II, MD, MS Assistant Professor of Obstetrics and Gynecology
Clayton D. Skaggs  , DC Adjunct Instructor in Obstetrics and Gynecology
Jennifer H. Smith  , MD Instructor in Clinical Obstetrics and Gynecology
Department's Website

http://www.obgyn.wustl.edu/

Department of Ophthalmology and Visual Sciences

Instruction begins in the first year with examination of the eye and a lecture on various aspects of ocular disease. During the second year, all students receive (via e-mail) the “Ophthalmology Case Studies,” and these cases are reviewed in a “lecture/feedback” session. During the third year, students are given the
opportunity during the surgery block to spend four weeks on the ophthalmology services. In addition, during the third year there are lectures given to students during the Internal Medicine rotations. All students work on Washington University’s “Case Studies for Medical Students.” The emphasis is on ocular manifestations of common systemic diseases, ocular trauma and common eye diseases such as cataract and glaucoma. In the fourth year, four-week clinical or research electives are offered.

Courses

First Year

Introduction to clinical ophthalmology begins in the first year with a lecture and practicum (peer exam) on taking an ocular history and performing an ocular exam. Emphasis is on ophthalmoscopy.
Morton E. Smith, MD; staff

Second Year

During the second year, all students receive (via e-mail) the “Ophthalmology Case Studies.” All students must review each case in preparation for the “lecture/feedback” session with Dr. Morton Smith in a large-group format. Students will be called on (at random) for their answers to each case.

Third Year

Third-Year Clerkship Opportunities

In the third year, students are given the opportunity to spend four weeks of their surgery rotation on the ophthalmology service. The students work closely with the ophthalmology residents and review the differential diagnosis of the “red eye,” how to interpret an ophthalmologic consult note, and how to handle ocular emergencies. During this rotation, there is again emphasis on the use of the ophthalmoscope. All third-year students must complete the “Case Studies in Ophthalmology for Medical Students” and attend the periodic “feedback/oral exam” session with Morton E. Smith, MD, staff.

Fourth Year

Electives

M50 801 OPHTHALMOLOGY
Instructor(s): Morton E. Smith, M.D., 747-5559 or 362-5722
Location: McMillan Hospital Building, Room 114, Barnes-Jewish Hospital, South Campus
Elective Contact: Morton Smith, M.D., 747-5559 or Mary Hitt, 362-5722
Other Information: All students interested in this senior elective must meet with Dr. Morton E. Smith in March of year WUMS III.
Enrollment limit per period: 8
Valid start weeks are: June 4, 2012 through June 29, 2012

This elective is for senior students who plan to apply for a residency in ophthalmology. The student rotates through the general eye clinic and the subspecialty clinics of the full-time faculty of the Washington University Medical School Department of Ophthalmology and Visual Sciences (e.g. pediatric ophthalmology clinic at St. Louis Children's Hospital, neuro-ophthalmology service, cornea/external disease service, etc.). The student's responsibilities progress from observation (including observing
surgery) to complete eye exam to presentation of patients to the director of that particular service. Several cases must be presented to Dr. Morton Smith. The student must also work on the "Case Studies in Ophthalmology for Medical Students" and present the answers to these cases in the form of an oral exam to Dr. Smith. The students must attend all conferences as well as Grand Rounds and Wednesday Night Seminar for residents, and must spend one night a week (until 11 p.m.) with the ophthalmology resident on call for emergencies. By the end of the four-week rotation, the student is expected to be proficient in taking an ocular history and performing a complete eye exam including slit lamp biomicroscopy and indirect ophthalmoscopy. All students interested in this senior elective must meet with Dr. Smith in March of year WUMS III. The final grade of the student is determined by the narrative input from the director of the particular service(s) through which the student rotated, plus the case presentations to Dr. Smith, plus the oral quiz on the "Case Studies" book. The grades at Washington University are Honors, High Pass, Pass, Fail.

Student time distribution: Inpatient 5%, Outpatient 80%, Conferences/Lectures 15%; Subspecialty Care 100%
Major teaching responsibility: Attendings, fellows and residents
Patients seen/weekly: At least 25, usually more
On call/weekend responsibility: 1 night per week (until 11 p.m.)

Research

(M50 900)

Usha P. Andley, Ph.D., 1114-C McMillan Hospital Building, 362-7167. Crystallins and lens cell biology. Crystallins play an essential refractive role and maintain lens transparency. However, the role of the molecular chaperone alpha-crystallin in normal lens function and cataract formation remains enigmatic. Recently, Dr. Andley’s laboratory has shown that αA or αB-crystallin expression protects cells from death in vivo and in vitro. Mutations in these proteins are the basis of several inherited cataracts. Using genetic approaches, the laboratory is now focusing on understanding how mutations in αA and αB crystallin alter lens cell function in vivo. Biochemical and cell biological approaches including confocal microscopy, immunoprecipitation and immunofluorescence analysis are being used to study substrates that interact with alpha-crystallin in vivo, leading to cataract.

Rajendra S. Apte, M.D., Ph.D., 702 McMillan Hospital Building, 747-5262. My laboratory is interested in examining how the innate immune system influences retinal or choroidal neovascularization that is seen in a number of blinding eye diseases such as diabetic retinopathy, age-related macular degeneration and retinopathy of prematurity. I am also involved in a number of clinical research trials investigating potential therapeutic agents for retinal diseases.

Steven Bassnett, Ph.D., 1114 McMillan Hospital Building, 362-1604. We are using advanced microscopic techniques to elucidate the cellular basis of accommodation and presbyopia.

David C. Beebe, Ph.D., 101C McMillan Hospital Building, 362-1621. My laboratory works with Drs. Holekamp, Siegfried and Huang to identify mechanisms responsible for age-related cataracts, open-angle glaucoma and corneal decompensation. Our data implicates oxygen toxicity as the major cause of the most common type of age-related cataracts and suggest that age-related degeneration of the vitreous body exposes the lens to higher levels of oxygen. We also found that oxygen levels in the anterior chamber angle are associated with three major risk factors for developing open-angle glaucoma: African heritage, corneal thickness and previous vitrectomy. Our recent studies suggest that corneal oxygen consumption is decreased in patients with corneal decompensation (keratopathy). One or two projects are available to confirm and extend these observations.
Shiming Chen, Ph.D., 618 McMillan Hospital Building, 747-4350. Molecular basis of retinal-specific gene expression and hereditary retinal degeneration. This elective is for students who are interested in gaining research experience in molecular vision and retinal diseases. The research will mainly focus on transcription factors that are expressed in the retinal photoreceptor cells and required for the normal development of photoreceptor function and/or linked to photoreceptor degenerative diseases. Students will learn basic molecular and biochemical approaches commonly used for: (1) studying interactions between photoreceptor transcription factors and their target genes, (2) functional analysis of mutated factors carrying genetically identified mutations as a tool to find phenotype and genotype correlations, and (3) how to apply the above knowledge to develop early diagnosis and therapeutic interventions for the photoreceptor diseases. Both hands-on experience and experimental design skills will be covered during the course. A small project will be assigned to each student. By the end of the course, each student will give an oral presentation on the progress of the project in a lab meeting and/or a departmental seminar setting.

Susan M. Culican, M.D., Ph.D., 1104 McMillan Hospital Building, 362-9278. I am using the segregation of eye-specific regions in the mouse lateral geniculate nucleus as a model system to examine the cellular mechanisms that underlie activity-dependent competition and synaptic remodeling in the developing visual system. Mechanisms involved in this kind of competition may be related to the pathophysiology of amblyopia, or “lazy eye” in children. (1) Developmental Neurobiology. (2) Synaptic plasticity.

Thomas A. Ferguson, Ph.D., 1207 McMillan Hospital Building, 362-3745. Cellular and molecular regulation of the ocular immune response. Immunological basis of age-related macular degeneration (AMD).

Mae Gordon, Ph.D., 1125 Old Shriners, 362-3716. (1) Multicenter randomized clinical trial to determine if medical treatment of ocular hypertension prevents or delays glaucomatous optic nerve damage. (2) Quality-of-life assessment. (3) Multicenter epidemiological study of keratoconus.


Didier Hodzic, Ph.D., 620 McMillan Hospital Building, 362-7037. Linker of the Nucleoskeleton to the Cytoskeleton (LINC complexes) are macromolecular assemblies that span the nuclear envelope of mammalian cells and physically connect the nuclear lamina to different cytoskeletal elements such as actin and plectin. LINC complexes assemble through the interaction between evolutionary-conserved domains of Sun proteins and Nesprins, two families of inner and outer nuclear membrane proteins, respectively. In lower organisms, the expression of these proteins is essential for nuclear migration and anchorage. Using in vitro and in vivo models where LINC complexes are disrupted, we are studying the mechanisms of nuclear migration and anchorage in single cell assays as well as their relevance to retinogenesis, CNS development and skeletal muscle biology.

Andrew Huang, M.D., M.P.H., 106 McMillan Hospital Building, 362-0403. TGFbI-related corneal dystrophies, corneal epithelial stem cells, corneal wound healing. Transforming growth factor-beat inducible protein (TGFbI, also know as bIGH3 or keratoepithelin, KE) is a constituent of the extracellular matrix (ECM) responsible for cell adhesion. Several autosomal dominant corneal dystrophies are attributed to more than 30 missense mutations of the TGFbI gene in 5q31 in humans. These dystrophies are found to have abnormal stromal deposits and related poor epithelial adhesions with resultant painful corneal erosions. Corneal transplantation is often needed to restore corneal clarity. Our working hypothesis is that formation of those untoward protein aggregates is caused by either conformational misfolding of TGFbI proteins due to missense mutations and/or accumulation of dysregulated TGFbI proteins. This lab is investigating the biophysical properties of native and mutant TGFbI proteins. Amyloid fibrils formed by differentially degraded native and mutant proteins are also being studied. Synthetic peptides will be used to identify the amyloidogenic mechanisms. Novel therapeutic strategies,
such as small interfering RNAs (siRNA) or methylated peptides (meptide), to mitigate the untoward TGFβI aggregation are also being investigated. The goals of this lab are to elucidate the pathogenesis of abnormal protein aggregations in TGFβI-related corneal dystrophies and to formulate potential therapeutic strategies.

Vladimir Kefalov, Ph.D., 1007 McMillan Hospital Building, 362-4376. Our lab is interested in the mechanisms that determine the functional properties of mammalian rod and cone photoreceptors. We use a battery of tools, from single-cell and isolated retina recordings, to live electroretinogram and behavior experiments with wild type and genetically modified mice. While the emphasis of our studies is on our daytime photoreceptors, the cones, we are also investigating some aspects of rod phototransduction. Some of the ongoing projects in the lab are: 1) mechanisms that allow cones to restore their visual pigment rapidly after exposure to light; this research is funded by an RO1 grant from the National Eye Institute; 2) mechanisms that allow cones to adapt and remain functional in a wide range of light intensities; this research is funded by an R21 grant from the National Eye Institute; 3) pharmacological treatment of retinal disease; this multi-PI project is funded by an R24 grant from the National Eye Institute. In addition to the studies listed above, we are also involved in a number of collaborative projects investigating various aspects of rod and cone phototransduction.

Steven M. Kymes, Ph.D., 4547 Clayton Avenue, 747-4612. We conduct economic evaluation studies of treatments and prevention of vision-affecting diseases. This has included cost-effectiveness studies of glaucoma prevention, treatment of macular degeneration, and treatment of amblyopia. We also conduct valuation studies to estimate the impact of vision problems on quality of life using utility elicitation, conjoint interview and willingness to pay methods. Finally, we develop tools to assist patients in choosing between treatment options by helping them to understand how the risks and benefits of treatment align with their own values.

Peter Lukasiewicz, Ph.D., 1003C McMillan Hospital Building, 362-4284. Neurobiology of the healthy and diseased vertebrate retina.

John R. Pruett, Jr., M.D., Ph.D., 1153K East Building, 747-6769. Visual Systems and Cognitive Neuroscience Studies of Autism. Two active areas of research in my lab include: 1) behavioral and imaging studies of visual attention to and processing of eyes and faces in autistic and non-autistic subjects, and 2) developmental studies of large-scale brain networks in autistic and non-autistic subjects using functional connectivity magnetic resonance imaging (fcMRI). Example research rotation projects might include: pilot visual psychophysical studies of intermediate visual processes supporting face perception, or — for trainees with computational and/or imaging skills and interests — graph theory-based analyses of visual system sub-network structure across various groups in fcMRI data we have acquired from ongoing projects.

Nathan Ravi, M.D., Ph.D., 623 McMillan Hospital Building, 747-4458. Development of biomaterials for ophthalmic applications.

Alan Shiels, Ph.D., 1128 McMillan Hospital Building, 362-1637, shiels@vision.wustl.edu. Genetic eye disease. (1) Cataract and glaucoma. (2) Eye movement disorders.

Larry Tychsen, M.D., 2S89 Eye Clinic, St. Louis Children’s Hospital, 454-6026. Pediatric Ophthalmology: (1) Development of the visual brain and eye alignment. (2) Visual cortex development, ocular alignment, strabismus.

David E. Vollman, M.D., M.B.A., St. Louis VA Medical Center — John Cochran Division. Research focusing on optimizing patient clinic flow and surgical OR throughput via the use of radio-frequency identification
(RFID). This project will have direct impact on the delivery of both medical and surgical ophthalmic care at the St. Louis VA Medical Center — John Cochran Division.

Faculty

Michael A Kass, MD, MS Head of the Department of Ophthalmology and Visual Sciences
Mouhammed O Abuattieh, MD Instructor in Ophthalmology and Visual Sciences
Henry W Allhoff, OD Adjunct Instructor in Ophthalmology and Visual Sciences
Navinkumar J Amin, MS Associate Professor of Clinical Ophthalmology and Visual Sciences
Shilpa S Amin, MD Assistant Professor of Clinical Ophthalmology and Visual Sciences
Usha P Andley, MS, PHD Professor of Ophthalmology and Visual Sciences
Rajendra Apte, MD, PHD Associate Professor of Ophthalmology and Visual Sciences
Stella Arthur, MD Assistant Professor of Ophthalmology and Visual Sciences
Sonya Bamba, MD Instructor in Ophthalmology and Visual Sciences
Edward M Barnett, MD, PHD Professor of Ophthalmology and Visual Sciences
Steven Bassnett, PHD Professor of Ophthalmology and Visual Sciences
Paul Douglas Becherer, OD Adjunct Instructor in Ophthalmology and Visual Sciences
Bernard Becker, MD Lecturer in Ophthalmology and Visual Sciences
Bernard Becker, MD Professor Emeritus of Ophthalmology and Visual Sciences
Stanley C Becker, MA, MD, PHD Assistant Professor of Clinical Ophthalmology and Visual Sciences
William L Becker, MA, MD Assistant Professor of Clinical Ophthalmology and Visual Sciences
David C Beebe, MS, PHD Janet and Bernard Becker Professor of Ophthalmology and Visual Sciences
 Gregg Jonathan Berdy, MD Assistant Professor of Clinical Ophthalmology and Visual Sciences
Paul M Bernier, OD Adjunct Instructor in Ophthalmology and Visual Sciences
Anjali Maruti Bhorade, MD Associate Professor of Ophthalmology and Visual Sciences
Frank Joseph Bier, OD Adjunct Instructor in Ophthalmology and Visual Sciences
Ronald C Bilchik, MD Assistant Professor of Clinical Ophthalmology and Visual Sciences
Mark Gerald Birkmann, OD Adjunct Instructor in Ophthalmology and Visual Sciences
Andrew N Blatt, MA, MD Assistant Professor of Clinical Ophthalmology and Visual Sciences
Kevin Jay Blinder, MD Professor of Clinical Ophthalmology and Visual Sciences
James C Bobrow, MD Professor of Clinical Ophthalmology and Visual Sciences
Jennifer Marie Wilding Bogucki, MD Instructor in Ophthalmology and Visual Sciences
George M Bohigian, MD Professor of Clinical Ophthalmology and Visual Sciences
Isaac Boniuik, MD Professor Emeritus of Clinical Ophthalmology and Visual Sciences
Bernita Born-Wolf, BN, OD Adjunct Instructor in Ophthalmology and Visual Sciences
Paul J Botelho, MD Adjunct Instructor in Ophthalmology and Visual Sciences
Rebekah Arletta Braslow, MD Instructor in Clinical Ophthalmology and Visual Sciences
Sean Michael Breit, MD Instructor in Clinical Ophthalmology and Visual Sciences
Larry G Brokering, OD Adjunct Instructor in Ophthalmology and Visual Sciences
Marc Richard Brown, OD Adjunct Instructor in Ophthalmology and Visual Sciences
Nancy M Buchser, MD Instructor in Ophthalmology and Visual Sciences
Dean B Burgess, MD Professor Emeritus of Clinical Ophthalmology and Visual Sciences
Carmen F Castellano, OD Adjunct Instructor in Ophthalmology and Visual Sciences
Earl S Changar, OD Adjunct Instructor in Ophthalmology and Visual Sciences
Shiming Chen, MS, PHD Professor of Ophthalmology and Visual Sciences
Bruce H Cohen, MD Assistant Professor of Clinical Ophthalmology and Visual Sciences
Nicholas J Colosi, MD Assistant Professor of Clinical Ophthalmology and Visual Sciences
Joseph C. Corbo, AB, MD, PHD Assistant Professor of Ophthalmology and Visual Sciences
Pamela Ann Coslick-Fada, OD Adjunct Instructor in Ophthalmology and Visual Sciences
Steven Michael Couch, MD Assistant Professor of Ophthalmology and Visual Sciences
John Bruce Crane II, OD Adjunct Instructor in Ophthalmology and Visual Sciences
Susan Margaret Culican, MD, PHD Assistant Professor of Ophthalmology and Visual Sciences
Philip L Custer, MD Professor of Ophthalmology and Visual Sciences
David L Davidson, OD Adjunct Instructor in Ophthalmology and Visual Sciences
James Allen Declue, OD Adjunct Instructor in Ophthalmology and Visual Sciences
John James Deguire, MD Instructor in Ophthalmology and Visual Sciences
Paul E Diehl, OD Adjunct Instructor in Ophthalmology and Visual Sciences
James Benjamin Earl, MD Instructor in Ophthalmology and Visual Sciences
John Robert Eigenbrodt, OD Adjunct Instructor in Ophthalmology and Visual Sciences
Nicholas Earl Engelbrecht, Assistant Professor of Clinical Ophthalmology and Visual Sciences
Lawrence W Ernst, OD Adjunct Instructor in Ophthalmology and Visual Sciences
Raymond F Fada Jr, OD Adjunct Instructor in Ophthalmology and Visual Sciences
Adam Ross Fedyk, Instructor in Clinical of Ophthalmology & Visual Sciences
Robert M Feibel, MD Professor of Clinical Ophthalmology and Visual Sciences
Thomas A Ferguson, MS, PHD Professor of Ophthalmology and Visual Sciences
Kurt W Finklang, OD Adjunct Instructor in Ophthalmology and Visual Sciences
Frank Donald Fontana, OD Adjunct Instructor in Ophthalmology and Visual Sciences
Bruce S Frank, MD Assistant Professor of Clinical Ophthalmology and Visual Sciences
Carrie S Gaines, OD Adjunct Instructor in Ophthalmology and Visual Sciences
Lawrence A Gans, MD Assistant Professor of Clinical Ophthalmology and Visual Sciences
Stephen M Garnett, OD Adjunct Instructor in Ophthalmology and Visual Sciences
N. Rex Ghormley, OD Adjunct Instructor in Ophthalmology and Visual Sciences
Jeffrey M. Gidday, PHD Associate Professor of Ophthalmology and Visual Sciences
James M Gordon, MD Assistant Professor of Clinical Ophthalmology and Visual Sciences
Mae Etsuko Gordon, MS, PHD Professor of Ophthalmology and Visual Sciences
Mark Gilbert Grand, MD Professor of Clinical Ophthalmology and Visual Sciences
Kenneth O Green, MD Assistant Professor of Clinical Ophthalmology and Visual Sciences
Kevin William Greuloch, MD Instructor in Ophthalmology and Visual Science
Steven J Grondalski, OD Adjunct Instructor in Ophthalmology and Visual Sciences
George J Harocopoulos, MD Associate Professor of Ophthalmology and Visual Sciences
Alexander D Harris, MA, OD Adjunct Instructor in Ophthalmology and Visual Sciences
Charles R Harris Instructor in Clinical Ophthalmology and Visual Sciences
Jack Hartstein, MD Professor of Clinical Ophthalmology and Visual Sciences
William L Herbold, OD Adjunct Instructor in Ophthalmology and Visual Sciences
Didier Hodzic, PHD Assistant Professor of Ophthalmology and Visual Sciences
Nancy Melberg Holekamp, MD Professor of Clinical Ophthalmology and Visual Sciences
Jing-Wei Huang, MD Professor of Ophthalmology and Visual Sciences
Douglas Lee Huff, OD Adjunct Instructor in Ophthalmology and Visual Sciences
Michael J Isserman, MD Assistant Professor of Clinical Ophthalmology and Visual Sciences
Jeffrey H Jacob, OD Adjunct Instructor in Ophthalmology and Visual Sciences
Sharon Leslie Jick Instructor in Clinical Ophthalmology and Visual Sciences
Daniel Paul Joseph, MD, PHD Associate Professor of Clinical Ophthalmology and Visual Sciences
Stephen A Kamenetzky, MD Professor of Clinical Ophthalmology and Visual Sciences
Humeyra Karacal, MD Assistant Professor of Ophthalmology and Visual Sciences
Michael A Kass, MD, MS Bernard Becker Professor of Ophthalmology and Visual Sciences
Jack Kayes, MD Professor Emeritus of Clinical Ophthalmology and Visual Sciences
Vladimir Jivkov Kefalov, PHD Associate Professor of Ophthalmology and Visual Sciences
Deborah Lynn Kerber, OD Adjunct Instructor in Ophthalmology and Visual Sciences
Daniel Kerschensteiner, PHD Assistant Professor of Ophthalmology and Visual Sciences
Sangeeta Khanna Instructor in Clinical Ophthalmology and Visual Sciences
William F Kiefer Jr, OD Adjunct Instructor in Ophthalmology and Visual Sciences
Mark Alan Kleindorfer, OD Adjunct Instructor in Ophthalmology and Visual Sciences
Vivian Marie Kloke, OD Adjunct Instructor in Ophthalmology and Visual Sciences
Harry L Knopf, MD Professor of Clinical Ophthalmology and Visual Sciences
Ronald Joseph Knox, OD Adjunct Instructor in Ophthalmology and Visual Sciences
Michael S Korenfeld, MD Assistant Professor of Clinical Ophthalmology and Visual Sciences
Thomas Errol Kraemer, OD Adjunct Instructor in Ophthalmology and Visual Sciences
Steven M Kymes, PHD Research Associate Professor of Ophthalmology and Visual Sciences
Michael J Lachtrup, OD Instructor in Ophthalmology and Visual Science
Robert Louis Lamberg, MD Associate Professor of Clinical Ophthalmology and Visual Sciences
Paul Arthur Lapoint, AA, OD Adjunct Instructor in Ophthalmology and Visual Sciences
Cecilia Sungmin Lee, MD Instructor in Ophthalmology and Visual Sciences
Steven F Lee, MD Instructor in Clinical Ophthalmology and Visual Sciences
Scott W Lewis, OD Adjunct Instructor in Ophthalmology and Visual Sciences
James Walter Lieber, OD Adjunct Instructor in Ophthalmology and Visual Sciences
Anthony J Lubniewski, MD Professor of Ophthalmology and Visual Sciences
Gregg T Lueder, MD Professor of Ophthalmology and Visual Sciences
Peter David Lukasiewicz, PHD Professor of Ophthalmology and Visual Sciences
Lisa Marie Mackey, OD Adjunct Instructor in Ophthalmology and Visual Sciences
Ranjan P Malhotra, MD Instructor in Clinical Ophthalmology and Visual Sciences
Mary Kay Migneco  , OD Instructor in Ophthalmology and Visual Sciences
Barry David Milder  , MD Associate Professor of Clinical Ophthalmology and Visual Sciences
Duane L Mitzel  , MD Assistant Professor of Clinical Ophthalmology and Visual Sciences
Eugene James Mobley  , OD Adjunct Instructor in Ophthalmology and Visual Sciences
Robert L Mobley  , OD Adjunct Instructor in Ophthalmology and Visual Sciences
Robert F Munsch  , MD Instructor in Clinical Ophthalmology and Visual Sciences
Raymond I Myers  , OD Adjunct Instructor in Ophthalmology and Visual Sciences
Randall Earl Nache  Instructor in Clinical Ophthalmology and Visual Sciences
Matthew Newman  , MD Assistant Professor of Clinical Ophthalmology and Visual Sciences
Paul F Nichols III, MD Assistant Professor of Clinical Ophthalmology and Visual Sciences
Judith Mosinger Ogilvie  , MA, PHD Adjunct Research Assistant Professor of Ophthalmology and Visual Sciences
Jeffrey Robert Padousis  , MD Instructor in Clinical Ophthalmology and Visual Science
Anjali K Pathak  , MD Assistant Professor of Ophthalmology and Visual Sciences
Jay S Pepose  , MA, MD, PHD Professor of Clinical Ophthalmology and Visual Sciences
John Craig Perlmutter  , MD Associate Professor of Clinical Ophthalmology and Visual Sciences
Monica S Perlmutter  , BSOT, MA Instructor in Ophthalmology and Visual Sciences
Ian Pitha  , MD instructor in Ophthalmology and Visual Sciences
Mujtaba A Qazi  Instructor in Clinical Ophthalmology and Visual Sciences
Rithwick Rajagopal  , MD Instructor in Ophthalmology and Visual Sciences
Mark S Rallo  , OD Instructor in Ophthalmology and Visual Sciences
Prabakar Kumar Rao  , MD Associate Professor of Ophthalmology and Visual Sciences
Rajesh C Rao  , MD Instructor in Ophthalmology and Visual Sciences
V. Nathan Ravi  , MD, MS, PHD Professor of Ophthalmology and Visual Sciences
Michael Dennis Rohde  , OD Adjunct Instructor in Ophthalmology and Visual Sciences
Louis J Rosenbaum  , MD Associate Professor of Clinical Ophthalmology and Visual Sciences
Mark A Rothstein  , MD Assistant Professor of Clinical Ophthalmology and Visual Sciences
Michael B Rumelt  , MD Assistant Professor Emeritus of Clinical Ophthalmology and Visual Sciences
Scott Geoffrey Sagett  Instructor in Clinical Ophthalmology and Visual Sciences
Frederick W Schwagger  , OD Adjunct Instructor in Ophthalmology and Visual Sciences
Christopher G Seep  , OD Adjunct Instructor in Ophthalmology and Visual Sciences
David Brian Seibel  , OD Adjunct Instructor in Ophthalmology and Visual Sciences
Gaurav Kirit Shah  , MD Professor of Clinical Ophthalmology and Visual Sciences
James Banks Shepherd III, MD Associate Professor of Ophthalmology and Visual Sciences
Arsham Sheybani  , MD Instructor in Ophthalmology and Visual Sciences
Steven M Shields  , MD Assistant Professor of Clinical Ophthalmology and Visual Sciences
Alan Shiel  , PHD Professor of Ophthalmology and Visual Sciences
Howard Newton Short  , MD Instructor in Clinical Ophthalmology and Visual Sciences
Carla J Siegfried  , MD Professor of Ophthalmology and Visual Sciences
Charles D Signorelli  , OD Adjunct Instructor in Ophthalmology and Visual Sciences
Bradley Thomas Smith  , MD Instructor in Clinical Ophthalmology and Visual Sciences
THE MUSCULOSKELETAL CLERKSHIP: A PART OF THE COMPREHENSIVE SURGICAL CLERKSHIP

The objective of this rotation is to convey to the student appropriate knowledge, skills and attitudes for
the recognition, diagnosis, investigation and treatment of conditions affecting the musculoskeletal system.

Most students at Washington University School of Medicine are not entering specialties that devote themselves to the treatment of diseases of the musculoskeletal system. It is noteworthy, though, that greater than one-third of complaints directed toward primary caregivers and general internists are related to the musculoskeletal system: the actual volume of these complaints presented to primary care physicians, general internists and pediatricians is second only to complaints related to the cardiovascular system (and for pediatricians, presentations related to infectious diseases).

Musculoskeletal signs and symptoms are encountered commonly in emergency medicine, trauma surgery, internal medicine, oncology, neurology, pediatrics and endocrinology as well as many other surgical and medical specialties. Since students who enter postgraduate training in these subspecialties as well as in general primary care will be required to evaluate, diagnose and treat these conditions, it is important for the undergraduate curriculum to have these topics addressed in an organized and consistent way. It is for this reason that we developed a comprehensive integrated exposure to musculoskeletal surgery and medicine during the third-year comprehensive surgical clerkship. This is a key component of the integrated third-year curriculum.

To accomplish these goals, there will be a balance between clinical, operative, emergency room and didactic (lecture and small group) experiences. Didactic sessions will be in several formats: lectures, physical examination demonstrations and small group discussions. Only instructor or assistant-, associate- or professor-level members of the full-time Washington University School of Medicine staff will deliver formal lectures to the students. Lecturers will be from the following specialties: Orthopaedic Surgery, Sports Medicine, and Physical Medicine and Rehabilitation (Physiatry) for balance and content expertise.

The following lecture topics will be scheduled monthly:
1) Diseases and Injuries of the Spine
2) Musculoskeletal Emergencies
3) Common Fractures
4) Bone and Mineral Physiology
5) Electrophysiology
6) Pediatric and Adolescent Sports Medicine
7) Adult Sports Injuries
8) Cancer

The clinical experience is one month in duration, and takes place during the comprehensive surgical clerkship for all Washington University medical students during either the first, second or third months of the 12-week clerkship. The one-month block is divided into two two-week sessions wherein the students would spend time with staff from the following specialties: orthopaedic surgery, rheumatology, physical medicine and rehabilitation, sports medicine, neurosurgery and bone and mineral physiology.

The experience can be combined inpatient and outpatient, clinic and operating room, emergent and non-emergent care as well as both surgical and nonsurgical, based upon the student’s own choosing. However, to ensure an appropriately balanced experience, students will usually be limited to specific rotation combinations from which to choose, such as those below:
   - Hand/Joint Reconstruction (2 weeks/2 weeks)
   - Shoulder and Elbow/Orthopaedic Oncology (2 weeks/2 weeks)
   - Physical Medicine and Rehabilitation/Spine (2 weeks/2 weeks)
   - Pediatric Orthopaedic Surgery/Sports Medicine or Sports Surgery (2 weeks/2 weeks)
   - VA Orthopaedic Service/Rheumatology Bone and Mineral (2 weeks/2 weeks)

The following Washington University School of Medicine full-time attending staff mentors are eligible to have students rotate with them during the rotation:
1) Martin Boyer (Hand)
2) Charles Goldfarb (Hand)
3) Ryan Calfee (Hand)
4) Matthew Matava (Sports Surgery)
5) Mark Halstead (Sports Medicine)
6) Heidi Prather and Devyani Hunt (Physical Medicine and Rehabilitation)
7) John Metzler and Adam Labore (Physical Medicine and Rehabilitation)
8) Eric Gordon (Pediatric Orthopaedic Surgery)
9) Gary Miller (VA Orthopaedic Surgery Service)
10) James Keeney (Joint Reconstruction)
11) Richard Brasington and Kathy Diemer (Rheumatology Bone and Mineral)
12) Jacob Buchowski (Spine)
13) Paul Santiago (Neurosurgery Spine)
14) Douglas McDonald (Orthopaedic Oncology)
15) Leesa Galatz (Shoulder and Elbow)
16) Jay Keener (Shoulder and Elbow)
17) Jeremy McCormick (Foot and Ankle)
18) Sandra Klein (Foot and Ankle)

There should only be ONE student per attending staff in order to promote one-on-one teaching; however, exceptions can be made in the event of vacations, illness, conference travel, etc. on the part of the attending staff.

The learning of physical examination skills by the students is a critical part of the musculoskeletal block. The coursemaster will meet weekly with the students to demonstrate physical examination of the neck and spine, shoulder and elbow, hip and knee, and the hand and foot. The normal examination will be covered, and relevant common conditions and provocative tests will be covered as well.

**Fourth Year**

**Electives**

**M95 838 PEDIATRIC ORTHOPAEDIC SPINE AND SPORTS SURGERY**
Instructor(s): Scott J. Luhmann, M.D., 454-2045
Location: Washington University, St. Louis Children’s Hospital, Washington University Orthopedics — Chesterfield
Elective Contact: Kathy Jones, 747-2813, jones.k@wustl.edu
Other Information: Students should contact Kathy Jones prior to the first day of the elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

Clinical elective available for four weeks during which time the student will work with attending surgeon primarily at St. Louis Children’s Hospital observing and assisting in outpatient and inpatient care. To be included are activities in the OR, ER and outpatient clinics. In addition to general pediatric orthopaedics, Dr. Luhmann has special interests in the treatment of pediatric spinal injuries and disorders as well as pediatric sports medicine. Attendance at and participation in the weekly pediatric orthopaedic conference activities required.

Student time distribution: Inpatient 48%, Outpatient 47%, Conferences/Lectures 5%; Subspecialty Care 100%
Major teaching responsibility: Faculty attendings and resident mentors
Patients seen/weekly: Varies
On call/weekend responsibility: Varies — generally one weekend call every two weeks

**M95 839 ORTHOPAEDIC SPORTS MEDICINE**
Instructor(s): Matthew Smith, M.D., 514-3584
Location: Washington University, Barnes-Jewish Hospital, Washington University Orthopedics — Chesterfield
Elective Contact: Kathy Jones, 747-2813, jones.k@wustl.edu
Other Information: Students should contact Kathy Jones prior to the first day of the elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

This clinical elective is available for four weeks during which the student participates in orthopaedic conferences, outpatient clinics, surgical cases and patient rounds on the Sports Medicine service.

Student time distribution: Inpatient 5%, Outpatient 90%, Conferences/Lectures 5%; Subspecialty Care 100%
Major teaching responsibility: Faculty attending and fellow/resident mentors
Patients seen/weekly: Varies
On call/weekend responsibility: Varies — generally one weekend call every two weeks

M95 840A ORTHOPAEDIC SURGERY — FOOT/ANKLE
Instructor(s): Jeremy J. McCormick, M.D., 514-3584
Location: Washington University Orthopedics — Chesterfield
Elective Contact: Kathy Jones, 747-2813, jones.k@wustl.edu
Other Information: Students should contact Kathy Jones prior to the first day of the elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

This four-week clinical elective is available to medical students looking to further their knowledge/experience in orthopaedics, specifically foot and ankle surgery. Students will participate in surgical cases, outpatient clinics, inpatient care and weekly didactic sessions/conferences. At the completion of the elective, students should have gained a basic knowledge of foot and ankle problems as well as their operative and non-operative care.

Student time distribution: Inpatient 20%, Outpatient 75%, Conferences/Lectures 5%; Subspecialty Care 100%
Major teaching responsibility: Faculty attendings and fellow/resident mentors
Patients seen/weekly: 80
On call/weekend responsibility: Varies — generally one weekend call every two weeks

M95 842A ORTHOPAEDIC SHOULDER/ELBOW SURGERY
Instructor(s): Ken Yamaguchi, M.D., 747-2534
Location: Washington University, Barnes-Jewish Hospital, Washington University Orthopedics — Chesterfield
Elective Contact: Kathy Jones, 747-2813, jones.k@wustl.edu
Other Information: Students should contact Kathy Jones prior to the first day of the elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

Clinical elective available, during which time the student will work with attending surgeons primarily at Barnes-Jewish Hospital. Activities will include participation in the care of hospitalized inpatients, participation in inpatient and outpatient procedures, attendance at designated attending office hours, attendance at designated orthopaedic conferences and dissection of upper-extremity anatomical specimens.

Student time distribution: Inpatient 48%, Outpatient 47%, Conferences/Lectures 5%; Subspecialty Care 100%
Major teaching responsibility: Faculty attendings and resident mentors
Patients seen/weekly: Varies
On call/weekend responsibility: Varies — generally one weekend call every two weeks

M95 842B ORTHOPAEDIC SHOULDER/ELBOW SURGERY
Instructor(s): Leesa Galatz, M.D., 747-2813
Location: Washington University, Barnes-Jewish Hospital, Washington University Orthopedics —
Chesterfield
Elective Contact: Kathy Jones, 747-2813, jones.k@wustl.edu
Other Information: Students should contact Kathy Jones prior to the first day of the elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

Clinical elective available, during which time the student will work with attending surgeons primarily at Barnes-Jewish Hospital. Activities will include participation in the care of hospitalized inpatients, participation in inpatient and outpatient procedures, attendance at designated attending office hours, attendance at designated orthopaedic conferences and dissection of upper-extremity anatomical specimens.

Student time distribution: Inpatient 48%, Outpatient 47%, Conferences/Lectures 5%; Subspecialty Care 100%
Major teaching responsibility: Faculty attendings and resident mentors
Patients seen/weekly: Varies
On call/weekend responsibility: Varies — generally one weekend call every two weeks

M95 842C ORTHOPAEDIC SHOULDER/ELBOW SURGERY
Instructor(s): Jay D. Keener, M.D., 747-2639
Location: Washington University, Barnes-Jewish Hospital, Washington University Orthopedics — Chesterfield
Elective Contact: Kathy Jones, 747-2813, jones.k@wustl.edu
Other Information: Students should contact Kathy Jones prior to the first day of the elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

Clinical elective available, during which time the student will work with attending surgeons primarily at Barnes-Jewish Hospital. Activities will include participation in the care of hospitalized inpatients, participation in inpatient and outpatient procedures, attendance at designated attending office hours, attendance at designated orthopaedic conferences and dissection of upper-extremity anatomical specimens.

Student time distribution: Inpatient 48%, Outpatient 47%, Conferences/Lectures 5%; Subspecialty Care 100%
Major teaching responsibility: Faculty attendings and resident mentors
Patients seen/weekly: Varies
On call/weekend responsibility: Varies — generally one weekend call every two weeks.

M95 845A ORTHOPAEDIC HAND AND UPPER EXTREMITY SURGERY
Instructor(s): Ryan P. Calfee, M.D., 747-2813
Location: Washington University, Barnes-Jewish Hospital, Shriners Hospital for Children, St. Louis Children’s Hospital, Washington University Orthopedics - Chesterfield
Elective Contact: Kathy Jones, 747-2813, jones.k@wustl.edu
Other Information: Washington University, Barnes-Jewish Hospital, Shriners Hospital for Children, St. Louis Children’s Hospital, Washington University Orthopedics — Chesterfield
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

Clinical elective available, during which time the student will work with attending surgeons primarily at Barnes-Jewish Hospital, St. Louis Children’s Hospital and Shriner’s Hospital. The service includes care of adult and pediatric patients with traumatic, sports (arthroscopy), nerve and degenerative disease. Activities will include participation in outpatient procedures, attendance at faculty clinic office hours and attendance at orthopaedic conferences.

Student time distribution: Inpatient 5%, Outpatient 85%, Conferences/Lectures 10%; Subspecialty Care 100%
Major teaching responsibility: Faculty attendings, fellow and resident mentors
Patients seen/weekly: 70+
On call/weekend responsibility: Varies — generally one weekend call every two weeks

**M95 845B ORTHOPAEDIC HAND AND UPPER EXTREMITY SURGERY**
Instructor(s): Charles Goldfarb, M.D., 747-4705
Location: Washington University, Barnes-Jewish Hospital, Shriners Hospital for Children, St. Louis Children's Hospital, Washington University Orthopedics — Chesterfield
Elective Contact: Kathy Jones, 747-2813, jones.k@wustl.edu
Other Information: Students should contact Kathy Jones prior to the first day of the elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

Clinical elective available, during which time the student will work with attending surgeons primarily at Barnes-Jewish Hospital, St. Louis Children’s Hospital and Shriner’s Hospital. The service includes care of adult and pediatric patients with congenital, traumatic, sports (arthroscopy), nerve and degenerative disease. Activities will include participation in outpatient procedures, attendance at faculty clinic office hours, attendance at orthopaedic conferences and dissection of upper-extremity anatomical specimens.

Student time distribution: Inpatient 5%, Outpatient 85%, Conferences/Lectures 10%; Subspecialty Care 100%
Major teaching responsibility: Faculty attendings, fellow and resident mentors
Patients seen/weekly: 100+
On call/weekend responsibility: Varies — generally one weekend call every two weeks

**M95 845C ORTHOPAEDIC HAND AND UPPER EXTREMITY SURGERY**
Instructor(s): Richard H. Gelberman, M.D., 747-2531
Location: Washington University, Barnes-Jewish Hospital, Washington University Orthopedics — Chesterfield
Elective Contact: Kathy Jones, 747-2813, jones.k@wustl.edu
Other Information: Students should contact Kathy Jones prior to the first day of the elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

Clinical elective available, during which time the student will work with attending surgeon primarily at Barnes-Jewish Hospital. Activities will include participation in the care of hospitalized inpatients, participation in inpatient and outpatient procedures, attendance at designated attending office hours, attendance at designated orthopaedic conferences and dissection of upper-extremity anatomical specimens.

Student time distribution: Inpatient 48%, Outpatient 47%, Conferences/Lectures 5%; Subspecialty Care 100%
Major teaching responsibility: Richard Gelberman, M.D.
Patients seen/weekly: Varies
On call/weekend responsibility: Varies — generally one weekend call every two weeks

**M95 846A ORTHOPAEDIC TRAUMA**
Instructor(s): William Ricci, M.D., 747-2811
Location: Washington University, Barnes-Jewish Hospital
Elective Contact: Kathy Jones, 747-2813, jones.k@wustl.edu
Other Information: Students should contact Kathy Jones prior to the first day of the elective
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

Clinical elective available for a four-week period, during which time the student will work in orthopaedic trauma at Barnes-Jewish Hospital. The student will work with a team of attendings, residents, PAs and
NPs to provide care for orthopaedic trauma patients. Activities include participation in the care of hospitalized inpatients, inpatient surgical procedures, outpatient office visits and daily conferences.

Student time distribution: Inpatient 60%, Outpatient 35%, Conferences/Lectures 5%; Subspecialty Care 100%
Major teaching responsibility: Faculty attendings and resident mentors
Patients seen/weekly: Varies
On call/weekend responsibility: Varies — generally one weekend call every two weeks

**M95 846B ORTHOPAEDIC TRAUMA**
Instructor(s): Michael Gardner, M.D., 747-2523
Location: Washington University, Barnes-Jewish Hospital
Elective Contact: Kathy Jones, 747-2813, jones.k@wustl.edu
Other Information: Students should contact Kathy Jones prior to the first day of the elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

Clinical elective available for a four-week period, during which time the student will work in orthopaedic trauma at Barnes-Jewish Hospital. The student will work with a team of attendings, residents, PAs and NPs to provide care for orthopaedic trauma patients. Activities include participation in the care of hospitalized inpatients, inpatient surgical procedures, outpatient office visits and daily conferences.

Student time distribution: Inpatient 60%, Outpatient 35%, Conferences/Lectures 5%; Subspecialty Care 100%
Major teaching responsibility: Faculty attendings and resident mentors
Patients seen/weekly: Varies
On call/weekend responsibility: Varies — generally one weekend call every two weeks

**M95 846C ORTHOPAEDIC TRAUMA**
Instructor(s): Christopher McAndrew, M.D., 747-2523
Location: Washington University, Barnes-Jewish Hospital
Elective Contact: Kathy Jones, 747-2813, jones.k@wustl.edu
Other Information: Students should contact Kathy Jones prior to the first day of the elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

Clinical elective available for a four-week period, during which time the student will work in orthopaedic trauma at Barnes-Jewish Hospital. The student will work with a team of attendings, residents, PAs and NPs to provide care for orthopaedic trauma patients. Activities include participation in the care of hospitalized inpatients, inpatient surgical procedures, outpatient office visits and daily conferences.

Student time distribution: Inpatient 60%, Outpatient 35%, Conferences/Lectures 5%; Subspecialty Care 100%
Major teaching responsibility: Faculty attendings and resident mentors
Patients seen/weekly: Varies
On call/weekend responsibility: Varies — generally one weekend call every two weeks

**M95 848A ORTHOPAEDIC PEDIATRIC SURGERY**
Instructor(s): Eric Gordon, M.D., 454-2045
Location: Washington University, St. Louis Children’s Hospital, Washington University Orthopedics — Chesterfield
Elective Contact: Kathy Jones, 747-2813, jones.k@wustl.edu
Other Information: Students should contact Kathy Jones prior to the first day of the elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.
Clinical elective available for four weeks during which the student will work with attending surgeon primarily at St. Louis Children’s Hospital observing and assisting in outpatient and inpatient care. To be included are activities in the OR, ER and outpatient clinics. Attendance at and participation in the weekly pediatric orthopaedic conference activities required.

Student time distribution: Inpatient 48%, Outpatient 47%, Conferences/Lectures 5%; Subspecialty Care 100%
Major teaching responsibility: Faculty attendings and resident mentors
Patients seen/weekly: Varies
On call/weekend responsibility: Varies — generally one weekend call every two weeks

M95 848B ORTHOPAEDIC PEDIATRIC SURGERY
Instructor(s): Kathryn Keeler, M.D., 747-2523
Location: Washington University, St. Louis Children’s Hospital, Barnes-Jewish Hospital
Elective Contact: Kathy Jones, 747-2813, jones.k@wustl.edu
Other Information: Students should contact Kathy Jones prior to the first day of the elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

Clinical elective available for four weeks during which time the student will work with attending surgeon primarily at St. Louis Children’s Hospital observing and assisting in outpatient and inpatient care. To be included are activities in the OR, ER and outpatient clinics. Attendance at and participation in the weekly pediatric orthopaedic conference activities required.

Student time distribution: Inpatient 48%, Outpatient 47%, Conferences/Lectures 5%; Subspecialty Care 100%
Major teaching responsibility: Faculty attendings and resident mentors
Patients seen/weekly: Varies
On call/weekend responsibility: Varies — generally one weekend call every two weeks

M95 849B ORTHOPAEDIC SPINE SURGERY IN ADULT PATIENTS
Instructor(s): Jacob Buchowski, M.D., M.S., 747-4950
Location: Washington University, Barnes-Jewish Hospital, Washington University Orthopedics — Chesterfield
Elective Contact: Kathy Jones, 747-2813, jones.k@wustl.edu
Other Information: Students should contact Kathy Jones prior to the first day of the elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

This clinical elective is available for four weeks, during which time the student will work with the attending surgeon primarily at Barnes-Jewish Hospital observing and assisting when appropriate in outpatient and inpatient care. To be included are activities in the OR, ER and outpatient clinics. Attendance at and participation in the weekly orthopaedic conference activities is required. The spine fellow assigned to this service will serve as a primary contributor to the student’s education experience on this rotation.

Student time distribution: Inpatient 48%, Outpatient 47%, Conferences/Lectures 5%; Subspecialty Care 100%
Major teaching responsibility: Faculty attending, spine fellow assigned to this service and resident mentors
Patients seen/weekly: Varies
On call/weekend responsibility: Varies — generally one weekend call every two weeks.

M95 855A RECONSTRUCTIVE AND JOINT PRESERVATION SURGERY
Instructor(s): Robert L. Barrack, M.D., 747-2562
Location: Washington University, Barnes-Jewish Hospital, Washington University Orthopedics —
Clinical elective available, during which time the student will work with the attending physician on the Adult Reconstruction and Joint Preservation/Replacement service. This rotation is primarily centered at Barnes-Jewish Hospital and includes care of hospitalized inpatients, participant in inpatient and outpatient procedures, attendance at designated office hours, and attendance at and participation in orthopaedic educational conferences and anatomy sessions.

Student time distribution: Inpatient 48%, Outpatient 47%, Conferences/Lectures 5%; Subspecialty Care 100%
Major teaching responsibility: Faculty attendings, fellow and resident mentors
Patients seen/weekly: Varies
On call/weekend responsibility: Varies — generally one weekend call every two weeks

M95 855B RECONSTRUCTIVE AND JOINT PRESERVATION SURGERY
Instructor(s): John C. Clohisy, M.D., 747-2566
Location: Washington University, Barnes-Jewish Hospital, Washington University Orthopedics — Chesterfield
Elective Contact: Kathy Jones, 747-2813, jones.k@wustl.edu
Other Information: Students should contact Kathy Jones prior to the first day of the elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

Clinical elective available, during which time the student will work with the attending physician on the Adult Reconstruction and Joint Preservation/Replacement service. This rotation is primarily centered at Barnes-Jewish Hospital and includes care of hospitalized inpatients, participant in inpatient and outpatient procedures, attendance at designated office hours, and attendance at and participation in orthopaedic educational conferences and anatomy sessions.

Student time distribution: Inpatient 48%, Outpatient 47%, Conferences/Lectures 5%; Subspecialty Care 100%
Major teaching responsibility: Faculty attendings, fellow and resident mentors
Patients seen/weekly: Varies
On call/weekend responsibility: On call one weekend every two weeks

M95 855C RECONSTRUCTIVE AND JOINT PRESERVATION SURGERY
Instructor(s): Ryan M. Nunley, M.D., 747-2523
Location: Washington University, Barnes-Jewish Hospital, Washington University Orthopedics — Chesterfield
Elective Contact: Kathy Jones, 747-2813, jones.k@wustl.edu
Other Information: Students should contact Kathy Jones prior to the first day of the elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

Clinical elective available, during which time the student will work with the attending physician on the Adult Reconstruction and Joint Preservation/Replacement service. This rotation is primarily centered at Barnes-Jewish Hospital and includes care of young patients with hip impingement pathology and older patients with end-stage joint arthritis. hospitalized inpatients, participant in inpatient and outpatient procedures, attendance at designated office hours, and attendance at and participation in orthopaedic educational conferences and anatomy sessions.

Student time distribution: Surgical 60%, Clinics 30%, Conferences/Lectures 10%; Subspecialty Care 100%
Major teaching responsibility: Faculty attendings, fellow and resident mentors
Patients seen/weekly: 40-60 patients in clinic, 8-12 surgeries
On call/weekend responsibility: On call one weekend every two weeks

**M95 855D RECONSTRUCTIVE AND JOINT PRESERVATION SURGERY**
Instructor(s): James Keeney, M.D., 747-2523
Location: James Keeney, M.D., 747-2523
Elective Contact: Kathy Jones, 747-2813, jones.k@wustl.edu
Other Information: Students should contact Kathy Jones prior to the first day of the elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

Clinical elective available, during which time the student will work with the attending physician on the Adult Reconstruction and Joint Preservation/Replacement service. This rotation is primarily centered at Barnes-Jewish Hospital and includes care of patients with basic and complex reconstruction concerns affecting the hip and knee. Students will be exposed to conventional approaches to hip and knee reconstruction surgery, minimally invasive total knee replacement and revision surgery of the hip and knee. Students will participate in inpatient and outpatient procedures, attend designated office hours and participate in orthopaedic educational conferences and anatomy sessions.

Student time distribution: Inpatient 55%, Outpatient 40%, Conferences/Lectures 5%; Subspecialty Care 100%
Major teaching responsibility: Faculty attendings, fellow and resident mentors
Patients seen/weekly: 60 Outpatients, 10-15 inpatient surgical cases. Some variance.
On call/weekend responsibility: On call one weekend every two weeks

**M95 8599 ORTHOPAEDIC SURGERY EXTERNSHIP (Visiting Students Only)**
Instructor(s): Martin I. Boyer, M.D., and Rick Wright, M.D.
Location: Washington University, Barnes-Jewish Hospital, Washington University Orthopedics — Chesterfield
Elective Contact: Orthopaedics Education Office, 747-2835, orthsurg@wudosis.wustl.edu
Other Information: Students meet in the Education Office, 8 a.m. first day of the elective.
Enrollment limit per period: Varies
Valid start weeks for 4-week blocks TBD

Students rotate on Orthopaedic Services for two- or four-week blocks. Students typically participate in two weeks of hand and upper extremity surgery with Dr. Martin Boyer and two weeks of sports medicine with Dr. Rick Wright. Two weeks on another clinical rotation may also be selected. Please contact the
Orthopaedics Education Coordinator, Michelle Tuetken, for further information: tuetken@wustl.edu.

Student time distribution: Inpatient 48%, Outpatient 47%, Conferences/Lectures 5%; Subspecialty Care 100%
Major teaching responsibility: Faculty attendings and resident mentors
Patients seen/weekly: Varies
On call/weekend responsibility: Varies — generally one weekend call every two weeks

Research

(M95 900)

Various orthopaedic surgery research opportunities are available with the following faculty attendings. If interested, please contact the Education Office at 747-2543, orthsurg@wudosis.wustl.edu or contact the faculty member directly.

Yousef Abu-Amer, Ph.D.
Robert L. Barrack, M.D.
Jacob M. Buchowski, M.D., M.S.
John Clohisy, M.D.
Matthew Dobbs, M.D.
Leesa Galatz, M.D.
Richard H. Gelberman, M.D.
Charles A. Goldfarb, M.D.
J. Eric Gordon, M.D.
Scott J. Luhmann, M.D.
Matthew J. Matava, M.D.
Linda Sandell, Ph.D.
Perry Schoenecker, M.D.
Matt Silva, Ph.D.
Stavros Thomopoulos, Ph.D.
Rick Wright, M.D.
Ken Yamaguchi, M.D.

Faculty

Richard H Gelberman , MD Head of the Department of Orthopaedic Surgery
Yousef Abu-Amer , MS, PHD Professor of Orthopaedic Surgery
Robert L Barrack, MD Charles F and Joanne Knight Distinguished Professor of Orthopaedic Surgery
Donald R Bassman, MD Instructor in Clinical Orthopaedic Surgery
Martin I Boyer, MD, MS Carol B and Jerome T Loeb Professor of Orthopaedic Surgery
Keith Happ Bridwell, MD J Albert Key Distinguished Professor of Orthopaedic Surgery
Robert Henry Brophy IV, MD, MS Assistant Professor of Orthopaedic Surgery
Jacob M Buchowski, MD, MS Associate Professor of Orthopaedic Surgery
Cheryl Ann Caldwell, DPT, MHS Assistant Professor of Orthopaedic Surgery
Ryan Patrick Calfee, MD Assistant Professor of Orthopaedic Surgery
Aaron Mark Chamberlain, B MUS, MD Assistant Professor of Orthopaedic Surgery
Roberto Civitelli, MD Professor of Orthopaedic Surgery
John C Clohisy, MD Daniel C. and Betty B. Viehmann Distinguished Professor of Orthopaedic Surgery
Suzanne Marie Cornbleet, DPT, MA Assistant Professor of Orthopaedic Surgery
Sylvia Lin Czuppon, MS Assistant Professor of Orthopaedic Surgery
Robert H Deusinger, MS, PHD Associate Professor of Orthopaedic Surgery
Matthew Barrett Dobbs, MD Associate Professor of Orthopaedic Surgery
Jack R. Engsberg, MS, MS1, PHD Professor of Orthopaedic Surgery
Roberta Faccio, PHD Associate Professor of Orthopaedic Surgery
Leesa Galatz, MD Associate Professor of Orthopaedic Surgery
Richard H Gelberman, MD Fred C Reynolds Professor of Orthopaedic Surgery
Louis Arnold Gilula, MD Professor of Orthopaedic Surgery
Charles A Goldfarb, MD Associate Professor of Orthopaedic Surgery
J. Eric Gordon, MD Professor of Orthopaedic Surgery
Christina A. Gurnett, MD, PHD Associate Professor of Orthopaedic Surgery
Mark E. Halstead, MD Assistant Professor of Orthopaedic Surgery
Mary Kent Hastings, DPT, MS Assistant Professor of Orthopaedic Surgery
Marcie Harris Hayes, DPT, MS Assistant Professor of Orthopaedic Surgery
Damon Joseph Louis Hays, MD Instructor in Clinical Orthopaedic Surgery
Gregory William Holtzman, DPT, MS Assistant Professor of Orthopaedic Surgery
Devyani M. Hunt, MD Assistant Professor of Orthopaedic Surgery
Renee A. Ivens, DPT, MHS Assistant Professor of Orthopaedic Surgery
Jeffrey E Johnson, MD Professor of Orthopaedic Surgery
Kathryn A. Keeler, MD Assistant Professor of Orthopaedic Surgery
Jay Donovan Keener, MD Assistant Professor of Orthopaedic Surgery
James A Keeney, MD Assistant Professor of Orthopaedic Surgery
Michael Patrick Kelly, MD Assistant Professor of Orthopaedic Surgery
Lynnette C Khoo-Summers, DPT, MS Assistant Professor of Orthopaedic Surgery
Sandra E. Klein, BE, MD Assistant Professor of Orthopaedic Surgery
Robert S Kramer, MD Instructor in Clinical Orthopaedic Surgery
Adam J. LaBore, MD Associate Professor of Orthopaedic Surgery
Robert Craig Lander, MD Instructor in Clinical Orthopaedic Surgery
Lawrence G Lenke, MD
Scott J Luhmann, MD
Charles Irwin Mannis, MD
Matthew J Matava, MD
Audrey McAlinden, PhD
Christopher M McAndrew, MD
Jeremy James McCormick, MD
Douglas J. McDonald, MD
Debra Ann McDonnell, AS, DPT, MS
Mary Kate McDonnell, DPT, MHS
Patricia Navarro McGee
John P Metzler, MD
Gary Arthur Miller, MD
Marvin R Mishkin, MD
Alan H Morris, MD
Ryan M. Nunley, MD
Margaret Mary Oakley, MD
Debabrata Patra, MS, PHD
Terrence L Piper, MD
Heidi Prather, DOST
William M Ricci, MD
K. Daniel Riew, MD
Linda J Sandell, MS, PHD
Paul Santiago, MD
Perry Lee Schoenecker, MD
John Joseph Sheridan, MD
Matthew J Silva, ME, PHD
Matthew Vernon Smith, MD
Nancy Bloom Smith, DPT, MS
Todd J. Stewart, MD
James W Strickland, MD
Chi-Tsai Tang, MD
Simon Tang, MS, PHD
Stavros Thomopoulos, MS, MS1, PHD
Stacy Lynne Tylka, DPT, MS
Linda R Van Dillen, MS, PHD
Harry John Visser, MD
Lindley Bevelle Wall, MD
Michael D Weiss
Pamela M. Wendl, DPT, MS
Otolaryngology is presented to students in the first-, second-, third- and fourth-year classes. Physical diagnosis skills are taught in the first year. Clinically oriented lectures and a physical diagnosis workshop are presented to second-year students. In the third year of the medical curriculum, four-week elective rotations on one of the services in East Pavilion, the St. Louis VA Medical Center — John Cochran Division or St. Louis Children's Hospital are offered. During this period, there is teaching at the bedside, in the operating room and in the clinic, supplemented by daily afternoon lectures, Grand Rounds on Wednesdays and an introduction to audiology.

Fourth-year students interested in ENT as a specialty may take a two- to four-week elective designed to give them exposure to patient care, both in the outpatient clinic and the operating room and postoperative setting. An additional four-week elective that provides comprehensive ambulatory experience is offered to students headed for primary care.

**CID at Washington University School of Medicine**

The consortium of graduate-education, research and clinical programs known today as CID at Washington University School of Medicine was born out of the pioneering efforts of St. Louis physician Max Goldstein, MD. In 1914, he founded the Central Institute for the Deaf (CID), where doctors and teachers worked together to help deaf people. When CID’s school building opened two years later, its auditory/oral methods for instructing deaf children were groundbreaking.

Washington University and CID first joined forces in 1931, when CID’s established teacher training program became the first deaf education undergraduate program to affiliate with a university. Graduate programs in deaf education, audiology, and speech and hearing sciences soon followed.

CID’s research efforts began in the 1930s to study the anatomy and science of hearing. During World War II, CID’s research on hearing loss in military personnel laid the foundation for the field of audiology. CID also pioneered hearing testing and hearing aids and opened the country’s first hearing aid clinic in 1941. In September 2003, a new affiliation transferred CID’s graduate degree programs, research programs and adult audiology clinic, along with its building, to Washington University School of Medicine. The CID school continues to operate on the School of Medicine campus as CID — Central Institute for the Deaf.

Today, these programs continue to work together to fulfill a shared mission to serve people with hearing loss.

**Courses**

**First Year**

**OTOLARYNGOLOGY CLINICAL SKILLS**
Instructor: Joel A. Goebel, MD, 747-0553
Introductory lecture and group sessions pertaining to the complete head and neck examination. After the
one-hour lecture, students will be divided into small groups to learn the otoscopic, nasal, oral cavity and neck examination to be proctored by physicians from the ENT department.

**Second Year**

**M55 660B CLINICAL TOPICS IN OTOLARYNGOLOGY**
Instructor: Brian Nussenbaum, MD, 362-6599
This course consists of eight introductory lectures on common diseases of the head and neck, including head and neck carcinoma, hearing loss, vertigo, neck masses, pediatric airway obstruction, sinusitis, otolaryngologic emergencies and facial fractures. Each lecture is highlighted by case presentations and treatment options in addition to pathophysiology. This course follows the physical examination practicum given earlier in the academic year.

**Fourth Year**

**Electives**

**M55 801 OTOLARYNGOLOGY**
Instructor(s): Joel Goebel, M.D., 747-0553
Location: 9916 McMillan Hospital Building
Elective Contact: Maria Harrington, 747-0553
Other Information: Students considering a career in otolaryngology should speak to Dr. Goebel prior to scheduling this elective. Prior to first day of elective, student should contact Dr. Goebel to discuss options of elective and to ascertain starting time and location.
Enrollment limit per period: Limit 3/period for Weeks: 1, 5; Limit 2/period for Weeks: 9, 13, 17, 21, 25, 29, 33, 37, and 41.
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.
Four-week rotation includes evaluation of ENT problems presented to specialist for diagnosis and treatment. The student participates in the clinic, hospital and operating room. This also includes time on the Pediatric ENT Service, Audiology, Voice Laboratory and Vestibular Evaluation Laboratory. Option of rotation on the ENT Service at VAMC is available.
Student time distribution: Inpatient 40%, Outpatient 40%, Conferences/Lectures 20%; Primary Care 20%, Subspecialty Care 80%
Major teaching responsibility: Attendings and residents
Patients seen/weekly: 50
On call/weekend responsibility: Every fourth day

**M55 802 GENERAL OTOLARYNGOLOGY**
Instructor(s): Joel Goebel, M.D., 747-0553
Location: 9916 McMillan Hospital Building
Elective Contact: Maria Harrington, 747-0553
Other Information: Students considering a career in otolaryngology should speak to Dr. Goebel prior to scheduling this elective. Prior to first day of elective, student should contact Dr. Goebel to discuss options of elective and to ascertain starting time and location.
Enrollment limit per period: 1
Valid start weeks for 2-week blocks are: Weeks 9, 11, 13, 15, 17, 19, 21, 23, 25, 27, 29, 31, 33, 35, 37, 39, 41, and 43.
This two-week elective is an extremely flexible program consisting of several options:

General Ear, Nose and Throat Service: Student functions as a junior resident at either Barnes-Jewish Hospital or St. Louis VA Medical Center — John Cochran Division. At Barnes-Jewish Hospital, participation in clinic, hospital inpatient and operating room settings would expose student to a broad spectrum of
patients. At the VA Hospital the emphasis would be on head and neck tumors.

Head and Neck Service — Barnes-Jewish Hospital: Student functions as junior resident on ENT hospital floor with great deal of exposure to head and neck surgery.

Pediatric Otolaryngology — St. Louis Children’s Hospital: Student participates as a junior resident, involved in pre- and postoperative surgical care as well as outpatient medical care.

Preceptorships: Student is assigned to a private practitioner’s office, functioning in his/her office as well as hospital service.

Other options can be entertained and formulated according to the student’s particular needs. Students participating in this elective will be required to spend an afternoon or morning in the Audiology/Vestibular Laboratory learning fundamentals of audiological and vestibular evaluation. Attendance at Monday afternoon conferences as well as Grand Rounds on Wednesday mornings is expected.

Student time distribution: Inpatient 20%, Outpatient 70%, Conferences/Lectures 10%; Primary Care 40%, Subspecialty Care 60%
Major teaching responsibility: Attendings and residents
Patients seen/weekly: 60
On call/weekend responsibility: None

M55 803 PEDIATRIC OTOLARYNGOLOGY
Instructor(s): David W. Molter, M.D., 454-2136
Location: 3S35 St. Louis Children's Hospital
Elective Contact: Patty Tampow, 454-2136
Other Information: Students should report to 3S35, St. Louis Children's Hospital, 8:30 a.m. first day of elective.
Enrollment limit per period: 2
This course is offered as either a 2 or 4 week duration.
Valid start weeks for 2-week or 4-week blocks are: Weeks 1, 3, 5, 7, 9, 11, 13, 15, 17, 19, 21, 23, 25, 27, 29, 31, 33, 35, 37, 39, 41 and 43.

The student will actively participate in the clinical office, inpatient consultations and surgery with the attending staff at St. Louis Children’s Hospital. Care would be taken to provide experience in the common problems one would see in primary care pediatrics or family practice. Participation in subspecialty/multidisciplinary clinics such as the Cleft and Craniofacial clinic is encouraged. Opportunity will be provided to learn the fundamentals of audiological evaluation. Students participating in this elective will attend academic conferences in both the pediatric and adult divisions.

Student time distribution: Inpatient 50%, Outpatient 40%, Conferences/Lectures 10%; Primary Care 30%, Subspecialty care 70%
Major teaching responsibility: Attending physician and residents
Patients seen/weekly: 100
On call/weekend responsibility: At student’s discretion

M55 820 PRACTICUM IN ADULT CLINICAL AUDIOLOGY
Instructor(s): Michael Valente, Ph.D., 362-7489
Location: 11th Floor, Center for Advanced Medicine (CAM)
Elective Contact: Michael Valente, Ph.D., 362-7489
Other Information: Students should contact Dr. Valente to schedule this elective.
Enrollment limit per period: 8
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

Guidance provided in the administration and interpretation of audiometric tests. Emphasis on defining the severity of auditory dysfunction in addition to identifying sites of pathological processes. Theoretical bases of acoustics, anatomy and physiology, and electronics reviewed as they relate to auditory
assessment. Modification of conventional test paradigms and hearing aid procedures covered according to each student's interests and needs.

Student time distribution: Inpatient 10%, Outpatient 80%, Conferences/Lectures 10%; Primary Care 50%, Subspecialty Care 50%
Major teaching responsibility: Audiology staff
Patients seen/weekly: 120
On call/weekend responsibility: None

M55 831 NEUROTOLOGY
Instructor(s): Joel Goebel, M.D., 747-0553
Location: 9th Floor McMillan Hospital Building
Elective Contact: Maria Harrington, 747-0553
Other Information: Students should contact Dr. Goebel if interested in this elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

Active student participation in the physical exam, advanced testing, and management of patients with balance dysfunction. Attend patient clinic two days a week and test patients on ENG, rotary chair and computerized platform three days a week. Research participation welcome with prior arrangements.

Student time distribution: Outpatient 80%, Conferences/Lectures 20%; Primary Care 10%, Subspecialty Care 90%
Major teaching responsibility: Attending
Patients seen/weekly: 40
On call/weekend responsibility: None

M55 833 AMBULATORY OTOLARYNGOLOGY FOR THE PRIMARY CARE PHYSICIAN
Instructor(s): Joel Goebel, M.D., 747-0553
Location: Barnes-Jewish Hospital and St. Louis Children’s Hospital clinics
Elective Contact: Maria Harrington, 747-0553
Other Information: Students should contact Maria Harrington, 9906 McMillan Hospital Building, 747-0553, prior to the start of this elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 9, 13, 17, 21, 25, 29, 33, 37, and 41.

This course offers a four-week exposure to ambulatory care of patients with diseases of the head and neck. Eight half-day sessions per week will be offered in attending clinics for general otolaryngology, head and neck cancer, otology and pediatric otolaryngology. Two half-day sessions are reserved for audiology, vestibular lab and voice lab experience. Surgical exposure is available for selected cases as identified by the student and attending physician, but the main goal of this rotation is outpatient diagnosis and management.

Student time distribution: Outpatient 100%; Primary Care 50%, Subspecialty Care 50%
Major teaching responsibility: Attendings and residents
Patients seen/weekly: >100
On call/weekend responsibility: None

Research

(M55 900)
The type of research will depend upon the current phase of the research program in each laboratory. Students should contact the director of each laboratory to negotiate.

Pablo M Blazquez, Ph.D., 4566 Scott Avenue, East McDonnell Specialized Research Facility, 362-1013. Role of the vestibulo-cerebellum and its target nuclei in eye movement control and spatial orientation.
We used a range of methodologies: single and multiunit recordings, electrical brain stimulation, computational methods, pharmacology and behavioral studies. Our main lines of research are: 1) Signal transformations carried out by the vestibulo-cerebellum during visual and vestibular stimulation. 2) Physiology of the vestibular nuclei 3) Role of the cerebellum-brainstem loop in motor learning in the vestibulo-ocular reflex. Students will be instructed in one or several techniques and are expected to contribute significantly to the development of specific lab projects.

Barbara A. Bohne, Ph.D. and Gary W. Harding, M.S.E., 2110 and 2154 CID Building, 362-7497. The structure and function of the normal and damaged hearing organ, the organ of Corti, are studied in this laboratory. Several projects utilize the chinchilla for determining mechanisms of cell degeneration in the organ of Corti following exposure to different ototoxicants, particularly noise. The chinchilla is an excellent model for these studies because its hearing is similar to that of humans, it is free of spontaneous middle ear disease and it is feasible to perform surgery on its middle and inner ears, including survival surgery. Current projects involve: (a) Using an inert tracer particle injected in vivo into the endolymphatic space or perilymphatic space of the cochlea to determine if, when and for how long cell membranes are disrupted after a particular noise exposure; (b) Exposure to a damaging noise produces focal losses of outer hair cells and inner hair cells in the organ of Corti. The patterns of hair-cell loss in the low-frequency (i.e., apex) and high-frequency (i.e., base) of the organ of Corti are different, implying that different mechanisms are involved. We are trying to identify the mechanisms associated with the formation of focal losses of outer hair cells, inner hair cells, supporting cells and afferent nerve fibers following exposure to a high- or a low-frequency noise; and (c) Several cell death pathways have been identified for outer hair cells following exposure to moderate- to high-intensity noise. In vivo treatment of the cochlea with the vital dye trypan blue allows us to identify cells with disrupted plasma membranes. By instilling trypan blue into the endolymphatic space or perilymphatic space, we can determine what portion of the hair-cell’s plasma membrane initially breaks down when the cell has been damaged. The long-term goal of this research is to identify pharmacological agents that will ameliorate or attenuate noise-induced hearing loss and aging-related hearing loss in humans.

Brian T. Faddis, Ph.D., 1020 McMillan Hospital Building, 747-3665, faddisb@wustl.edu. Our lab is interested in the cellular and molecular mechanisms that modulate sensitivity and temporal acuity in the auditory pathway and how deficits in these mechanisms lead to functional losses. We are particularly interested in molecules that have physiologic roles in normal auditory signal transduction but engender pathologic responses due to inflammation, noise and ototoxin exposure and aging. Utilizing a wide variety of functional, anatomical and molecular techniques, we are currently investigating the roles of the synuclein family of proteins in peripheral and central auditory processing. Our work has shown that alpha- and beta-synuclein localize to nerve endings and spiral ganglion cells and work in a compensatory fashion to modulate hearing sensitivity. Further, over-expression of alpha-synuclein can actually enhance the acuity of central auditory processing as well as protect the inner ear from oxidative damage, so we are interested in exploring how these properties can be manipulated to improve auditory processing under adverse conditions and pathologic states. A wide variety of techniques is employed to gain a broad understanding of normal and disease processes at molecular, cellular and organism levels. We use a variety of molecular, anatomical and functional testing methods to assess the role of these proteins in normal and injured auditory structures. Students in the lab will typically take some time to become familiar with a variety of projects and techniques before selecting a specific area or project for more in-depth and independent study. Students or residents with specific but unrelated research questions that may benefit from the techniques we employ are also welcome to discuss the possibility of conducting these studies in the lab.

Joel A. Goebel, M.D., eighth floor, McMillan Hospital Building, 747-0553. Clinical research testing of posture and ocular motor control. Projects include measurement of gaze stabilization during head movement, otolith input into dynamic subjective visual vertical measurements, computerized historical data screening for dizziness and head-mounted vibrotactile balance prosthesis (BalCap). We welcome students to join these projects at any stage.

Timothy E. Hullar, M.D., 2235 Central Institute for the Deaf Building, 362-8641. Vestibular Anatomy and
Physiology. Our laboratory’s efforts reflect the principal investigator’s interest in problems of balance and equilibrium. We are pursuing three major directions. First, we use physiologic and anatomic techniques to understand the peripheral vestibular system’s remarkable ability to transmit accurate information regarding rotational and linear head rotations. The temporal resolution of the system in humans is 7 ms or better, while the spatial resolution is not as well-known. Animal studies are required to determine the cellular basis for this ability, using light and electron microscopy, digital image processing, and neural and eye movement recordings.

Second, dizziness remains a diagnostic and therapeutic challenge for all practitioners. We are developing novel tests of human vestibular function and improved techniques for replacement or rehabilitation of a damaged vestibular system in patients. Our studies with patients are aimed at making disequilibrium, which is an increasingly important symptom as the population ages, a condition which can be more accurately diagnosed and more effectively treated.

Finally, we are studying balance and equilibrium among marine mammals including sirenians, pinnipeds and cetaceans (whales and dolphins). Using anatomic studies as well as recordings on captive animals, we are exploring how these animals orient in their aquatic medium. This research has implications for understanding the effect of anthropogenic noise (i.e., sonar) on these animals.

A student’s involvement in the lab would be tailored to his or her background and interest. Possibilities range from hands-on animal surgery to analysis and interpretation of digitized anatomic images. Opportunities exist for summertime and school-year projects as well as a yearlong full-time research experience.

Judith E. C. Lieu, M.D., 3S35 Children’s Hospital and eighth floor, McMillan Hospital Building, 454-2138. Clinical Outcomes Research in Pediatric Otolaryngology. The Clinical Outcomes Research office performs clinical epidemiology and health services research. (Please reference the research elective offered by Dr. Jay Piccirillo in Otolaryngology for more details.) These techniques and methodologies are used to investigate clinical problems seen in pediatric otolaryngology. Projects currently under way include the evaluation of quality of life of children with hearing loss, progression of hearing loss in children, and evaluation of unilateral hearing loss, use of functional connectivity MRI to investigate effects of hearing loss in children, and quality of life of parents whose young children with recurrent otitus media. Other projects of the student’s choosing that would utilize these research techniques may also be pursued.

J. Gail Neely, M.D., 9902 McMillan Hospital Building, 362-7344. Facial Motion Analysis Laboratory: Clinical research application of subtracted digitized image light reflectance. The student(s) will participate in videotaping normal subjects and patients with facial paralysis and synkinesis, in using a unique computer program to analyze dynamic surface deformations during facial expression, and using spreadsheet and statistical applications to quantitatively define outcomes during treatments of disorders of the facial nerve.

Kevin K. Ohlemiller, Ph.D., 2205 Central Institute for the Deaf Building, 747-7179, Gene/environment interactions in cochlear injury. We study the interaction of genes and environment that increase cochlear injury due to noise and ototoxic exposure, with an emphasis on how these may yield apparent presbycusis. Because cochlear function and injury is the same in mice and humans and governed by the same genes, we use mostly mouse models. Methods employed include standard ABR assessment and intra-cochlear recording, quantitative light microscopy, immunohistochemistry, and western blots. We also collaborate to map, and perform expression profiling of genes that underlie traits we have discovered. We and our collaborators have identified specific genes and inbred strains of mice that mimic the three major forms of human presbycusis (sensory, neural and strial). Sensory presbycusis appears promoted by alleles and mutations that impair protective factors such as antioxidant enzymes or that impair ion homeostasis. Neural presbycusis can be modeled by mutations that alter the function of cholinergic receptors. While we are not sure what types of genes and mutations can lead to strial presbycusis, we have discovered four mouse strains that show the key feature of this disease (age-related endocochlear potential reduction), and also show distinct types of strial pathology.
We have shown that some of the same gene alleles and mutations that promote presbycusis also promote cochlear noise injury. Such findings point to an interpretation of sensory presbycusis as a principally cumulative injury. We have also published evidence for one or more QTLs that impact the qualitative character of noise injury. Important implications of our findings are (1) that there exists no single ‘mammalian’ archetype of cochlear noise injury, and (2) that injury to the organ of Corti and lateral wall are mechanistically and genetically independent.

Our research is eminently adaptable in difficulty and scale to students’ schedules and other requirements. Students may expect to learn the full range of methods we employ, including physiology, immunohistochemistry, histopathology and cellular/molecular techniques.

Jay F. Piccirillo, M.D., eighth floor, McMillan Hospital Building, 362-8641. The Clinical Outcomes Research Office of the Division of Research performs basic and applied clinical epidemiology and health services research. Clinical epidemiology is the study of the diagnosis, prognosis and evaluation of treatment. Health service research is the study of the delivery of health care. The scientific methodology of clinical epidemiology is based on the architecture of clinical research, biostatistics and data processing. Current projects include studying the impact of comorbidities on treatment and outcome for patients with cancer and the impact of a web-based cancer patient-specific prognostic information (Prognostigram) on treatment choices, outcomes and satisfaction with care. We also conduct research into treatment and outcomes for patients with tinnitus. Using clinical epidemiology methodology, we can also study a variety of other diseases.

Faculty

Richard A Chole, MD, PHD Head of the Department of Otolaryngology
Marc Bruce Abrams, DDENT Instructor in Clinical Otolaryngology
Nawal Mona Ahmed Instructor in Clinical Otolaryngology (DDS)
Murray Howard Appelbaum, DDENT Instructor in Clinical Otolaryngology (DMD)
Sean B Bailey, MD, MS Instructor in Clinical Otolaryngology
Jianxin Bao, PHD Research Associate Professor of Otolaryngology
Perry J Bartels, DDENT Instructor in Clinical Otolaryngology
Pablo M Blazquez Gamez, PHD Research Assistant Professor of Otolaryngology
Barbara Ann Bohne, PHD Professor of Otolaryngology (Neurobiology)
Gregory Harris Branham, MD Professor of Otolaryngology
Douglas A Carano, DDENT Instructor in Clinical Otolaryngology (DDS)
Chad Phadung Chadaratana, MD Instructor in Clinical Otolaryngology
Rebecca D Chernock, MD Assistant Professor of Otolaryngology
John N Chiapel Instructor in Clinical Otolaryngology
Richard A Chole, MD, PHD Lindburg Professor of Otolaryngology
William W. Clark, MS, PHD Professor of Otolaryngology
Gene C Cohen, DDENT Instructor in Clinical Otolaryngology (DDS)
Sheldon C Cohen, DDENT Instructor in Clinical Otolaryngology
William Mark Cohen, DDENT, MS Instructor in Clinical Otolaryngology (DMD)
Sharon L. Collins, MD, MS, PHD Associate Professor of Otolaryngology
John Michael Conoyer, MD Instructor in Clinical Otolaryngology
Lisa S. Davidson, MS, PHD Research Assistant Professor of Otolaryngology
Richard Davidson, DDENT, MS Instructor in Clinical Otolaryngology (DMD)
Indranil Debnath, MD Assistant Professor of Otolaryngology
Andrew J. Drescher, MD Assistant Professor of Otolaryngology
Norman Steven Druck, MD Assistant Professor of Clinical Otolaryngology
Tamara Kay Ehler, MD Instructor in Clinical Otolaryngology
Carl F Ehrlich, MD Assistant Professor of Otolaryngology
Samir Khattab El-Mofty, DDENT, DDENT1, MS, PHD Associate Professor of Otolaryngology
Mohamed Elsafi, Assistant Professor of Clinical Otolaryngology
Brian T Faddis, MS, PHD Research Assistant Professor of Otolaryngology
James A Fernandez, MD Instructor in Clinical Otolaryngology
Jeffrey T Fierstein, MD Assistant Professor of Clinical Otolaryngology
Debra Fink, DDENT, MS Instructor in Clinical Otolaryngology (DMD)
Charles Coleman Finley, Adjunct Research Associate Professor of Otolaryngology
Jill B Firszt, MS, PHD Associate Professor of Otolaryngology
Anne Elizabeth Getz, MD Assistant Professor of Otolaryngology
Joel Goebel, MD Professor of Otolaryngology
Joel Goebel, MD Vice Chairman of Otolaryngology
Richard I Goldberg, DDENT Instructor in Clinical Otolaryngology (DMD)
Barry Steven Goldenberg, DDENT, MS Instructor in Clinical Otolaryngology (DMD)
James Dean Gould, MD Instructor in Clinical Otolaryngology
Jason M. Hanson, MD Instructor in Clinical Otolaryngology
Archie B Harmon Jr, MA, PHD Instructor in Otolaryngology
William Hartel, Instructor in Clinical Otolaryngology
Alan A Harvey, Instructor in Clinical Otolaryngology
Bruce H Haughey, MBCHB, MS Joseph B Kimbrough Professor of Otolaryngology
Jay Fredrick Hauser, DDENT Instructor in Clinical Otolaryngology
Heather Hayes, M ED, PHD Assistant Professor of Otolaryngology
Jacques A Herzog, MD Assistant Professor of Clinical Otolaryngology
Stephen M Highstein, MD, PHD Adjunct Professor of Otolaryngology
Keiko Hirose, MD Associate Professor of Otolaryngology
Keiko Hirose, MD Vice Chairman of Otolaryngology
Lawrence M Hoffman, DDENT Instructor in Clinical Otolaryngology (DMD)
Dee Jay Hubbard, MA, MA1, PHD Adjunct Assistant Professor of Otolaryngology (Speech Pathology)
Timothy Everett Hullar, MD Associate Professor of Otolaryngology
Arnold Scott Jacobson, DDENT, MS Instructor in Clinical Otolaryngology (DMD)
Susan Jerger, Adjunct Research Professor of Otolaryngology
Timothy N Kaiser, MD Assistant Professor of Clinical Otolaryngology
Eugenia Kardaris, Instructor in Clinical Otolaryngology (DDS)
Roanne Kay Karzon, M ED, MS, PHD Adjunct Assistant Professor of Otolaryngology
Andrew M Kim, DDENT, MS Instructor in Clinical Otolaryngology
June Leslie Kleinfeld, DDENT Instructor in Clinical Otolaryngology (DMD)
George R Kletzker, MD Assistant Professor of Clinical Otolaryngology
Laurence A Levine, DDENT, MA, MD Associate Professor of Clinical Otolaryngology
James S. Lewis Jr, MD Associate Professor of Otolaryngology
Jeffery Lichtenhan, BAS, MSSH, PHD Research Instructor in Otolaryngology
Judith E Lieu, MD Associate Professor of Otolaryngology
Michael Lillmars, DDENT Instructor in Clinical Otolaryngology (DDS)
Robert Douglas Lowe, DDENT Instructor in Clinical Otolaryngology (DMD)
Richard W Maack, MD Instructor in Clinical Otolaryngology
Robert R Mac Donald III, MD Instructor in Clinical Otolaryngology
Susan E Mackinnon, MD Professor of Otolaryngology
Kamllesh R Makwana, DDENT Instructor in Clinical Otolaryngology (DDS)
Marshall S Manne, DDENT, MS Instructor in Clinical Otolaryngology (DDS)
Philip Latham Martin, MD Associate Professor of Clinical Otolaryngology
Alicia B Matayoshi Instructor in Clinical Otolaryngology (DDS)
Claire Matthews, MA, PHD Adjunct Assistant Professor of Otolaryngology (Speech Pathology)
Scott A McClain, DDENT Instructor in Clinical Otolaryngology (DDS)
Murray D McGrady, MD Instructor in Clinical Otolaryngology
Jonathan L McJunkin, MD Assistant Professor of Otolaryngology
John W McKinney, MD Instructor in Clinical Otolaryngology
Maithilee D Menezes, MD Assistant Professor of Otolaryngology (Pending Executive Faculty Approval)
David W. Molter, MD Professor of Otolaryngology
Stewart Edward Moreland, DDENT Instructor in Clinical Otolaryngology (DMD)
Nancy Tye Murray, MS, PHD Professor of Otolaryngology
John Gail Neely, MD Professor of Otolaryngology
Johanna Grant Nicholas, MA, PHD Research Associate Professor of Otolaryngology
Brian Nussenbaum, MD Christy J. and Richard S. Hawes III Associate Professor of Otolaryngology
Brian Nussenbaum, MD Vice Chair for Clinical Affairs, Department of Otolaryngology
Margaret A Ogden, MD Assistant Professor of Otolaryngology
Kevin Kenneth Ohlemiller, PHD Research Associate Professor of Otolaryngology
Randal C Paniello, MBA, MD, MS Associate Professor of Otolaryngology
Margaret Grace Peak, MA, PHD Adjunct Assistant Professor of Otolaryngology (Audiology)
Jonathan Erik Peelle, BAS, MS PSYC, PHD Research Assistant Professor of Otolaryngology (Pending Executive Faculty Approval)
Michael James Pernoud, DDENT Instructor in Clinical Otolaryngology
Supote Phipatanakul, MD Assistant Professor of Clinical Otolaryngology
Jay Francis Piccirillo, MD Professor of Otolaryngology
Gerald Raymond Popelka, Adjunct Professor of Otolaryngology
Lisa Gayle Potts, MS, PHD Research Assistant Professor of Otolaryngology
Jason T. Rich, MD Assistant Professor of Otolaryngology
Department’s Website

http://ent.wustl.edu/

Department of Pathology and Immunology

The Department of Pathology and Immunology is involved in the clinical diagnosis and monitoring of disease, in the teaching of Pathology and Immunology, and in research on the molecular basis of disease and immunology.

The Department is responsible through its divisions for studying the pathogenesis and the biochemical and anatomical basis of diseases. Pathologists do research on disease processes using molecular, genetic and structural analysis. Pathologists have the responsibility for the cytological and anatomical diagnosis of diseases and for developing novel structural and molecular approaches for the analysis of them, particularly cancers and infectious diseases. The divisions of Anatomic and Molecular Pathology (headed by Peter A. Humphrey, MD, PhD), Laboratory and Genomic Medicine (headed by Barry P. Sleckman, MD, PhD) and Neuropathology (headed by Robert E. Schmidt, MD, PhD) have faculty involved in teaching, clinical service and research. Prominent areas of research include experimental diabetes, hematology, bone pathophysiology, cancer and gastrointestinal and vascular pathology.

The department teaches an extensive course in the second year of the curriculum and presents a number of conferences that third- and fourth-year students can attend. The department also offers a number of
clerkships. The coursemaster of the second-year Pathology course is Erika C. Crouch, PhD, MD. Students can take clerkships in Autopsy Pathology, Surgical Pathology or Laboratory Medicine, or participate in the research activities of the faculty.

The Division of Immunobiology integrates immunobiology activities in the School. It is responsible for the teaching of immunology in the first year of the curriculum (Andrey S. Shaw, MD, is the coursemaster) and for conducting basic research in immunobiology and in the immunological basis of disease.

Many faculty in the department are involved in graduate teaching and participate in the various programs offered by the Division of Biology and Biomedical Sciences. The department has strong participation in the Immunology Graduate Program, which is headed by Barry P. Sleckman, MD, PhD.

Courses

First Year

M30 523 IMMUNOLOGY
Instructors: Andrey S. Shaw, MD, 362-4614; Emil R. Unanue, MD, 747-0561; John P. Atkinson, MD, 362-8391; Brian Edelson, MD, PhD, 362-4427; Kenneth Murphy, MD, PhD, 747-4237; Robert D. Schreiber, PhD, 362-9103; Barry P. Sleckman, MD, PhD, 747-8235; Herbert W. Virgin IV, MD, PhD, 362-9223

This course consists of lectures, laboratory exercises and small group clinical discussions. It covers all aspects of the immune response — general properties of the immune system, effector molecules, cells and their function, cellular interactions and immunological diseases. The Immunology course requires a strong background in biochemistry, genetics and cell biology. Some of the basic concepts from these fields should be reviewed during the course. There are two laboratory sessions. These will cover the areas of blood typing/blood banking and allergy. In these laboratories, students will type blood and be tested for allergies. POPS (Patient Oriented Problem-Solving System in Immunology) will also be used during each laboratory session and contain a clinical problem that is analyzed and solved by small groups of three to four students. There are five hours of small group clinical discussion sessions. In these sessions, students meet with physicians to discuss the role of immunology and a particular human disease. The Immune System (latest edition) by Peter Parham is used. For the small group clinical sessions, the latest edition of the textbook Case Studies in Immunology: A Clinical Companion by Rosen and Notarangelo will be used. There will be an online self assessment (multiple-choice and true/false), a take-home exam (essay questions) and a formal final exam (multiple choice and short answer) on the topics described in the lectures and in the laboratory sessions. This course is restricted to medical students only.

Second Year

M60 665 PATHOLOGY
Instructor: Erika C. Crouch, PhD, MD, 454-8462

This course provides a comprehensive survey of the biology and morphology of human disease through a combination of lectures and laboratory/case study sessions. The year begins with a review of basic disease mechanisms at the cellular and molecular level. Subsequently, the pathogenesis and characteristics of important diseases involving each organ system of the body are presented. Considerable emphasis is placed on learning the "language" of human disease. During the year, students become familiar with the methods of contemporary pathologic analysis. They also learn how the results of pathologic studies are used in the clinical setting to establish diagnoses, to assess prognosis and response to therapy, and to evaluate the quality of patient care.

Third Year

Conferences
Tumor Conference
One hour each week for 12 weeks during the Surgery and Obstetrics and Gynecology clerkships. Problem cases are presented for illustration and discussion of all aspects of neoplastic disease.
Instructors: Staff

Fourth Year

Electives

M60 805 AUTOPSY PATHOLOGY
Instructor(s): Louis P. Dehner, M.D., 362-0150
Location: West Building
Elective Contact: Louis P. Dehner, M.D., 362-0150
Other Information: Students should contact Dr. Dehner prior to scheduling this elective.
Enrollment limit per period: 2
Valid start weeks for 4-week blocks are: Weeks 13, 17, 21, 25, 29, 33, 37, and 41.

This full-time elective is designed to introduce students to autopsy pathology. Students will assist in performing autopsies, and together with the first-year pathology residents, will participate in all of the activities of the Autopsy Service including brain cutting, specialty microscopic conferences and weekly autopsy case conferences. Students will be under the direction of senior pathology faculty.

Student time distribution: Autopsy Activities 75%, Conferences/Lectures 25%
Major teaching responsibility: Attendings and residents
Patients seen/weekly: N/A
On call/weekend responsibility: None

M60 807 DERMATOPATHOLOGY
Instructor(s): Anne Lind, M.D., 362-0117
Location: Third floor, Peters Building, Room 300N
Elective Contact: Anne Lind, M.D., 362-0117
Other Information: Students will meet on the third floor, Peters Building, Room 300N, 9 a.m. first day of elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 9, 13, 17, 21, 25, 29, and 33

The student will be involved in all activities of the dermatopathology service. These include review, discussion and sign-out of gross and microscopic skin specimens. Sign-out occurs each day with a team that includes the attending, fellow and residents from both dermatology and pathology. Study sets are available if an area of special interest is expressed by the student. Each week of the rotation, the student will be asked to present a brief discussion of an interesting case that was seen during sign-out. These are informal, at-the-microscope discussions. Conferences include the 8 a.m. pathology conferences, which are optional, but strongly encouraged. Dermatology Grand Rounds and dermatopathology slide review conferences are held on Thursday mornings and are mandatory. The primary goal of this elective is to acquire basic competence in the diagnosis of skin diseases at the microscopic level. A secondary goal is to acquire understanding of the structure and function of the laboratory at the technical, administrative and medical professional level as it pertains to skin specimens.

Student time distribution: Inpatient 5%, Outpatient 80%, Conferences/Lectures 15%; Subspecialty Care 100%
Major teaching responsibility: Dr. Anne Lind and two other dermatopathologists
Patients seen/weekly: Average number of specimens per week is 300; percentages above reflect specimens, not patients.
On call/weekend responsibility: None
M60 815 OB-GYN PATHOLOGY SUBINTERNSHIP
Instructor(s): Phyllis Huettner, M.D., 362-0118
Location: Barnes-Jewish Hospital, South Campus
Elective Contact: Phyllis Huettner, M.D., 362-0118
Other Information: Students report to Dr. Huettner's office, 300S Peters Building, Barnes-Jewish Hospital, South Campus, 9 a.m. first day of elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

The elective stresses the principles of anatomic pathology when applied to operative material in obstetrics and gynecology. The subintern will examine gross and microscopic specimens in the Ob-Gyn Pathology Lab and review pertinent literature with a senior pathologist. Ample time will be available for attending regular conferences in ob-gyn and pathology.

Student time distribution: Inpatient 90%, Conferences/Lectures 10%; Subspecialty Care 100%
Major teaching responsibility: Attendings and residents
Patients seen/weekly: N/A
On call/weekend responsibility: None

M60 820 SURGICAL PATHOLOGY — BARNES-JEWISH HOSPITAL
Instructor(s): Samir El-Mofty D.M.D., Ph.D., and staff, 362-2681
Location: Division of Surgical Pathology, third floor, Peters Building, Barnes-Jewish Hospital, South Campus
Elective Contact: Samir El-Mofty D.M.D., Ph.D., 362-2681, elmofty@wustl.edu or Julie Gutierrez, 362-0143, jgutierrez@path.wustl.edu.
Other Information: See the pathology website for detailed orientation and introductory information (http://pathimm.wustl.edu/). If you need to discuss individual goals and interests, please call or email Dr. Samir El-Mofty at least one week prior to the elective.
Enrollment limit per period: In order to permit maximum interaction with the surgical pathology staff and house staff, the elective is limited to four students per four-week block. For the initial round of scheduling, the available slots are allotted to accommodate two fourth-year students and two third-year students. Any open slots after the original scheduling period are then made available to either third- and fourth-year students on a first-come, first-serve basis. Contact your scheduling office for details.

This elective is designed to familiarize students with the discipline of surgical pathology and to encourage the development of basic skills in gross pathology and histopathological interpretation. The Laboratory of Surgical Pathology at Barnes-Jewish Hospital receives a broad range of medical biopsy material in addition to specimens derived from the busy surgical subspecialty practices. As a result, this elective is beneficial not only for students considering a career in pathology, but also for students planning careers in internal medicine, surgery, obstetrics-gynecology, pediatrics, radiology, radiation oncology and dermatology. Students on this elective will (1) learn how patient specimens are received and processed, (2) acquire skills in the gross examination and microscopic diagnosis of disease through active participation and (3) learn the role of the pathologist in the preoperative, intraoperative, and postoperative care and management of patients. Students will function as junior house staff managing their own cases with supervision from residents, fellows and attending pathologists. Students may also wish to participate in ongoing research projects within the department as time and interest allow. At the end of the rotation, the students are required to do a formal case presentation for the residents, fellows and attending staff.

The daily schedule for students begins at 8 a.m. with morning conference. In general, the student will be able to complete all gross examination and sign-out activities by 4:30 p.m. Students are welcome to stay beyond 4:30 p.m. to participate in any of the academic or other working activities of the division.

Student time distribution: Clinical duties 85%, Conference/Lectures 15%
Major teaching responsibility: Attending staff, residents and fellows
Patients seen/weekly: N/A
On call/weekend responsibility: None
**M60 825 INTRODUCTION TO NEUROPATHOLOGY**  
Instructor(s): Robert E. Schmidt, M.D., Ph.D., 362-7426  
Location: West Building  
Elective Contact: Robert E. Schmidt, M.D., Ph.D., 362-7426  
Other Information: Students report to 3720 Neuropathology, West Building, 9 a.m. first day of elective.  
Enrollment limit per period: 2  
Valid start weeks for 4-week blocks are: Weeks 13, 17, 21, 29, 33, 37, and 41.

The course is structured to give the student a full-time immersion in the specialty of neuropathology including both neurosurgical and neuroautopsy derived material. There are daily didactic sessions that cover the spectrum of neurological diseases, review gross and microscopic neuro-anatomy, discuss approaches to the diagnosis of nervous system disease, and point out the interrelationships of research to clinical problems. Multiple clinical conferences and diagnostic working sessions complement reading, use of a large microscopic divisional study set and project work. Time: 35 to 40 hours per week.

Student time distribution: Conferences/Lectures 100%; Subspecialty Care 100%  
Major teaching responsibility: Attendings and fellows  
Patients seen/weekly: N/A  
On call/weekend responsibility: None

**M60 860 LABORATORY MEDICINE — BARNES-JEWISH HOSPITAL**  
Instructor(s): Mitchell Scott, M.D., 362-1503  
Location: Barnes-Jewish Hospital, South Campus  
Elective Contact: Mitchell Scott, M.D., 362-1503  
Other Information: Students meet in chief resident’s office, second floor, Barnes-Jewish Hospital, South Service Building, 8:30 a.m. first day of elective.  
Enrollment limit per period: 2  
Valid start weeks for 4-week blocks are: 13, 17, 21, 29, 33, 37, and 41.

This elective is designed to teach the student how clinical laboratory assays are used in the diagnosis of disease and to understand the quality assurance tools the laboratory utilizes to assure the reliability of tests. The four-week elective includes rotations through laboratories in clinical chemistry, clinical microbiology, transfusion medicine and hemopathology. During the elective the student will have a daily schedule, which includes didactic sessions with senior staff and house staff. Particularly useful clinical skills to be acquired include: morphology of peripheral blood smears and bone marrow biopsies; interpretation of coagulation tests, biomarkers of cardiac damage and serum protein electrophoresis patterns; appropriate use of blood component therapy and therapeutic apheresis; and identification of infectious organisms. Students will attend quality assurance meetings with senior staff, participate in microbiology rounds and present case discussions during this elective.

Student time distribution: Inpatient 25%, Conferences/Lectures 75%  
Major teaching responsibility: Attendings and residents  
Patients seen/weekly: 5  
On call/weekend responsibility: None

**Research**

**(M60 900)**

Paul M. Allen, Ph.D., eighth floor, BJC Institute of Health, 362-8758. Research in immunology. The recognition of antigen by T cells. We are investigating how the T cell receptor functions developmentally, biochemically and structurally. We utilize in vivo models to study alloreactivity/graft rejection and the pathophysiological mechanisms involved in rheumatoid arthritis.

Jacques U. Baenziger, M.D., Ph.D., second floor, Kingshighway Building, Room 2423, 362-8730.
Glycobiology, informational role of carbohydrates in protein targeting and reproductive endocrinology.

Erika C. Crouch, M.D., Ph.D., 454-8462. The structure and function of collagenous carbohydrate bindings' proteins known as collectins. We are actively investigating the structure, function, synthesis, assembly and secretion of SP-D — a lung surfactant-associated collectin that contributes to the innate pulmonary host defense against a wide variety of important bacterial, fungal and viral pathogens. The laboratory is studying the human SP-D promoter and using site-directed mutagenesis to examine the structural requirements for assembly, secretion and biologic activity.

Jeffrey I. Gordon, M.D., fifth floor, 4444 Forest Park, 362-7243. Genomic and metabolic foundations of symbiotic host-microbial interactions in the human gut; impact on obesity and malnutrition.


Michael McDaniel, Ph.D. 3709 West Building, 362-7435. The focus of this laboratory is to study the function and growth of pancreatic islets in Types 1 and 2 diabetes. Mammalian target of rapamycin (mTOR) is a protein kinase that integrates signals from growth factors and nutrients to regulate DNA and protein synthesis. G protein-coupled receptor agonists, such as GLP-1, have been shown to enhance proinsulin biosynthesis and secretion, and stimulate cellular growth and proliferation. Our objective is to further explore the mechanisms of action of GLP-1 to enhance DNA and protein synthesis via mTOR in rodent and human islets. These studies are of fundamental interest in optimizing mTOR to induce cellular growth and proliferation to: (1) enhance pre- and post- islet transplantation in Type 1 diabetes and (2) prolong b-cell compensation in response to insulin resistance in Type 2 diabetes. b-cell failure in obesity-associated Type 2 diabetes is believed to correlate with the intracellular accumulation of lipids that contribute to defects in insulin secretion and maintenance of b-cell mass. Our studies have identified lipoprotein lipase in b-cells, a key enzyme for catalyzing the hydrolysis of lipoprotein-associated TAG, to produce free fatty acids (FFA) for local cellular uptake. We are also characterizing the effects of enhanced FFA uptake through fatty acid transporters and determining the regulation of lipid droplet synthesis and breakdown by lipid droplet-associated proteins. Recent studies suggest that FFA up-regulate mitochondrial uncoupling proteins proposed to dissipate the proton gradient across the mitochondrial inner membrane. The objective of this study is to delineate the link between FFA and b-cell mitochondrial dysfunction in Type 2 diabetes.

Robert D. Schreiber, Ph.D., eighth floor, BJC Institute of Health, 362-8747. Tumor Immunology and Cancer Immunoeediting. Research on natural and therapeutically induced responses to tumors and definition of the molecular roles of interferon-gamma and interferon-alpha/beta in these processes.


Barry Sleckman, M.D., Ph.D., 4711 West Building, 747-8235. Cellular immunology; repair of DNA damage; Mechanisms of chromosomal translocations.

Carl H. Smith, M.D., St. Louis Children’s Hospital, 454-6029. Placental transport and surface membrane structure and function.

Thaddeus S. Stappenbeck, MD, Ph.D, Room 1020 CSRB North Tower, 362-4214. My lab studies the pathogenesis of inflammatory bowel disease including epithelial regeneration in response to injury, host gene mutations that predispose to IBD and host-microbe interaction that incite the pathology.
Steven Teitelbaum, M.D., Barnes-Jewish Hospital, 454-8463. Cellular and molecular mechanisms of bone remodeling with particular emphasis on osteoclast biology as relates to pathogenesis and prevention of diseases, such as osteoporosis. We focus on integrin and cytokine biology utilizing a variety of genetically-manipulated mice.

John Turk, M.D., Ph.D., 6609 Wohl, 362-8190. Studies focus on the role of phospholipase A2 (PLA2) enzymes in the regulation of insulin secretion from pancreatic islet beta cells. A novel PLA2 that does not require calcium ions has been cloned from rat and human islets that appears to participate in beta cell secretion and proliferation. Further studies of the role of this enzyme in these processes, its post-translational modifications, and its interactions with other proteins involve molecular biologic manipulation of expression of the enzyme in cultured beta cells and intact mice. Mass Spectrometric characterization of complex lipids and proteins is an important tool in these studies.

Emil R. Unanue, M.D., 1751 West Building, 362-7440. Research in immunobiology/immunopathology. Examination of cellular interactions resulting in immune induction and cellular immunity. These cellular interactions are being studied in normal, in infectious processes and in autoimmune diseases. The focus is to identify the proteins responsible for activation of lymphocytes in Type 1 diabetes as well as in infection with the intracellular pathogen Listeria monocytogenes.

Herbert Virgin, M.D., Ph.D., 1754 West Building, 362-9223. We work on issues at the interface of virology and immunology by analyzing aspects of viral immunity, viral pathogenesis and viral genetics that contribute to virulence and disease. We focus on latency and pathogenesis of herpes viruses.

Mark A. Watson, M.D., Ph.D., Barnes-Jewish Hospital, Room 2316 Kingshighway Building, 454-7919. Our laboratory is interested in defining gene transcriptional programs associated with the early progression of human breast cancer. The experimental approach utilizes histopathological review and laser capture microdissection of tumor tissue from patient biopsies coupled with state-of-the-art quantitative RT-PCR, DNA expression microarray and tissue microarray technologies. Using bioinformatics and statistical analysis of microarray data, we are defining gene expression profiles associated with breast tumor progression, from cellular atypia to invasive disease. Individual genes and signaling pathways identified will be used to better understand the biology of breast cancer, to identify novel diagnostic markers, and to develop strategies for new, targeted therapies. Similar approaches using DNA microarrays and bioinformatics are being applied to molecularly classify several other types of inherited and sporadic solid tumor neoplasms.

Faculty

Herbert W Virgin IV, MD, PHD Head of the Department of Pathology and Immunology
Ashima Agarwal, MD Instructor in Pathology and Immunology
Hussam Al Kateb, MA, PHD Assistant Professor of Pathology and Immunology
Paul M Allen, MS, PHD Robert L. Kroc Professor of Pathology and Immunology
Donald Craig Allred, MD Professor of Pathology and Immunology
Jacques Ulrich Baenziger, MD, PHD Professor of Pathology and Immunology
Melissa Anne Barrow, PHD Research Instructor in Pathology and Immunology
Cory Thomas Bernadt, MD, PHD Assistant Professor of Pathology and Immunology
Deepta Bhattacharya, PHD Assistant Professor of Pathology and Immunology
Morey A Blinder, MD Assistant Professor of Pathology and Immunology
Adrianus C Boon, MS, PHD Assistant Professor of Pathology and Immunology
Andrea Lynn Bredemeyer, PHD Research Instructor in Pathology and Immunology
Sarah Michelle Brown, PHD Instructor in Pathology & Immunology
George John Broze Jr, MD Professor of Pathology and Immunology
Elizabeth M Brunt, MD Professor of Pathology and Immunology
Carey-Ann Dawn Burnham, PHD Assistant Professor of Pathology and Immunology
Nigel John Cairns, PHD Research Professor of Pathology and Immunology
Boris Calderon, MD Research Instructor in Pathology and Immunology
Beatriz M Carreno, PHD Research Associate Professor of Pathology and Immunology
Javier A Carrero-Brewer, MA, PHD Research Instructor in Pathology and Immunology
Marina Cell, MD Research Associate Professor of Pathology and Immunology
Szeman Ruby Chan, PHD Research Instructor in Pathology and Immunology
Li-Wei Chang, MS, PHS Research Instructor in Pathology and Immunology
Rebecca D Chernock, MD Assistant Professor of Pathology and Immunology
Kyunghiee Choi, MS, PHD Associate Professor of Pathology and Immunology
Brian Tyler Collins, MD Associate Professor of Pathology and Immunology
Marco Colonna, MD Professor of Pathology and Immunology
Janet M Connolly, MS, PHD Research Professor of Pathology and Immunology
Megan A Cooper, MD, PHD Assistant Professor of Pathology and Immunology
Joseph C. Corbo, AB, MD, PHD Assistant Professor of Pathology and Immunology
Erika C Crouch, MD, PHD Professor of Pathology and Immunology
Neha Dahiya, MBA, MBBS, MD Instructor in Pathology and Immunology
Sonika M Dahiya, MD Assistant Professor of Pathology and Immunology
Adish S. Dani, MA, PHD Research Assistant Professor of Pathology and Immunology
Gautam Dantas, PHD Assistant Professor of Pathology and Immunology
Louis P Dehner, MD Professor of Pathology and Immunology
David G. DeNardo, PHD Assistant Professor of Pathology and Immunology
George J Despotis, MD Associate Professor of Pathology and Immunology
Michael Diamond, MD, PHD Professor of Pathology and Immunology
Dennis J. Dietzen, PHD Associate Professor of Pathology and Immunology
Mary C Dinauer, MD, PHD Professor of Pathology and Immunology
John F Dipersio, MD, PHD Associate Professor of Pathology and Immunology
Eric James Duncavage, MD Assistant Professor of Pathology and Immunology
William Michael Dunne Jr., PHD Adjunct Professor of Pathology and Immunology
Timothy J Eberlein, MA, MD Professor of Pathology and Immunology
Charles S Eby, MD Professor of Pathology and Immunology
Brian T. Edelson, MD, PHD Assistant Professor of Pathology and Immunology
Takeshi Egawa, MD, PHD Assistant Professor of Pathology and Immunology
Samir Khattab El-Mofty, DDENT, DDENT1, MS, PHD Associate Professor of Pathology and Immunology
Jeremiah J Faith, PHD Research Instructor in Pathology and Immunology
Thomas A Ferguson, MS, PHD Associate Professor of Pathology and Immunology
Dorothy J Fiete Research Instructor in Pathology and Immunology
John Lawrence Frater, MD Assistant Professor of Pathology and Immunology
Daved H Fremont, PHD Associate Professor of Pathology and Immunology
Anthony Raymond French, MD, MS, PHD Assistant Professor of Pathology and Immunology
Anja G. Fuchs, MS, PHD Research Instructor in Pathology and Immunology
Joseph P. Gaut, MD, PHD Instructor in Pathology and Immunology
Andrew E. Gelman, PHD Assistant Professor of Pathology and Immunology
Susan Gilfillan, PHD Research Assistant Professor of Pathology and Immunology
Jeffrey I Gordon, MD Director of the Center for Genome Sciences
Jeffrey I Gordon, MD Dr Robert J Glaser Distinguished University Professor
Jeffrey I Gordon, MD Professor of Pathology and Immunology
Timothy A. Graubert, MD Associate Professor of Pathology and Immunology
Jonathan M Green, MD Professor of Pathology and Immunology
Ann Marie Gronowski, MS, PHD Professor of Pathology and Immunology
Brenda Jean Grossman, MD, MS Associate Professor of Pathology and Immunology
Dennis E Hallahan, MD Professor of Pathology and Immunology
Scott A Handley, PHD Research Instructor in Pathology and Immunology
Thomas Joseph Hannan, DVM Research Instructor in Pathology and Immunology
Ted H Hansen, MS, PHD Professor of Pathology and Immunology
George J Harocopos, MD Assistant Professor of Pathology and Immunology
Anjum Hassan, MD Assistant Professor of Pathology and Immunology
Richard D Head, MS Research Associate Professor of Pathology and Immunology
Chyi-Song Hsieh, MD, PHD Assistant Professor of Pathology and Immunology
Phyllis C Huettner, MD Associate Professor of Pathology and Immunology
Peter A Humphrey, MD, PHD Ladenson Professor of Pathology and Immunology
Ronald R Jackups Jr. Assistant Professor of Pathology and Immunology
Sanjay Jain, MD, PHD Assistant Professor of Pathology and Immunology
Charles Kilo, MD Professor of Pathology and Immunology
John M Kissane, MD Retiree - Professor of Pathology and Immunology
Jeffery M. Klco, MD, PHD Research Instructor in Pathology and Immunology
Eynav Yafit Klechevsky, PHD Assistant Professor of Pathology and Immunology
Robyn Sue Klein, MD, MS, PHD Associate Professor of Pathology and Immunology
Daniel Kreisel, MD, PHD Associate Professor of Pathology and Immunology
Friederike H. Kreisel, MD Associate Professor of Pathology and Immunology
Shashikant Kulkarni, MS, PHD Associate Professor of Pathology and Immunology
Michael Kyriakos, MD Professor of Pathology and Immunology
Jack H Ladenson, PHD Oree M Carroll and Lillian B Ladenson Professor of Clinical Chemistry in Pathology and Immunology
Deborah J. Lenschow, MD, PHD Assistant Professor of Pathology and Immunology
Daisy W Leung, PHD Research Assistant Professor of Pathology and Immunology
Department's Website

http://www.pathology.wustl.edu/

Edward Mallinckrodt Department of Pediatrics

The primary aim of the teaching program of the Department of Pediatrics is to stimulate interest in developmental biology, especially human growth and development, and to provide the student with a foundation sufficiently comprehensive so that he or she will have an appreciation of clinical pediatric problems regardless of his or her future career choice in medicine.

The major clinical and research facilities are in St. Louis Children’s Hospital, and the newborn services are at Barnes-Jewish Hospital. St. Louis Children’s Hospital is a facility with 235 beds that accepts patients through 21 years of age with all types of medical and surgical problems. Hospital admissions average 11,000 annually. Pediatric medical ambulatory activity, including subspecialty and emergency visits, averages about 90,000 visits a year. Nearly 5,000 infants are born annually at the Washington University Medical Center.

Courses

First Year

M30 511 MEDICAL GENETICS
Instructor: Alison J. Whelan, MD, 362-7800

This course focuses on the fundamentals of genetics including the basic structure of genes, gene expression and regulation, patterns of inheritance, types of mutations, the consequences of mutations, and molecular diagnostic strategies. Discussion includes the structure of DNA and its means of replication, the organization and packaging of eukaryotic genomes, chromatin structure and the nucleosome, the processing of their primary transcripts, and the molecular basis for transcriptional and translational regulation including the use of transgenic mice to study cell-specific gene regulation, and how these concepts can be applied to an understanding of medical genetics through discussion of principles of Mendelian genetics, the molecular basis for various inborn errors of metabolism, their diagnosis and prenatal screening, and the genetics of cancer. Ethical issues raised in diagnostic and prognostic efforts are also discussed. This course is referenced in Department of Genetics and is cross-listed with L41 (Bio) 550.

Selectives

M04 526 NEW DISEASES, NEW PATHOGENS
For full description, see Department of Molecular Microbiology.

Second Year

Students are introduced to pediatrics and to the faculty through a series of lectures and symposia designed to acquaint them with the concepts of human growth and development and the effects of age and maturity on reactions to injury and disease. The unique aspects of the physical examination of the infant and child are presented in the Introduction to Clinical Medicine course. Members of the faculty are active participants in the second-year Pathophysiology course.
Third Year

M65 760 PEDIATRICS CLERKSHIP
Instructors: Michelle Estabrook, MD, Colleen Wallace, M.D. (both: 454-6299)
This six-week curriculum emphasizes pediatric pathophysiology and normal growth and development from birth through adolescence. This rotation consists of three two-week combinations of the following: Regular or special-care nurseries at Barnes-Jewish Hospital or Missouri Baptist Medical Center spent assessing newborns, seeing patients in the pediatric emergency department and Hematology/Oncology outpatient service and in St. Louis Children’s Hospital on a variety of inpatient services. Emphasis is on performing a pediatric history and physical examination and developing an appropriate differential diagnosis. Daily rounds with house staff and attending physicians, as well as weekly case management conferences and grand rounds, further this emphasis. A core lecture series also is offered on Mondays and Thursdays during this six-week clerkship.

Fourth Year

Electives

M25 831 PEDIATRIC DERMATOLOGY
Instructor(s): Susan J. Bayliss, M.D., 454-2714
Location: 3N48 St. Louis Children’s Hospital
Elective Contact: Rosemarie Brannan, 454-8622
Other Information: Call 454-2714 prior to first day of elective. Reporting time is 7:30 a.m. first day of elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.
This clinical rotation will be available to students interested in dermatology, pediatrics or both. Students will follow the dermatology rotation (M25 830) with an emphasis on pediatric dermatology by attending pediatric dermatology clinics, seeing consults, etc. Enthusiastic students will have an opportunity to write up a case report if they wish, but need to notify Dr. Bayliss before the course. Students can take either this elective or M25 830 — not both.
Student time distribution: Inpatient 1%, Outpatient 74%, Conferences/Lectures 25%; Subspecialty Care 100%
Major teaching responsibility: Single attending
Patients seen/weekly: 50-100
On call/weekend responsibility: None

M65 801 GENERAL PEDIATRIC SUBINTERNSHIP — ST. LOUIS CHILDREN’S HOSPITAL
Instructor(s): Middy Estabrook, M.D. 454-6299
Location: St. Louis Children’s Hospital
Elective Contact: Liz Scott, 5S50 St. Louis Children’s Hospital, 454-6299
Other Information: Students should call Liz Scott, 454-6299, one month before start date. Floor assignments will be determined by lottery from floor choices 8 East and 8 West. Students should report to their designated floor on their first day at 7:50 a.m.
Enrollment limit per period: 2
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.
This is the general pediatric subinternship. Liz will hold a lottery in the pediatric medical student education office to determine if the student will be assigned to 8 East or 8 West. The student will be assigned patients on one of two inpatient pediatric floor teams and will follow patients from initial evaluation and for continuing care. The student works as an extern and is expected to take call every
fourth night. Students work directly under the supervision of the senior resident. Teaching rounds are conducted by the faculty. The elective will provide experience in the management of many pediatric medical conditions (variable depending on floor) and will include the care of patients with various diseases including pulmonary, infectious diseases, gastrointestinal, renal, neurological, endocrine and rheumatologic issues. Additionally, patients with failure to thrive, asthmatic exacerbations, poisonings and undiagnosed conditions may be seen.

Student time distribution: Inpatient 100%; Subspecialty Care/General Pediatrics 100%
Major teaching responsibility: Attendings and residents
Patients seen/weekly: 12
On call/weekend responsibility: Every fourth night

M65 808 PEDIATRIC ASTHMA AND ALLERGY
Instructor(s): Leonard B. Bacharier, M.D.; Robert C. Strunk, M.D.; Gordon Bloomberg, M.D; Caroline Horner, M.D.; Avraham Beigelman, M.D.; Alysa Ellis, M.D., 454-2694
Location: St. Louis Children’s Hospital and Barnes-Jewish West County Hospital
Elective Contact: Kim Tinsley, 454-2158
Other Information: Students should call 454-2158 prior to the start of this elective for location and time.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

In predominantly an outpatient setting, students will evaluate patients with a wide variety of allergic and immunologic disorders including asthma, allergic rhinitis, anaphylaxis, food allergy, atopic dermatitis, urticaria, angioedema and primary immunodeficiency. Goals include: (1) the extension of history-taking skills to include environmental exposures, (2) the recognition of physical findings suggestive of allergic disease, (3) understanding the indications and interpretation of diagnostic testing including skin testing and assessment of pulmonary function and (4) application of appropriate therapeutic strategies to these disorders. Weekly didactic conferences and inpatient consultations provide additional educational opportunities.

Student time distribution: Inpatient 10%, Outpatient 80%, Conferences/Lectures 10%; Subspecialty Care 100%
Major teaching responsibility: Leonard B. Bacharier, M.D., and Robert C. Strunk, M.D.
Patients seen/weekly: 20
On call/weekend responsibility: None

M65 811 PEDIATRIC CRITICAL CARE MEDICINE
Instructor(s): John Lin, M.D., lin_j@kids.wustl.edu, 286-1246
Location: St. Louis Children's Hospital
Elective Contact: Dawn Rouse, 286-1246
Other Information: Students report to the PICU, seventh floor, St. Louis Children’s Hospital, 7:15 a.m. first day of elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

This elective is designed to familiarize the student with the diagnosis and treatment of critical illness in infants and children. To this end, each student is made responsible for a small number of assigned cases under the direct supervision of pediatric residents, pediatric critical care fellows, and faculty. The teaching activities emphasize the understanding of pathophysiological processes that lead to respiratory, cardiocirculatory, and central nervous system dysfunction and their therapy in the developing subject. Students are expected to participate in all the daily activities of the Pediatric Intensive Care Unit at St. Louis Children’s Hospital and be on occasional call after hours.

Student time distribution: Inpatient 100%; Subspecialty Care 100%
Major teaching responsibility: Attending, critical care fellows and pediatric residents
Patients seen/weekly: 150
On call/weekend responsibility: Yes
M65 813 PEDIATRIC CARDIAC CATHETERIZATION
Instructor(s): David Balzer, M.D.; Joshua Murphy, M.D., and Shabana Shahanavaz, M.B.B.S., 454-6095
Location: St. Louis Children’s Hospital
Elective Contact: David Balzer, M.D., 454-6095
Other Information: Students report to St. Louis Children’s Hospital Cath Lab (seventh floor), 8 a.m. first day of elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

Elective will focus on interpretation of hemodynamic and angiographic data acquired in the cardiac catheterization laboratory.

Student time distribution: Inpatient 95%, Conferences/Lectures 5%; Subspecialty Care 100%
Major teaching responsibility: Two attendings, supplemented by one fellow
Patients seen/weekly: 10
On call/weekend responsibility: None

M65 819 PEDIATRIC CARDIOLOGY-OUTPATIENT SERVICE
Instructor(s): Joshua Murphy, M.D.; George Van Hare, M.D.; Dave Balzer, M.D.; Charles Canter, M.D.; Mark Grady, M.D.; Patrick Jay, M.D.; Mark Johnson, M.D.; Caroline Lee, M.D.; Mark Levin, M.D.; Joshua Murphy, M.D.; Jennifer Silva, M.D., Shabana Shahanavaz, M.B.B.S., and Gautam Singh, M.D., 454-6095
Location: St. Louis Children’s Hospital
Elective Contact: Joshua Murphy, M.D, 454-6095
Other Information: Students report to eighth floor, Northwest Tower, Division of Cardiology, Kim Broome, Room 8206, 8 a.m. first day of elective to pick up a rotation schedule/information packet.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

Students will independently evaluate outpatients referred for cardiac murmurs, chest pain, arrhythmia and report findings to the attending physician. Clinics are held at St. Louis Children’s Hospital and Barnes-Jewish West County Hospital. Auscultation skill acquisition will be enhanced through examination of patients and use of other teaching tools. The student will review with the attending all EGGs, holter monitors, echocardiograms performed. Participation in weekly surgical conference and other educational conferences is expected.

Student time distribution: Outpatient 95%, Conferences/Lectures 5%; Subspecialty Care 100%
Major teaching responsibility: Multiple attendings
Patients seen/weekly: 25
On call/weekend responsibility: None required

M65 826 GENETICS AND GENOMIC MEDICINE
Instructor(s): D. Kathy Grange, M.D., 454-6093
Location: St. Louis Children’s Hospital
Elective Contact: D. Kathy Grange, M.D., 454-6093
Other Information: Students should report to the Genetics office on the ninth floor of the Northwest Tower at 9 a.m. first day of elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

The goal of this senior elective is to facilitate the acquisition of clinical skills and knowledge in genetics and genomic medicine. The student will actively participate in the diagnosis and management of pediatric and adult patients with genetic disease in both the ambulatory and inpatient settings. Emphasis will be placed on application of the science of genetics to the bedside and will include a broad exposure to patients with biochemical, metabolic, structural and complex genetic diseases. Students will have an opportunity to visit clinical laboratories involved with diagnosis of genetic disorders, including the
cytogenetics, molecular genetics and biochemical genetics laboratories. Students will be expected to participate in the weekly clinical case conference.

Student time distribution: Inpatient 30%, Outpatient 60%, Conferences/Lectures 10%; Subspeciality Care 100%.
Major teaching responsibility: Attendings
Patients seen/weekly: 15
On call/weekend responsibility: None

**M65 827 SUBINTERNSHIP-PEDIATRIC HEMATOLOGY/ONCOLOGY**
Instructor(s): Robert Hayashi, M.D., 454-4118
Location: St. Louis Children’s Hospital, 9 West
Elective Contact: Robert Hayashi, M.D., 454-4118
Other Information: Students report to 9 South Nursing Station, 8 a.m. first day of elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

Students will assume the responsibilities of a pediatric resident on the inpatient Hematology/Oncology service at St. Louis Children’s Hospital.

Student time distribution: Inpatient 90%, Conferences/Lectures 10%; Subspecialty Care 100%
Major teaching responsibility: Single attending, first-year hem-onc fellow and junior resident
Patients seen/weekly: 2-3 patients a day
On call/weekend responsibility: Every four days with resident

**M65 833 SPECIAL TOPICS IN REPRODUCTIVE HEALTH**
Instructor(s): Tessa Madden, M.D., 747-6495
Location: Division of Clinical Research, 4533 Clayton Ave., second floor
Elective Contact: Tessa Madden, M.D., 747-6495
Other Information: Students should contact Dr. Madden a week prior to the beginning of the rotation: maddent@wustl.edu.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

Students will attend a variety of outpatient clinics to interact with patients seeking different reproductive health services. These clinics include family planning and abortion services at Planned Parenthood, the County STD clinic, Adolescent and Pediatric Gynecology, Child Sexual Abuse, Teen OB, Ultrasound and Prenatal Diagnosis, and Postmenopausal Gynecology clinic. Clinical experiences will be ambulatory. Conferences include Obstetrics and Gynecology Grand Rounds and Family Planning Journal Club. Reading will include relevant articles and chapters. Students will be responsible for a brief presentation on a reproductive health topic at the conclusion of the course. Opportunities for clinical research in contraception are also available.

Student time distribution: Outpatient 100%; Primary Care 30%, Subspeciality Care 70%
Major teaching responsibility: Attendings
Patients seen/weekly: Varies
On call/weekend responsibility: None

**M65 836 PEDIATRIC RHEUMATOLOGY**
Instructor(s): Andrew White, M.D., 454-6124; Megan Cooper, M.D., Ph.D. and Anthony French, M.D., Ph.D.
Location: St. Louis Children’s Hospital
Elective Contact: Andrew White, M.D., 454-6124
Other Information: Students report to Rheumatology Clinic, Suite C, St. Louis Children’s Hospital, 8:30 a.m. first day of elective.
Enrollment limit per period:
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

Opportunities are available to care for children with a variety of immunologic and rheumatologic disorders. Students will see patients in outpatient clinics and inpatient consultations. An in-depth approach to evaluating disorders of the immunologic system will be provided. Students will participate in evaluation of new patients with a variety of rheumatologic diseases including JRA, SLE and scleroderma at both SLCH and Shriners Hospital clinics. Students may elect to participate in conferences and seminars.

Student time distribution: Inpatient 20%, Outpatient 70%, Conferences/Lectures 10%; Primary Care 30%, Subspecialty Care 70%
Major teaching responsibility: Andrew White, M.D.
Patients seen/weekly: 35-40
On call/weekend responsibility: None

M65 838 PEDIATRIC GASTROENTEROLOGY, HEPATOLOGY AND NUTRITION
Instructor(s): Yumi Turmelle, M.D., Robert Heuckeroth, M.D., Lori Holtz, M.D., Robert Rothbaum, M.D., David Rudnick, M.D., Chip Samson, M.D., Philip Tarr, M.D., Liz Utterson, M.D., and Alex Weymann, M.D., 454-6173
Location: Gastroenterology Clinical Offices, ninth floor, Northwest Tower
Elective Contact: Ariana Jasarevic, 454-6173, Jasarevic_A@kids.wustl.edu
Other Information: Students should contact Alison Griffith at least one week in advance of first day of elective for further information.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

The rotation in Pediatric Gastroenterology, Hepatology and Nutrition provides broad exposure to specialized and common pediatric problems. Gastroenterology patients are seen in the outpatient suites and in the hospital. Students see outpatients with common pediatric complaints like abdominal pain, constipation and poor growth. Additionally, students experience the ongoing outpatient care of patients with liver disease, inflammatory bowel disease, short-gut syndrome, celiac disease and other rare disorders. The inpatient service provides experience in caring for patients with acute illnesses such as gastrointestinal bleeding, malnutrition, liver failure, complications of inflammatory bowel disease and pancreatitis. Students participate in diagnostic and therapeutic endoscopic procedures. At weekly divisional conferences, attendings, fellows and students review pathology slides from current cases and discuss difficult patient problems and topics of interest.

Student time distribution: The time spent in the outpatient clinic and on the inpatient service can be individualized according to the student’s interests. In general, the distribution is:
Inpatient 50%, Outpatient 30%, Procedures 10%, Conferences/Lectures 10%; Subspecialty Care 100%
Major teaching responsibility: Attendings and fellows
Patients seen/weekly: 130 (entire division), students see a subset (most interesting/instructive cases)
On call/weekend responsibility: None

M65 840 PEDIATRIC INFECTIOUS DISEASES
Instructor(s): Gregory Storch, M.D., Alexis Elward, M.D., Michele Estabrook, M.D., Stephanie Fritz, M.D., David Haslam, M.D., Ericka Hayes, M.D., David Hunstad, M.D., S. Celeste Morley, M.D., Ph.D., Audrey Odom, M.D., Ph.D., and Rachel Orscheln, M.D., 454-6050
Location: St. Louis Children’s Hospital
Elective Contact: Pam Wilson, 286-2778
Other Information: Students should contact fellow on call at 424-6877 one week prior to start of elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

This elective is designed to introduce students to the clinical aspects of infectious diseases in children. Students will consult on both inpatients and outpatients. Regular daily activities will include evaluation of...
new patients, work rounds on inpatient consults, microbiology teaching rounds in the bacteriology and virology labs, and teaching rounds with the infectious diseases attending. Students will attend the general pediatric clinic and the pediatric HIV clinic once per week. Formal teaching sessions include a weekly pediatric infectious disease case conference, a weekly joint clinical conference with the adult infectious diseases group, and a weekly pediatric infectious diseases research conference.

Student time distribution: Inpatient 70%, Outpatient 20%, Conferences/Lectures 10%; Subspecialty Care 100%
Major teaching responsibility: One or two attendings, one or two fellows
Patients seen/weekly: 5-10 new patients primarily, over 15-20 new patients with team
On call/weekend responsibility: Saturdays optional

M65 845 PEDIATRIC EMERGENCY MEDICINE
Instructor(s): David M. Jaffe, M.D., 454-2341
Location: St. Louis Children’s Hospital
Elective Contact: Carol Heller, 454-2341
Other Information: Students report to Room 9150 Northwest Tower, 8:30 a.m. first day of elective.
Enrollment limit per period: 2
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

The goal of this elective is to provide the senior medical student with a broad introductory clinical experience in pediatric emergency medicine. Functioning as a subintern in the Emergency Unit of St. Louis Children’s Hospital, the student will have the opportunity to evaluate and manage patients with a wide variety of emergent and urgent medical and surgical problems. Examples include: respiratory distress, abdominal pain, lacerations, bone injuries, rashes, fever, etc.

Students will work either a day shift (7:30 a.m. to 3 p.m.) or an evening shift (3 p.m. to 11 p.m.) in rotation. Daily teaching conferences are provided by the attending staff. A weekly meeting of the students and senior faculty will occur to review interesting cases. Also, attending staff and senior pediatric residents provide 24-hour on-site supervision. Each medical student will be asked to prepare a 20-minute presentation on a topic of his/her choosing.

Student time distribution: Outpatient 90%, Conferences/Lectures 10%; Subspecialty Care (Emergency Medicine) 100%
Major teaching responsibility: All EM attendings
Patients seen/weekly: ~30
On call/weekend responsibility: None (unless making up time)

M65 849 PEDIATRIC ENDOCRINOLOGY AND DIABETES
Instructor(s): Abby Hollander, M.D., Bess Marshall, M.D., Rebecca Green, M.D., Ph.D., Paul Hruz, M.D., Ph.D., Ana Maria Arbelaez, M.D., Neil White, M.D., and Arpita Vyas, M.D., 454-6051
Location: St. Louis Children's Hospital
Elective Contact: Ginny Sherrill, 454-4677
Other Information: Student has the option to extend elective. Students report to Endocrinology and Diabetes Office, ninth floor, Northwest Tower, 8:30 a.m. first day of elective.
Enrollment limit per period: 2
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

This elective is designed to include broad clinical experience in pediatric endocrinology and diabetes. The student will have an opportunity to evaluate both patients admitted to St. Louis Children’s Hospital and patients referred for consultation in our three outpatient clinics each week. In addition to a divisional conference to review referred patients, several joint conferences with the adult Endocrinology and Diabetes Division (clinical rounds, journal club/research seminar, case conference) are held weekly.

Student time distribution: Inpatient 40%, Outpatient 50%, Conferences/Lectures 10%; Subspecialty Care 100%
Major teaching responsibility: Attending physicians and fellows
Patients seen/weekly: 10-20 by student
On call/weekend responsibility: None

**M65 852 CLINICAL PEDIATRIC PULMONARY MEDICINE**
Instructor(s): Thomas Ferkol, Jr., M.D., Robert C. Strunk, M.D., Leonard Bacharier, M.D., Avraham Beigelman, M.D., Gordon Bloomberg, M.D., Ferdinand Coste, D.O., Alysa Ellis, M.D., Albert Faro, M.D., Kay Horner, M.D., James Kemp, M.D., Peter Michelson, M.D., Anand Patel, M.D., Katherine Rivera-Spoljaric, M.D., Stuart C. Sweet, M.D., Ph.D., 454-2694
Location: St. Louis Children's Hospital
Elective Contact: Kim Tinsley, 454-2158
Other Information: Students should call 454-2158 prior to the start of elective for location and time.
Enrollment limit per period: 2
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

This elective provides an opportunity for students to be exposed to the full scope of respiratory diseases and sleep disorders in infants and children. Pediatric referrals will be seen in both an inpatient and outpatient setting. Goals include: (1) to gain greater insights into the genetics, epidemiology, pathophysiology and clinical presentations of lung diseases in children; (2) to learn the importance of the physical examination using inspection, percussion and auscultation; (3) indications and interpretation of diagnostic tests, such as chest imaging, blood gas measurements, polysomnography, pulmonary function testing, and bronchoscopy with biopsy and lavage; and (4) therapeutic interventions. Unique aspects of this rotation include a broad exposure to children with congenital lung defects, asthma, cystic fibrosis, ciliopathies, interstitial lung disease and end-stage cardiopulmonary diseases referred for lung transplantation. Weekly didactic sessions as well as divisional clinical conferences provide opportunities for the trainee to develop presentation skills.

Student time distribution: Inpatient varies, Outpatient varies, Conferences/Lectures 10%; Subspeciality Care 100%
Major teaching responsibility: Attendings
Patients seen/weekly: 25
On call/weekend responsibility: None

**M65 861 NEWBORN MEDICINE**
Instructor(s): Aaron Hamvas, M.D., 454-6148
Location: Eighth Floor, Northwest Tower
Elective Contact: Emily Alexander, 454-6148
Other Information: Students should schedule an appointment with Emily to meet with Dr. Hamvas. Appointments should be scheduled one week prior to class start date.
Enrollment limit per period: 3
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

The goal of this course is to provide students with responsibility for caring for newborn infants who range from normal to acutely ill to chronically ill and for their families. The physiology of the transition from fetal to extrauterine existence, the pathophysiology of specific diseases, and primary accountability of the student for patient management decisions and procedures will be emphasized. In addition, collaboration with nursing staff and other health care providers in decision-making (especially concerning the viability of individual infants) and family management will be regularly required.

Students during each rotation will have the option to rotate through the Neonatal Intensive Care Unit at St. Louis Children's Hospital and/or the labor and delivery services at Barnes-Jewish Hospital. Students assigned to the Labor and Delivery Service will routinely be involved in normal newborn care and delivery room management. The student will be expected to rotate patient responsibilities every fourth night.

Student time distribution: Inpatient 90%, Outpatient 5%, Conferences/Lectures 5%; Subspeciality Care 100%
Major teaching responsibility: Attending, fellow and residents
Patients seen/weekly: 30
M65 868 PEDIATRIC PALLIATIVE CARE
Instructor(s): Joan Rosenbaum, M.D., 454-2683
Location: Suite 8130, eighth floor, Northwest Tower
Elective Contact: Niya Beverly, 454-2683
Other Information: Schedule to be arranged between Dr. Rosenbaum and students.
Enrollment limit per period: 2 or 3
Valid start weeks for 4-week block is: Weeks 29

This new course is an introduction to pediatric palliative care. It will include independent reading and a discussion of the literature, shadowing opportunities with spiritual care givers, participation in complex care conferences at Ranken Jordan, (a pediatric subspecialty hospital that provides rehabilitation and sub-acute medical treatment of children with life limiting and life threatening diseases), following a family longitudinally through the prolonged hospitalization of their sick child, role play opportunities, and participation in palliative care conferences and consultations at St. Louis Children’s Hospital.

The goal is to help students learn to listen generously and provide patient care that extends beyond the science, technology and procedures.

Student time distribution: Inpatient 50%, Conferences/Reading 50%; Subspecialty Care 100%
Major teaching responsibility: Joan Rosenbaum, M.D.
Patients seen/weekly: Estimated - 12
On call/weekend responsibility: None

M65 875 PEDIATRIC RENAL DISEASE
Instructor(s): Keith A. Hruska, M.D., Anne M. Beck, M.D., S. Paul Hmiel, M.D., Ph.D., Sun-Young Ahn, M.D., and Michael Seifert, M.D., 454-6043
Location: St. Louis Children’s Hospital
Elective Contact: Keith A. Hruska, M.D., 454-6043
Other Information: Students report to Lynne Strain, 454-2261, ninth floor, Northwest Tower, Conference Room 9C, 8:30 a.m. first day of elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

This course is designed to provide the student with a wide exposure to all aspects of pediatric renal disease and an opportunity to explore a desired aspect of the field in-depth. The student will be an integral part of the Renal Team and as such will see both inpatients and outpatients. Students will have an opportunity to follow the courses of patients with acute renal disease as well as those with more chronic problems and will help to plan the evaluation and therapeutic management of these patients. Discussions and rounds with the attending staff and fellows emphasize the relationship between clinical problems and the pathophysiology of the underlying disease. These informal teaching sessions are supplemented by more formal sessions. These include renal attending rounds, renal research rounds and grand rounds, which are conducted weekly in conjunction with the Renal Division of Barnes-Jewish Hospital. Renal biopsy material is reviewed with the renal pathologists. Attendance at the weekly pediatric grand rounds and pediatric case conferences is encouraged. Opportunities in clinical and translational research projects will be discussed with interested students.

Student time distribution: Inpatient 50%, Outpatient 40%, Conferences/Lectures 10%; Subspecialty Care 100%
Major teaching responsibility: Attendings
Patients seen/weekly: 12-15
On call/weekend responsibility: None

M65 876 PEDIATRIC LUNG TRANSPANTATION
Instructor(s): Stuart C. Sweet, M.D., Peter Michelson, M.D., Albert Faro, M.D., 454-2214
St. Louis Children’s Hospital has the largest pediatric lung transplant program in North America. This unique clinical rotation will enable students to be exposed to the process of transplantation from referral and listing to the actual surgery and post-operative care. Both inpatient and twice-weekly outpatient clinics will be available for participation and learning. The use of diagnostic tests, such as flexible bronchoscopy with biopsies, the histopathology of infection and graft rejection, and the complexities of immunosuppression will all be explored. Weekly transplant meetings with our multidisciplinary team, as well as didactic/psychosocial and ethical and divisional care meetings will all be available. Our patient referral base is worldwide, and the primary cardiopulmonary disease states include: cystic fibrosis, pulmonary hypertension, complex congenital heart defects, surfactant protein defects and alveolar proteinosis.

Student time distribution: Inpatient 50%, Outpatient 40%, Conferences/Lectures 10%; Subspecialty Care 100%
Major teaching responsibility: Attendings
Patients seen/weekly: 20-30
On call/weekend responsibility: None

M65 878 CLERKSHIP IN RURAL PRIMARY CARE PEDIATRICS
Instructor(s): Middy Estabrook, M.D., 454-6299. Site Instructors: Kevin Blanton, M.D., in Sikeston and Claudia Preuschoff, M.D., in Cape Girardeau
Location: Sikeston or Cape Girardeau, MO
Elective Contact: Liz Scott, St. Louis Children’s Hospital, 454-6299
Other Information: Students should call Liz Scott, 454-6299, at beginning of school year to indicate which rotation (Sikeston or Cape Girardeau) they have chosen, complete additional paperwork and make housing reservations. Students should then report to their chosen site on their first day at 7:30 a.m.
Enrollment limit per period: 1 per site
Valid start weeks for 2 or 4-week blocks are: Weeks 1, 3, 5, 7, 9, 11, 13, 15, 17, 19, 21, 23, 25, 27, 29, 31, 33, 35, 37, 39, and 41.

The clerkship in rural primary care pediatrics is designed to provide the student with first-hand experience in general pediatric practice in a rural community setting. Students will have the opportunity to see patients in a private office, participate in delivery room resuscitation, evaluate patients in the emergency department, and provide pediatric consultation to family practitioners, obstetricians and surgeons. The objective of this elective is to provide the student with the experience of serving as a general pediatrician providing comprehensive health services in a rural community. Students assume responsibility for ongoing care of patients and have opportunities to perform procedures. Housing is available through SEMA ADHEC/Southeast Missouri Health Network at no cost to the student, however, reservations must be made early. Two-week or four-week blocks are available.

Student time distribution: Inpatient 10%, Outpatient 90%; Primary Care 100%
Major teaching responsibility: Single attending
Patients seen/weekly: 25-50
On call/weekend responsibility: Call with instructor, not in-house call

M65 880 QUALITY OF CARE THROUGH HEALTH INFORMATICS
Instructor(s): Feliciano Yu, MD, 454-2808
Location: St. Louis Children’s Hospital, Suite 3S36
Elective Contact: Leslie Frandsen, 454-2724
Other Information: Students report to Dr. Yu's office, Suite 3S36, St. Louis Children’s Hospital, 9 a.m. first day of elective.
Enrollment limit per period: 2
Valid start weeks for 4-week blocks are: Weeks 9, 13, 17, 21, 29, 33, and 41.

Health Informatics lies at the intersection of information science, computer science and health care delivery. It is an emerging scientific field that deals with biomedical data, information and knowledge — their storage, retrieval and optimal use for problem solving and decision making. It touches on all basic and applied fields in biomedicine and is closely tied to modern health care communication and information technologies, such as Electronic Health Records (EHR). EHRs are fast becoming ubiquitous in the clinical setting. These systems offer the greatest potential for practice-based learning and improvement as well as research. In this elective, the student will be exposed to the concepts and application of health informatics as it relates to improving the quality of care. The first week will involve a tour of the institution's health informatics infrastructure (i.e., clinical information systems, clinical decision support, electronic health records, etc.) and organizational structures that impact quality; didactics on health informatics and quality improvement; and real-world exposure to health informatics and quality improvement activities. The second week will involve a self-directed study on real clinical issues and its potential for process improvement. The major emphasis of this elective is to increase the student's awareness to a systems-based approach to improving quality of health care. The student will be evaluated by the attendance, level of participation as well as on a 1-2 page deliverable at the end of the rotation, describing a real-world clinical issue that is appropriate for quality improvement. At the end of the rotation, the student will have gained practical knowledge and exposure to health informatics and how it relates to improving the care delivery process.

Student time distribution: Inpatient 10%, Outpatient 10%, Conferences/Lectures 80%; Primary Care 0%, Subspecialty Care 100%
Major teaching responsibility: Feliciano Yu, M.D.
Patients seen/weekly: None
On call/weekend responsibility: None

Research

(M65 900)


F. Sessions Cole, M.D., and Aaron Hamvas, M.D., eighth floor, Northwest Tower and fifth floor, McDonnell Pediatric Research Building, 454-6148. Using population-based databases and case-control databases, our laboratory focuses on understanding the contribution of genetic variation in candidate genes of the pulmonary surfactant metabolic pathway (surfactant protein B, surfactant protein C and ABCA3), with neonatal respiratory distress syndrome (disease severity and pulmonary surfactant metabolic phenotype).

Allan Doctor, M.D., fifth floor, McDonnell Pediatric Research Building, 454-2527. Role of Erythrocytes in Pathologic Vascular Signaling. We employ several novel experimental platforms to pursue a range of basic, translational and clinical studies exploring (1) the role of erythrocytes in context-responsive metabolism of vasoactive effectors in flowing blood; (2) molecular control of antioxidant defense in erythrocytes; (3) the role of acquired injury to normal erythrocytes in the pathophysiology of acute lung injury and multiple organ failure syndrome; and (4) the impact of genetic abnormalities in erythrocytes upon antioxidant defense and vascular signaling (modeled by sickle cell anemia). Query is modeled on many levels, from isolated proteins to cell culture to isolated organ to whole mouse to studies in humans. http://research.peds.wustl.edu/.
Jennifer Duncan, M.D., third floor, McDonnell Pediatric Research Building, 747-0802. Understanding the Transgenerational Impact of Maternal Nutrition. Our lab uses Drosophila melanogaster as a model system to evaluate the impact of maternal caloric excess on metabolism and mitochondrial function in offspring. We are currently pursuing epigenetic mechanisms, specifically the role of histone modification, for altering gene expression. In addition, we are evaluating the molecular mechanisms underlying triglyceride excess in the offspring and are evaluating tissue specific mitochondrial function. This elective is for students interested in research in any of these areas.

Stephanie A. Fritz, M.D., M.S.C.I., 10125 Northwest Tower, 454-4115. Our research team studies the epidemiology, microbial virulence mechanisms and host defenses against community-associated methicillin-resistant Staphylococcus aureus (CA-MRSA) colonization, transmission and disease. We are investigating the efficacy of potential decolonization measures. We are also interested in the effectiveness of these measures when performed by an entire household versus measures directed at the index patient alone in pediatric patients presenting with a CA-MRSA skin or soft tissue infection. Our lab also explores the host immune response to staphylococcal toxins implicated in the pathogenesis of CA-MRSA in patients across a spectrum of disease states. Our goal is to develop novel approaches for the prevention of CA-MRSA infections.

Matthew Goldsmith, M.D., 7108 McDonnell Pediatric Research Building, 286-2769. Growth Control and Regeneration in Zebrafish. All of our patients are growing. Indeed, it’s the sine qua non of pediatric medicine that distinguishes us from all other physicians. The research efforts of our laboratory center on understanding the biology of growth and regeneration. Growth control and the development of proper size and form is a fundamental problem for growing children, moreover multiple pediatric diseases result in undergrowth, overgrowth or dysregulated growth (i.e. structural birth defects). In addition, while many animals are capable of extensive regeneration, the ability of diseased or damaged tissues and organs to regenerate in humans is quite limited.

We are using the zebrafish, Danio rerio, as a model system for studying the biology of growth and regeneration. Current studies are focused on: (1) using fin overgrowth mutants already identified in forward genetic screens (e.g. rapunzel) to help dissect the genetics of growth control pathways; (2) using forward genetic and pharmacologic screens to identify novel pathways/molecules important in organ regeneration, and; (3) understanding how the nutritional environment is integrated into an overall hierarchy of growth regulatory signals.

An elective is offered for students wishing to pursue research on one of the three topics described above.

David B. Haslam, M.D., 6107 McDonnell Pediatric Research Building, 286-2888. Mechanisms of disease caused by bacterial toxins. Research focuses on the binding and intracellular transport of shiga toxins within human cells. An area of particular interest is the genetic and evolutionary basis for human susceptibility to shiga toxins. In addition, research is examining the ability of shiga toxins to gain access to the cytoplasm by exploiting normal quality control mechanisms in the endoplasmic reticulum.

Robert J. Hayashi, M.D., 9S St. Louis Children’s Hospital, 454-4118. Clinical research interests include stem cell transplantation and its complications including Post Transplant Lymphoproliferative Disease and long-term side effects of therapy.

Keith A. Hruska, M.D., fifth floor, McDonnell Pediatric Research Building, 286-2772. The research in the laboratory focuses on chronic kidney disease (CKD) and its complications of skeletal frailty, cardiovascular disease and vascular calcification. The lab has discovered important new pathologic mechanisms of disease leading to vascular calcification through hyperphosphatemia. Translational studies that continue to develop new therapeutic approaches are being aggressively pursued. New therapies for chronic kidney disease and its complications are being studied in clinical trials.
Paul Hruz, M.D., Ph.D., third floor, McDonnell Pediatric Research Building, 286-2797. Research interests include structure/function relationships in facilitative glucose transporters, congenital and acquired lipodystrophy syndromes and insulin resistance associated with HIV protease inhibitor therapy.

David A. Hunstad, M.D., 6106 McDonnell Pediatric Research Building, 286-2710. The laboratory studies the molecular mechanisms by which Gram-negative pathogens downregulate host immune responses, and how integral outer membrane proteins participate in virulence. In addition, we are designing and engineering novel nanoparticle-based antimicrobial therapies for use in recurrent and complicated urinary tract infections. Our goals are to uncover new avenues for the development of interventions that will prevent and treat Gram-negative infections of the urinary tract, gastrointestinal tract and central nervous system.

Terrie Inder, M.D., 10th floor, Northwest Tower, 454-2200. Newborn Brain Injury and Development. Clinical and experimental studies on the nature and timing of brain injury and alterations in brain development in high-risk infants, including prematurely born and asphyxiated infants. Studies focus predominantly clinically on newborn infants in the NICU at St Louis Children's Hospital but are complemented by animal models. Understanding in the human infant is assisted by technologies such as electroencephalography and MR scanning, the results of which are also related to neurodevelopmental outcomes. Neuroprotective strategies, such as hypothermia and treatment of "clinically silent" seizures in infants are also being undertaken in trials within our laboratory.

David M. Jaffe, M.D., 9105 Northwest Tower, 454-2341. Clinical research interests are: (1) occult bacteremia — identification, clinical decision making; (2) trauma — injury prevention, head and cervical spine injuries; (3) health care delivery system — role of the pediatric emergency department; and (4) pain management.

S. Celeste Morley, M.D., Ph.D., 6105 McDonnell Pediatric Research Building, 286-2136. Our laboratory investigates the molecular mechanisms underlying T cell signaling and trafficking using mouse models. We hope to identify molecules critical for host defense against infectious organisms. Our focus is currently on an actin-binding protein called L-plastin, which is required for normal T cell motility.

Audrey R. Odom, M.D., Ph.D., 6108 McDonnell Pediatric Research Building, 747-2370. Research focuses on the basic biology of the parasite that causes severe malaria, Plasmodium falciparum. An area of particular interest is the metabolic pathway of isoprenoid biosynthesis, which is essential for parasite growth. Projects include exploration of isoprenoid biology using genetic and biochemical techniques, as well as development of assays and screens for new antimalarial agents.

Jose A. Pineda, M.D., 10th floor, Northwest Tower, (Patient Oriented Research Unit), 286-1246. Mechanisms of brain injury in children. Our clinical research efforts focus on studies aimed at further understanding the complex pathophysiology of acute brain injury in children, with special emphasis on traumatic brain injury (TBI). In collaboration with a multidisciplinary team of investigators, our research aims at identifying neuroprotective therapies for severe TBI in children. We utilize advanced imaging techniques (MRI), physiological monitoring and biochemical analysis of clinical samples.

Scott Saunders, M.D., Ph.D., 4105 McDonnell Pediatric Research Building, 286-2850. Investigative efforts are aimed at understanding the molecular basis of development through cell and molecular biological approaches, including transgenic and knockout mouse technology. A particular focus is on the role of a class of tissue- and cell-type specific glycoproteins (heparan sulfate proteoglycans) that play a unique and essential role in the regulation of growth factor and morphogen signaling during human development and diseases.
Alan L. Schwartz, M.D., Ph.D., 3S36 St. Louis Children’s Hospital, 454-6005. Investigative efforts are aimed at understanding: (1) the biology of cell surface receptors including biochemical and molecular dissection of the mechanisms responsible for receptor-mediated endocytosis of blood coagulation proteins; and (2) the regulation of intracellular protein turnover.

Shalini Shenoy, M.D., 9S St. Louis Children’s Hospital, 454-6018. Investigation of novel reduced intensity transplant strategies for pediatric nonmalignant disorders and the immunologic basis of graft versus host disease and graft rejection.

Gregory A. Storch, M.D., Richard S. Buller, Ph.D., and staff, 2N52 St. Louis Children’s Hospital, 454-6079. Rapid diagnosis of viral and other unconventional infections. The Diagnostic Virology Laboratory is studying the use of the polymerase chain reaction and oligonucleotide sequencing for the diagnosis of infections caused by viruses and other unconventional pathogens, and the detection of resistance to antimicrobial agents. Detection of undiscovered pathogens is another area of interest.

Robert C. Strunk, M.D., 10th floor, Northwest Tower, 454-2694. Clinical studies of patients with asthma aimed at understanding the mechanisms of death due to asthma in children.

Phillip I. Tarr, M.D., 6103 McDonnell Pediatric Research Building, 286-2848. Research in Pediatric Gastroenterology and Nutrition. Students have opportunities to participate in broadly encompassing research projects. Investigators in the division have funded and vibrant projects in liver disease (fatty liver disease, acute liver failure, biliary atresia, liver transplants), inflammatory bowel diseases (Crohn's Disease and ulcerative colitis), infections of the gastrointestinal tract (diarrhea), acute liver failure, Hirschsprung Disease, diarrhea, necrotizing enterocolitis, and functional gastrointestinal disorders. Short- and long-term projects can be arranged around these and other related efforts. The exact nature of the project depends on the time that the student can contribute to the effort, and the availability of any of the division faculty, who all have established track records as mentors. Interested students should contact any of our faculty, or Dr. Tarr, to discuss the possibilities.

Neil H. White, M.D., C.D.E., ninth floor, Northwest Tower, 286-1157. Our work involves patient-oriented research in the management of diabetes in children. Arrangements can be made for involvement in or development of projects aimed at improving outcome or prevention of diabetes mellitus and its complications.

David B. Wilson, M.D., Ph.D., 3102 McDonnell Pediatric Research Building, 286-2834. Research is focused on the molecular switches that regulate control genes during early embryonic development and differentiation.

Faculty

Alan L Schwartz  , MD, PHD Head of the Department of Pediatrics
Susan E Adams  , MD, PHD Assistant Professor of Clinical Pediatrics
William S Adams  , MD Associate Professor of Clinical Pediatrics
Sun-Young Ahn  , MD Instructor in Pediatrics
Etihad S. Al-Falahi  Instructor in Clinical Pediatrics
Suzanne G Albrecht  Instructor in Clinical Pediatrics
Ardis Kay Allison, DOST Instructor in Clinical Pediatrics
Denis Ian Altman, MBBCH Assistant Professor of Clinical Pediatrics
Patricia J Amato, MD Associate Professor of Clinical Pediatrics
Mohamad T Amjad, MD Professor of Clinical Pediatrics
Jagruti Shah Anadkat Instructor in Pediatrics
Kristen Minette Andersen Instructor in Clinical Pediatrics
Dana E Ankney, MD Instructor in Pediatrics
Amal F. Antoun Instructor in Clinical Pediatrics
Ana Marie Arbelaez Perez, MD Assistant Professor of Pediatrics
Jennifer L. Arter Assistant Professor of Clinical Pediatrics
Elizabeth L Atkinson, MD Instructor in Clinical Pediatrics
Jeffrey Jay Atkinson, MD Assistant Professor of Pediatrics
Robert K Atteberry Instructor in Clinical Pediatrics
Adrienne Denise Atzemis, MD Assistant Professor of Pediatrics
Sara Ayers, MD Instructor in Clinical Pediatrics
Fariba Azarpour, MD
Leonard B Bacharier, MD Professor of Pediatrics
Jill M Baer, MD Assistant Professor of Clinical Pediatrics
Sirine A. Baltagi Instructor in Pediatrics (Pending Dean's Approval)
David T Balzer, MD Professor of Pediatrics
Angela L Bard, MD Associate Professor of Clinical Pediatrics
Alan Roy Barnette Adjunct Instructor in Pediatrics
Kevin Barton Instructor in Pediatrics (Pending Dean's Approval)
Kevin W Baszis Instructor in Pediatrics
Maria S Baszis Instructor in Clinical Pediatrics
Susan L Baumer, MD Associate Professor of Clinical Pediatrics
Christie A. Bayer, MD Instructor in Clinical Pediatrics
Susan Joy Bayliss, MD Professor of Pediatrics
Anne Marie Beck, MD, MS Professor of Pediatrics
Julia M. Becker, MD Instructor in Clinical Pediatrics
Jeffrey John Bednarski, MD, PHD Instructor in Pediatrics
Earl C Beeks Jr, MD Associate Professor of Clinical Pediatrics
Avraham Beigelman, MD Assistant Professor of Pediatrics
Melissa S. Belanger, MD Instructor in Pediatrics
Walter F Benoist, MD Professor of Clinical Pediatrics
Kathleen Mary Berchelmann, MD Instructor in Pediatrics
Louise E Berdan, MA, PHS Instructor in Clinical Pediatrics
Mary Ellen Bertrand, MD Associate Professor of Pediatrics
Shobha Bhaskar, MBBS Instructor in Pediatrics
Jean E Birmingham, MD Associate Professor of Clinical Pediatrics
Huldah C Blamoville  , MD Associate Professor of Clinical Pediatrics
Kevin J Blanton  Instructor in Clinical Pediatrics
Gordon R Bloomberg  , MD Professor of Pediatrics
Trina Blythe  , MD Instructor in Clinical Pediatrics
Joshua P Boldt  Instructor in Clinical Pediatrics
Anne M Bowcock  , PHD Professor of Pediatrics
Robert J Bradshaw  , MD Instructor in Clinical Pediatrics
Yolette V Brown  , MD Assistant Professor of Clinical Pediatrics
Earline A Brownridge  , MD Instructor in Clinical Pediatrics
Seth J Brownridge  , MD Assistant Professor of Clinical Pediatrics
Janice E Brunstrom-Hernandez  , MD Associate Professor of Pediatrics
Guojun Bu  , PHD Adjunct Professor of Pediatrics
Kathryn Ann Bucklen  , BFA, MD Assistant Professor of Pediatrics
Tara M. Budetti  Instructor in Clinical Pediatrics
Lorena Buffa  , MD Instructor in Clinical Pediatrics
Richard S Buller  , MS, PHD Research Assistant Professor of Pediatrics
Rebecca Kay Bullivant  , MD Assistant Professor of Clinical Pediatrics
Max H Burgdorf  , MD Assistant Professor of Clinical Pediatrics
Carey-Ann Dawn Burnham  , PHD Assistant Professor of Pediatrics
Garrett C Burris  , MD Associate Professor of Clinical Pediatrics
Kelley S. Caddel  , MD Instructor in Clinical Pediatrics
Archna Calfee  , MD Instructor in Clinical Pediatrics
David J Callahan  , MD Assistant in Clinical Pediatrics
Joseph Edward Cangas  Assistant Professor of Clinical Pediatrics
Charles E Canter  , MD Professor of Pediatrics
Celeste Capers  , MD Instructor in Pediatrics
John R Carlile  , MD Assistant Professor of Clinical Pediatrics
Douglas W Carlson  , MD Professor of Pediatrics
Michael J. Carney  , MD Instructor in Clinical Pediatrics
Amanda E Carrion  , MD Instructor in Pediatrics
Rubilinda Q Casino  , MD Instructor in Clinical Pediatrics
Timothy James Casper  , MD Instructor in Pediatrics (Pending Dean's Approval)
Mario Castro  , M PH, MD Professor of Pediatrics
Tattamangalam P Chandrika  , MS Associate Professor of Clinical Pediatrics
William T Chao  , MD Instructor in Clinical Pediatrics
Glenn S Cheng  , MD Instructor in Clinical Pediatrics
Wak S Chia  , MD Instructor in Clinical Pediatrics
Jonathan C Chiles  , MD Instructor in Pediatrics
Michael A Ciliberto  , MD, MS Assistant Professor of Pediatrics
Darryl S Cohen  , DOST Assistant Professor of Clinical Pediatrics
F. Sessions Cole, MD Park J White, M.D. Professor of Pediatrics
F. Sessions Cole, MD Vice Chair of the Department of Pediatrics
John C. Cole, MD, PHD Instructor in Clinical Pediatrics
Lora Pearlman Collier Instructor in Clinical Pediatrics
Susan Conger Instructor in Clinical Pediatrics
Anne Maureen Connolly, MD Professor of Pediatrics
John Nicholas Constantino, MD Professor of Pediatrics
Megan A Cooper, MD, PHD Assistant Professor of Pediatrics
Ferdinand Louis Coste III, DOST Instructor in Pediatrics
Mary Michaeleen Cradock Assistant Professor of Clinical Pediatrics
Betty Cross, MD Instructor in Clinical Pediatrics
Clayton Cummings, BSBA, MD Instructor in Pediatrics
Tracey M. Daly, MD Instructor in Clinical Pediatrics
Michael E Danter, MD Assistant Professor of Clinical Pediatrics
Yasmeen Daud, MD Assistant Professor of Pediatrics
John C Davis, MD Associate Professor of Clinical Pediatrics
Kasey L. Davis, MS, PHD Instructor in Clinical Pediatrics
Ray S Davis, MD Professor of Clinical Pediatrics
Thomas Keefe Davis Instructor in Pediatrics
Jeffrey G Dawson, MD Associate Professor of Pediatrics
Michael R Debaun, MD, MPH, MS Adjunct Professor of Pediatrics
Jane E. Defalco, MD, MS Assistant Professor of Clinical Pediatrics
Louis P Dehner, MD Professor of Pathology in Pediatrics
Maureen Elaine Dempsey Instructor in Clinical Pediatrics
Leanne Michelle DePalma, MD Instructor in Pediatrics
Gerry Deschamps, MD, PHS Instructor in Clinical Pediatrics
Vikas Ramnath Dharnidharka Associate Professor of Pediatrics
Donald V. Dichsen, MD Instructor in Clinical Pediatrics
Lizbeth H DidrikSEN Assistant Professor of Clinical Pediatrics
Dennis J. Dietzen, PHD Associate Professor of Pediatrics
Patrick A Dillon, MD Associate Professor of Pediatrics
Mary C Dinauer, MD, PHD Professor of Pediatrics
Tulay F Dincer, MD Assistant Professor of Clinical Pediatrics
John F Dipersio, MD, PHD Associate Professor of Pediatrics
Allan Doctor, MD Associate Professor of Pediatrics
William Edwin Dodson, MD Professor of Pediatrics
Alla Dorfman, MD Instructor in Clinical Pediatrics
Catherine J Doty Instructor in Clinical Pediatrics
Charles H Dougherty, MD Professor of Clinical Pediatrics
Matthew P Dougherty Instructor in Clinical Pediatrics
Joan Catherine Downey, M PH, MD Assistant Professor of Pediatrics
Todd Druley, MD, PHD Assistant Professor of Pediatrics
Jennifer Gries Duncan, MD Assistant Professor of Pediatrics
Jennifer M Dunn, MD Assistant Professor of Clinical Pediatrics
Adam C. Eaton, MD Instructor in Clinical Pediatrics
Lori L Eberhart Instructor in Clinical Pediatrics
Robert W Edmonds, MD Assistant Professor Emeritus of Clinical Pediatrics
Pirrooz Eghtesady, D SC, MD, MS Professor of Pediatrics
Charles David Eldridge Instructor in Pediatrics (Pending Dean's Approval)
Alysa G. Ellis, MD Instructor in Pediatrics
Alexis M Elward, MD, MPH Associate Professor of Pediatrics
Amanda R. Emke, MD Instructor in Pediatrics
Jay S Epstein, MD, MS Professor of Clinical Pediatrics
Diane M Eschmann, MD Instructor in Clinical Pediatrics
Jennifer Ess Instructor in Clinical Pediatrics
Laura Ann Esswein, MD Instructor in Clinical Pediatrics
Michele Marie Estabrook, MA, MD Professor of Pediatrics
Elliott H Farberman, MD Assistant Professor of Clinical Pediatrics
Albert Faro, MD Associate Professor of Pediatrics
Kathryn Rebecca Farrell Instructor in Pediatrics (Pending Dean's Approval)
James J Fehr III, MD Associate Professor of Pediatrics
Richard A. Felkel Jr Instructor in Clinical Pediatrics
Thomas W Ferkol, MD Alexis Hartmann MD Professor of Pediatrics
Thomas W Ferkol, MD Professor of Pediatrics
Isabel Fernandez-Holtzman Instructor in Clinical Pediatrics
Gregory K Finn, MD Assistant Professor of Clinical Pediatrics
Anna M Fitz-James, M PH, MD Assistant Professor of Clinical Pediatrics
Edward B Fliesher, MD Assistant Professor of Clinical Pediatrics
Myrto Frangos, MD Instructor in Clinical Pediatrics
Anthony Raymond French, MD, MS, PHD Assistant Professor of Pediatrics
Theresa Marie Frey, MD Instructor in Pediatrics
Ira J Friedman, MD Assistant Professor of Clinical Pediatrics
Stuart Howard Friess, MD Assistant Professor of Pediatrics (Pending Executive Faculty Approval)
Stephanie Ann Fritz, MD, MS Assistant Professor of Pediatrics
John P Galgani Jr, MD Associate Professor of Clinical Pediatrics
Maria Virginia Ganninger Instructor in Clinical Pediatrics
Jane M. Garbutt, MBCHB, MHS Research Associate Professor of Pediatrics
Tessa D Gardner, MD Assistant Professor of Clinical Pediatrics
Caryn Garriga Assistant Professor of Clinical Pediatrics
Sarah Kathryn Garwood, MD Instructor in Pediatrics
Karen J Garzia, Instructor in Clinical Pediatrics
Karen Marie Gauvain, MD, Assistant Professor of Pediatrics (Pending Executive Faculty Approval)
Avihu Gazit, MD, Assistant Professor of Pediatrics
Elliot Field Gellman, MD, Professor of Pediatrics
James A Gerst, MD, Professor of Clinical Pediatrics
John F Gleeson Jr, Instructor in Clinical Pediatrics
Joseph K Goldenberg, MD, Associate Professor of Clinical Pediatrics
Matthew I Goldsmith, MD, MS, Assistant Professor of Pediatrics
Paul T Golumbek, MD, MS, PHD, Assistant Professor of Pediatrics
Gary M Goodman, MD, Assistant Professor of Clinical Pediatrics
Ronald M Grady, MA, MD, Associate Professor of Pediatrics
Laquita A Graham, MD, Instructor in Clinical Pediatrics
Dorothy K. Grange, MD, Professor of Pediatrics
Marshall B Greenman, MD, Associate Professor of Clinical Pediatrics
Joseph Donald Gunn, MD, Associate Professor of Pediatrics
Santosh K Gupta, DC, Assistant Professor of Clinical Pediatrics
Christina A. Gurnett, MD, PHD, Assistant Professor of Pediatrics
David H Gutmann, MD, MS, PHD, Professor of Pediatrics
Brian P Hackett, MD, PHD, Professor of Pediatrics
Mark E. Halstead, MD, Assistant Professor of Pediatrics
Kim P Hamlin, MD, Assistant Professor of Pediatrics
Roman E Hames, MD, Instructor in Clinical Pediatrics
Melanie G Hampton, MD, Assistant Professor of Clinical Pediatrics
Aaron Hamvas, MD, James P. Keating, M.D., Professor of Pediatrics
Elinor F Hancock, MD, Instructor in Clinical Pediatrics
Robin D Hanson, MD, PHD, Instructor in Clinical Pediatrics
Suzanne M Hanson, MD, Assistant Professor of Clinical Pediatrics
Michael Raymond Harris, MD, MS, PHD, Associate Professor of Pediatrics
Elizabeth Avis Harrison, MD, Instructor in Pediatrics
Thomas J. Harrison Jr, MD, Instructor in Clinical Pediatrics
David E Hartenbach, MD, Associate Professor of Clinical Pediatrics
Mary E Hartman, M PH, MD, Assistant Professor of Pediatrics
John Edward Hartweger, Instructor in Clinical Pediatrics
James Larry Harwell, MD, Assistant Professor of Clinical Pediatrics
David B Haslam, MD, Associate Professor of Pediatrics
Sherrie M Hauft, MD, Professor of Pediatrics
Robert J Hayashi, MD, Associate Professor of Pediatrics
Ericka V. Hayes, MD, Assistant Professor of Pediatrics
Nathan Henninger, Instructor in Clinical Pediatrics
Geetha G Herath, MD, Instructor in Pediatrics
Mary Jo Hernandez-Zipfel, MD Instructor in Clinical Pediatrics
Robert O Heuckeroth, MD, PHD Professor of Pediatrics
Laura Hill Assistant Professor of Clinical Pediatrics
Jennifer M Hinton Instructor in Clinical Pediatrics
Keiko Hirose, MD Associate Professor of Pediatrics
Gary E Hirshberg, MD Professor of Anesthesiology in Pediatrics
Stanley P Hmiel, M PHIL, MD, PHD Professor of Pediatrics
Sharon Ho, MD Instructor in Clinical Pediatrics
Sandra Jean Hodel Instructor in Clinical Pediatrics
Dee Hodge III, MD Professor of Pediatrics
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Russell G. Hoffmann, PHD Instructor in Clinical Pediatrics
Nicholas Alan Holekamp, MD Instructor in Clinical Pediatrics
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Lori Rachel Holtz, MD Instructor in Pediatrics
Rochelle LeAnn Holtzman, MS, PHD Instructor in Clinical Pediatrics
J. Joseph Horan, MD Instructor in Clinical Pediatrics
Caroline Clare Horner, MD Assistant Professor of Pediatrics
Christine M Hrach, BSW, MD Assistant Professor of Pediatrics
Keith A Hruska, MD Professor of Pediatrics
Paul W. Hruz, MD, PHD Associate Professor of Pediatrics
Frederick Szujuei Huang, MD Associate Professor of Pediatrics
Donald V Huebener, DDENT, MA, MS Instructor in Pediatric Dentistry
Monica L Hultbert Assistant Professor of Pediatrics
David A Hunstad, MD Assistant Professor of Pediatrics
Terrie Eleanor Inder, MBBS, MD Professor of Pediatrics
Carl S Ingber, MD Instructor in Clinical Pediatrics
Aidan W Ip, MD Instructor in Clinical Pediatrics
David M Jaffe, MD Dana Brown Professor of Pediatrics
Sue E Jagler Instructor in Clinical Pediatrics
Patricia A Jamerson Instructor in Clinical Pediatrics
Patrick Y Jay, MD, PHD Associate Professor of Pediatrics
Yasangi Maina Jayasiha, MD Instructor in Clinical Pediatrics
Denise R Johnson, MD Associate Professor of Clinical Pediatrics
Joyce D Johnson, MD Assistant Professor of Clinical Pediatrics
Mark C Johnson, MD Associate Professor of Pediatrics
Staci R. Johnson, MD Instructor in Clinical Pediatrics
William Lee Johnson, MD Adjunct Associate Professor of Pediatrics
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<th>Name</th>
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<td>William Lee Johnson</td>
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Robert Carolin McKinstry III, MD, MS, PHD Professor of Pediatrics
William A McManus , MD Instructor in Pediatrics
Robert Paul Mecham , PHD Professor of Pediatrics
Nalini K Mehta Instructor in Clinical Pediatrics
P Aravindaksha Menon Instructor in Clinical Pediatrics
Sarah J. Mermelstein , MD Instructor in Pediatrics
Mary Shaughnessy Meyer Assistant Professor of Clinical Pediatrics
Peter Howard Michelson , MD, MS Associate Professor of Pediatrics
Jenny Lynn Miele Instructor in Clinical Pediatrics
Aaron Samuel Miller , MD, MS Instructor in Pediatrics
Donna C Miller , MD Instructor in Clinical Pediatrics
Suzanne Lee Miller , MD Instructor in Clinical Pediatrics
Shakir Mohamed , MD Instructor in Pediatrics
Christopher Molitor Instructor in Clinical Pediatrics
Gail Lynn Moolsintong , MD Instructor in Clinical Pediatrics
Darlene A. Moore , MD Instructor in Clinical Pediatrics
Mary R Morgan , MD Instructor in Clinical Pediatrics
Sharon Celeste Morley , MD, PHD Assistant Professor of Pediatrics
Daniel R. Morra Instructor in Clinical Pediatrics
Lisa Mae Moscoso , MD, PHD Assistant Professor of Pediatrics
Janet Gwen Mueller , MD Assistant Professor of Clinical Pediatrics
Margaret M Mueller Instructor in Clinical Pediatrics
Steven Mueth Instructor in Clinical Pediatrics
Monalisa Mullick , MD Instructor in Pediatrics
Manohara Munimuddappa Instructor in Clinical Pediatrics
Joshua J Murphy , MD Assistant Professor of Pediatrics
Kevin J Murphy , MD Professor of Clinical Pediatrics
Gian Marco Musarra , MD Instructor in Pediatrics
John A Myers Instructor in Clinical Pediatrics
Venkata S. Nagireddi Instructor in Clinical Pediatrics
Tasnim A Najaf , MD Assistant Professor of Pediatrics
Ayesha Najib Instructor in Clinical Pediatrics
Alison C Nash , MD Professor of Clinical Pediatrics
Homer E Nash Jr, MD Professor of Clinical Pediatrics
Jeffrey J Neil , MD, PHD Professor of Pediatrics
Lynn G Nelms Instructor in Clinical Pediatrics
April Erwin Nesin Instructor in Clinical Pediatrics
Tara Marie Neumayr , MD Instructor in Pediatrics
Khai Ngo , MD Instructor in Clinical Pediatrics
Ellen Margaret Nicastro Instructor in Clinical Pediatrics
Ramzi T Nicolas  Adjunct Instructor in Pediatrics
Michael Justin Noetzel  , MD Professor of Pediatrics
David Craig Norman  , MD Assistant Professor of Clinical Pediatrics
Karen K Norton  , MD Associate Professor of Clinical Pediatrics
Douglase Susumu Nozaki  , MD Instructor in Clinical Pediatrics
Jerome H O’Neil Jr, MD Assistant Professor of Clinical Pediatrics
Audrey R Odom  , MD, PHD Assistant Professor of Pediatrics
Justin O Ogbevden  , MBBS Instructor in Clinical Pediatrics
Phineas Phillip Oren  , MD Assistant Professor of Pediatrics
Valerie Orrico  Instructor in Clinical Pediatrics
Rachel C. Orscheln  , MD Assistant Professor of Pediatrics
Cynthia M. Ortinau  Instructor in Pediatrics (Pending Dean's Approval)
Irma I Ortiz-Arroyo  , MD Assistant Professor of Clinical Pediatrics
Alison H Oswald  Instructor in Clinical Pediatrics
Jennifer Ann Panasci  Instructor in Clinical Pediatrics
Tae Sung Park  , MD Professor of Pediatrics
Robert T Paschall  , MA, MD Professor of Pediatrics
Anand C Patel  , MD Assistant Professor of Pediatrics
Frederick D Peterson  , MD Professor of Clinical Pediatrics
Robert G Pineda  , MHS, PHS Research Assistant Professor of Pediatrics
Jose A Pineda Soto  , MD Assistant Professor of Pediatrics
Christopher James Pingel  , MD Instructor in Pediatrics
Daniel S Plax  , MD Assistant Professor of Clinical Pediatrics
Kathryn L. Plax  , MD Associate Professor of Pediatrics
Santiago Boye Plurad Jr, MD Assistant Professor of Clinical Pediatrics
Juanita C Polito-Colvin  , MD Associate Professor of Clinical Pediatrics
Claudia Preuschoff  , MD Instructor in Clinical Pediatrics
Cassandra Michelle Pruitt  , MD Assistant Professor of Pediatrics
Peter J Putnam  , MD Assistant Professor of Clinical Pediatrics
Jenna M Putzel  Instructor in Clinical Pediatrics
Robert Louis Quaas  , MD Instructor in Clinical Pediatrics
Kimberly S Quayle  , MD Associate Professor of Pediatrics
Jennifer Quinn  , MD Instructor in Clinical Pediatrics
Mohammad H Rahman  Instructor in Clinical Pediatrics
Vidya Raman  Instructor in Clinical Pediatrics
Pathmawathy T Ramesvara  , MS Instructor in Clinical Pediatrics
Rakesh Rao  , MBBS, MD Assistant Professor of Pediatrics
Emanuel Rashet  , MD Instructor in Clinical Pediatrics
Sheryl S Ream  , MD Instructor in Clinical Pediatrics
Neil F. Rebbe  , MD, PHS Instructor in Clinical Pediatrics
Timothy Reed  Instructor in Clinical Pediatrics
Phillip D Reichert  Instructor in Clinical Pediatrics
Catherine R Remus  MD, MSN  Assistant Professor of Clinical Pediatrics
George H Rezabek  DOST  Instructor in Clinical Pediatrics
Edward K Rhee  MD  Adjunct Assistant Professor of Pediatrics
Katherine Rivera-Spoljaric  MD, MS  Assistant Professor of Pediatrics
William L. Rives  MD, MS  Assistant Professor of Pediatrics
Janis B Robinson  MA, MD  Associate Professor of Clinical Pediatrics
Sandep Rohatgi  MD  Instructor in Clinical Pediatrics
James R Rohrbaugh  MD  Associate Professor of Clinical Pediatrics
Joan Lee Rosenbaum  MD, MS  Professor of Pediatrics
Isabel L Rosenbloom  MD  Associate Professor of Clinical Pediatrics
Daniel B Rosenbluth  MD  Professor of Pediatrics
Kelly Ross  MD  Assistant Professor of Pediatrics
William J Ross  MD  Associate Professor of Clinical Pediatrics
Robert J Rothbaum  MD  Centennial Professor of Pediatrics
Ella Rozin  Instructor in Clinical Pediatrics
Joshua Bennett Rubin  MD, MS, PHD  Associate Professor of Pediatrics
Christina M Ruby  MD  Instructor in Clinical Pediatrics
Martin D Rudloff  MD  Assistant Professor of Clinical Pediatrics
David Rudnick  MD, PHD  Associate Professor of Pediatrics
Daniel G. Rudolph  MD  Instructor in Clinical Pediatrics
Karen Elizabeth Ruecker  MD  Instructor in Clinical Pediatrics
Diane Mary Rup  MA, MD  Instructor in Clinical Pediatrics
Lisa A Ryan  Instructor in Clinical Pediatrics
Charles Michael Samson  Instructor in Pediatrics
Gretchen A Sander  MD  Instructor in Clinical Pediatrics
Heidi L Sandige  MA, MA1, MD  Instructor in Pediatrics
Diana M Sater-Roukoz  Instructor in Clinical Pediatrics
George Sato  MD  Professor of Clinical Pediatrics
Richard William Sato  MD  Assistant Professor of Clinical Pediatrics
Scott Saunders  MD, PHD  Associate Professor of Pediatrics
Brian J. Saville  MD  Instructor in Clinical Pediatrics
Blaine M Sayre  M PH, MD  Professor of Clinical Pediatrics
Joseph Schachter  MD  Assistant Professor of Clinical Pediatrics
Bradley L Schlaggar  MD, PHD  Associate Professor of Pediatrics
Howard J Schlansky  MD  Instructor in Clinical Pediatrics
Margaret Ann Schmandt  MD  Associate Professor of Clinical Pediatrics
Martin P Schmidt  MD  Assistant Professor of Clinical Pediatrics
David Schnadower  M PH, MD  Assistant Professor of Pediatrics
Jacquelyn C Schnidman, MD Instructor in Clinical Pediatrics
Laura Graves Schuettpelz Instructor in Pediatrics (Pending Dean's Approval)
Alan L Schwartz, MD, PHD Harriet B Spoehrer Professor of Pediatrics
Colleen Erika Seematter Instructor in Clinical Pediatrics
Michael Edward Seifert Assistant Professor of Clinical Pediatrics
Martha Papay Sewall, MD Instructor in Clinical Pediatrics
Purvi Shah, MD Assistant Professor of Pediatrics
Shabana Shahanavaz Instructor in Pediatrics
Rachel E. Shakofsky, MD Instructor in Pediatrics
Larry J Shapiro, MD Spencer T and Ann W Olin Distinguished Professor of Pediatrics
Eleanor Maria Shaw, MD Assistant Professor of Clinical Pediatrics
Shalini Shenoy, MBBS, MD Associate Professor of Pediatrics
Ross William Shepherd, MBBS, MD Adjunct Professor of Pediatrics
Warren G Sherman, MD Professor of Clinical Pediatrics
Marwan Shinawi, MD Associate Professor of Pediatrics
Min-Yi Katherin Shiue, MD Instructor in Clinical Pediatrics
Michael Shoykhet, MD, PHD Instructor in Pediatrics
Marilyn J Siegel, MD Professor of Radiology in Pediatrics
Manuel De Jesus Silva-Carmona, MD Instructor in Pediatrics
Jennifer N Silva, MD Assistant Professor of Pediatrics
Connie Darlene Simmons Instructor in Clinical Pediatrics
Paul S Simons, MD Associate Professor of Pediatrics
Gautam K Singh, MBBS, MD Professor of Pediatrics
Carl Jeffrey Sippel, MD, PHD Assistant Professor of Clinical Pediatrics
Kelsey Alayne Sisti, MD Instructor in Pediatrics (Pending Dean's Approval)
Harold B Sitrin, MD Assistant Professor of Clinical Pediatrics
Alan Joseph Skoultchi, MD, MS Instructor in Clinical Pediatrics
Carolyn Anne Delaney Smith, MD Assistant Professor of Pediatrics
Joshua C Smith Instructor in Clinical Pediatrics
Matthew D Smyth, MD Associate Professor of Pediatrics
Nareshkumar J Solanki Assistant Professor of Clinical Pediatrics
Umang Sood, MD Instructor in Pediatrics
Robert D Spewak, MD Instructor in Clinical Pediatrics
Craig A Spiegel, MD Assistant Professor of Clinical Pediatrics
Mythili Srinivasan, MD, MS, PHD Assistant Professor of Pediatrics
Danielle R St Leger Instructor in Clinical Pediatrics
Sarah A Stanage, MD Instructor in Pediatrics
Norman P Steele, MD Instructor in Clinical Pediatrics
Randall S Sterkel, MD Assistant Professor of Clinical Pediatrics
Anita R Stiffelman, MD Associate Professor of Clinical Pediatrics
Gregory A Storch , MD  Ruth L. Siteman Professor of Pediatrics
Robert H Strashun , MA, MD  Associate Professor of Clinical Pediatrics
Susan Kay Strecker , DPT, MA  Assistant Professor of Pediatrics
M. Anne Street , MA, MD  Assistant Professor of Clinical Pediatrics
Robert C Strunk , MD, MS  Professor of Pediatrics
Jonathan Rhys Strutt , MD  Instructor in Pediatrics (Pending Dean's Approval)
Judith M. Stucki-Simeon , MD  Instructor in Clinical Pediatrics
Rosa M Suarez-Solar , MD  Instructor in Clinical Pediatrics
Lisa Suffian , MD  Instructor in Clinical Pediatrics
Toshifumi Sugatani , DDENT, PHD  Research Instructor in Pediatrics
Stuart C Sweet , MD, PHD  Professor of Pediatrics
Amanda Sweetland  Instructor in Clinical Pediatrics
Susan C. Sylvia  Instructor in Clinical Pediatrics
Aline T. Tanios , MD  Assistant Professor of Pediatrics (Pending Executive Faculty Approval)
Phillip Irwin Tarr , MD  Melvin E Carnahan Professor of Pediatrics
Kristen A Terrill  Instructor in Clinical Pediatrics
Bradley Terrill Thach , MD  Professor of Pediatrics
Donna T Thackrey , MD  Instructor in Clinical Pediatrics
Stephen Thierauf  Instructor in Clinical Pediatrics
Kwee L Thio , MD, PHD  Associate Professor of Pediatrics
Scott M. Thomas  Instructor in Pediatrics (Pending Dean's Approval)
Mary A Tillman , MD  Professor of Clinical Pediatrics
Robert W Tolan Jr., MA, MD  Instructor in Clinical Pediatrics
Scott A. Trail , MD  Instructor in Clinical Pediatrics
Jeanne M Trimmer , MD  Instructor in Clinical Pediatrics
Garland R Tschudin , MD  Instructor in Clinical Pediatrics
Michael P Turmelle , MD  Assistant Professor of Pediatrics
Yumirle Padron Turmelle , AA, MD  Assistant Professor of Pediatrics
Robert Lawrence Tychsen , MD  Professor of Ophthalmology and Visual Sciences in Pediatrics
April L Tyus  Instructor in Clinical Pediatrics
Elizabeth C Utterson , MD  Assistant Professor of Pediatrics
Akshaya J Vachharajani , MBBS, MD  Assistant Professor of Pediatrics
George Frederick Van Hare III , MD  Louis Larrick Ward Professor of Pediatrics
Laird Henry Vermont  Instructor in Clinical Pediatrics
Mary Kristin Voellinger , MD  Instructor in Clinical Neurology
Jean V Wagner  Instructor in Clinical Pediatrics
William B. Waldrop , MD  Assistant Professor of Pediatrics
Colleen M Wallace , MD  Instructor in Pediatrics
Jennifer Anne Wambach , MD  Assistant Professor of Pediatrics
Barbara B. Warner , MD, MS  Professor of Pediatrics
Department's Website

http://peds.wustl.edu/

Department of Psychiatry

Instruction in psychiatry is given during the second, third and fourth years of the medical curriculum. Emphasis is on the teaching of psychiatry as a medical discipline, including the biological, social and psychological mechanisms and manifestations of psychiatric illness, as well as psychological reactions to other illnesses. Psychiatric disorders are common and disabling illnesses. An explosion of knowledge resulting from research in neuroscience, genetics and epidemiology is leading to exciting advances in understanding and treating these disorders. Our department is heavily involved in this research, and our didactic curriculum integrates current clinical information with research advances to help students develop the knowledge, skills and attitudes to recognize these illnesses and understand the basic principles of treatment.

William Greenleaf Eliot Division of Child Psychiatry

The Division of Child Psychiatry offers a varied teaching program for medical students, residents in psychiatry and fellows at St. Louis Children’s Hospital and the Child Psychiatry Center. The center provides outpatient services to children with an array of mental disorders. Trainees are assigned to these various services, where they participate in diagnostic evaluations and see patients in treatment, under supervision of a fellow and attending physician.

Courses

Second Year

M85 676A DISEASES OF THE NERVOUS SYSTEM: PSYCHIATRY
Instructor: Melissa A. Harbit, MD, 362-2440
This course emphasizes the diagnosis of major psychiatric illnesses in adults and children. Psychiatric diseases are described in terms of epidemiology, clinical presentation, natural history, genetics, differential diagnosis and clinical management. Interviewing techniques and performance of the mental status exam will be demonstrated by patient interviews.

Third Year

M85 770 PSYCHIATRY CLERKSHIP
Instructor: Fay Y. Womer MD, 362-2469
Up to 11 students spend four weeks on the inpatient psychiatry service of Barnes-Jewish Hospital (BJH). Students also will have experiences in other settings, including the psychiatry consultation and electroconvulsive therapy services at BJH and the outpatient psychiatry services at BJH Wohl Clinic, BJC Behavioral Health and/or Washington University Child and Adolescent Psychiatry Center. Students evaluate and treat patients under the supervision of house staff and attending physicians, attend teaching conferences including small group sessions with a psychiatrist to learn psychiatric interviewing and the mental status exam, and complete other assigned learning experiences. See http://www.psychiatry.wustl.edu/c/Education/MedicalStudent.aspx for further details and to review the objectives and expectations of the clerkship.
M85 771 AMBULATORY CLERKSHIP: PSYCHIATRY FOR GENERALISTS
Instructor: Fay Y. Womer, MD, 362-2469
Students may elect to pursue their ambulatory medicine selective through the Department of Psychiatry. Students will make an oral presentation on a relevant clinical topic of their choice and participate in clinical duties. Students may request one of the following clinical options: outpatient adult psychiatry at Barnes-Jewish Hospital (BJH) Wohl Clinic or BJC Behavioral Health, psychiatry consultation service at BJH, or outpatient child and adolescent psychiatry at Washington University Child and Adolescent Psychiatry Center. See http://www.psychiatry.wustl.edu/c/education/medstudent/OptionsInPsych.aspx for further details.

Fourth Year

Electives

M85 805 PSYCHIATRY CONSULT SERVICE
Instructor(s): Dan Haupt, MD, 362-2469
Location: 4405A Renard Building
Elective Contact: Dan Haupt, MD, 362-2469
Other Information: Students should page the consult team at 848-2402, 8 a.m. first day of elective.
Enrollment limit per period: 2
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

The fourth-year student will work closely with the consult resident and consult team that also includes the attending and advanced practice nurse in the evaluation and treatment of patients referred to the psychiatry consult service. Students will attend weekly consult/liaison teaching conferences during the summer and Grand Rounds and Research Rounds in non-summer months.

Student time distribution: Inpatient 90%, Conferences/Lectures 10%; Subspecialty Care 100%
Major teaching responsibility: Attendings and residents and advanced practice nurses
Patients seen/weekly: 3 workups per week expected; follow up to 10 or more
On call/weekend responsibility: None

M85 810 OUTPATIENT COMMUNITY PSYCHIATRY
Instructor(s): Brianne Disabato, MD, 362-1222
Location: The Psychiatry Clinic and community sites
Elective Contact: Brianne Disabato, MD, 362-1222
Other Information: Location of first meeting will be specified in a mailing.
Enrollment limit per period: minimum 2; maximum 3.
Valid start weeks for 4-week blocks are: Weeks 13 and 17.

This is a flexible clerkship where effort is made to tailor the activities to the students’ interests. Students will assist in diagnosis and treatment of adult psychiatric clinic and ER patients. The patients present with a wide variety of psychological and interpersonal problems, as encountered in an everyday office practice. In this setting, the student will have the opportunity to learn a variety of treatment techniques under supervision. Students completing the clerkship have indicated their enjoyment of the opportunity for independent patient management.

Student time distribution: Outpatient/ER 80%, Conferences/Lectures 20%; Subspecialty Care 100%
Major teaching responsibility: Attendings and residents
Patients seen/weekly: 20
On call/weekend responsibility: None

M85 811 OUTPATIENT SHADOWING AND READING ELECTIVE
Instructor(s): Richard W. Hudgens, MD, 286-1712
Location: 24 S. Kingshighway, Psychiatry Clinic
Elective Contact: Christina Lickel, 286-1712
Other Information: Report to 24 S. Kingshighway, Psychiatry Clinic 1 p.m. first day of elective
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 17, 21, 25, 29, 33, 37, and 41.

Student will choose a reading topic relevant to psychiatry. Student will shadow Dr. Hudgens on inpatient rounds and sit in with Dr. Hudgens during outpatient clinic hours.

Student time distribution: 100% Outpatient; 100% Subspecialty Care
Major teaching responsibility: Coursemaster
Patients seen/weekly: 40
On call/weekend responsibility: None

M85 836 CLINICAL PSYCHIATRY — INPATIENT PSYCHIATRIC SERVICE
Instructor(s): Michael Jarvis, PhD, MD, 362-1816
Location: Barnes-Jewish Hospital South
Elective Contact: Michael Jarvis, PhD, MD, 362-1816
Other Information: Contact Cindy Bander prior to first day of elective at 362-1816.
Enrollment limit per period: 3
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

This is a senior rotation that provides the students with an opportunity to expand their knowledge of inpatient clinical psychiatry by functioning as interns. Students attend all staffing and teaching conferences given to first-year psychiatry residents, take patients in rotation, and share night call with first-year residents approximately every fifth night.

Immediate supervision is provided by the inpatient attending, and additional supervision can be arranged as desired. Teaching emphasis is directed toward psychiatric diagnosis, appropriate use of psychopharmacologic agents, psychotherapeutic intervention, use of community resources and pursuit of the psychiatric scientific literature. The student will write a self-selected clinical topic relevant to treatment and management of psychiatric inpatients.

Student time distribution: Inpatient 85%, Conferences/Lectures 15%
Major teaching responsibility: Clinical attending, teaching attendings and residents
Patients seen/weekly: 5-7
On call/weekend responsibility: Every fifth night

M85 840 CHILD PSYCHIATRY
Instructor(s): Anne Glowinski, MD, 286-2217
Location: Montclair Building, 24 S. Kingshighway, Outpatient Psychiatry Clinic
Elective Contact: Anne Glowinski, MD, 286-2217
Other Information: Interested students should contact Dr. Anne Glowinski at 286-2217 in the Department of Psychiatry.
Enrollment limit per period: 2
Valid start weeks for 4-week blocks are: Weeks 9, 13, 17, 21, 25, 29, 33, 37, and 41 or contact Dr. Glowinski for modifications.

This elective in child psychiatry utilizes the Child Psychiatry Outpatient Clinic and the consult-liason service at St. Louis Children’s Hospital. It provides experience in age-appropriate diagnostic and treatment methods in children and adolescents. A paper on topic of student’s choosing is required.

Student time distribution: Outpatient 75%, Conferences/Lectures 25%; Subspecialty Care 100%
Major teaching responsibility: Attendings and fellows
Patients seen/weekly: 15-20
On call/weekend responsibility: No, but can shadow fellow during call if requested by student
M85 870 PSYCHIATRIC ONCOLOGY
Instructor(s): Dan Haupt, MD, 362-2469
Location: Room 4405A, Renard Building
Elective Contact: Tammie Repko, 362-2469
Other Information: Students should contact Tammie Repko, 362-2469, prior to the first day to coordinate meeting time/place.
Enrollment limit per period: 3
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

This elective will provide additional training related to consultation-liaison psychiatry with a special emphasis on caring for patients with cancer. The Institute of Medicine has identified the need to increase the availability of psychiatric services in the setting of cancer treatment, and this elective will allow students to gain additional experience working with inpatients and outpatients receiving treatment at Siteman Cancer Center. This elective will allow students to learn about the management of end-of-life issues and experience the satisfaction of providing comfort to patients and families via psychotherapy and pharmacology. Opportunities also exist to focus on specific conditions, such as gynecological cancers. Dr. Haupt and Marty Clarke, PA, will directly supervise students, providing a unique opportunity for individualized teaching and autonomy.

Student time distribution: Inpatient 60%, Outpatient, 30%, Conferences/Lectures 10%; Subspecialty Care 100%
Major teaching responsibility: Dan Haupt, MD, (coursemaster)
Patients seen/weekly: 12
On call/weekend responsibility: None

M85 880 SCHIZOPHRENIA PRECURSORS AND PRODROMAL STATES
Instructor(s): Angela M. Reiersen, MD, 747-6793
Location: Dr. Reiersen's office, Suite 1153-Room B, East Building and the Washington University Child and Adolescent Psychiatry Clinic at 24 S. Kingshighway (Montclair Building).
Elective Contact: Angela M. Reiersen, MD, 747-6793, reiersea@wustl.edu
Other Information: Students report to Dr. Reiersen's office, Suite 1153-Room B, East Building, 9:30 a.m. first day of elective. Contact instructor prior to rotation to confirm schedule for first day.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

This is an opportunity for trainees to gain experience in the evaluation of children, adolescents and young adults with symptoms suggestive of a schizophrenia prodrome. The rotation would center around the “First Contact Assessment Service,” which evaluates patients who show characteristics suggestive of prodromal schizophrenia. Since the full symptoms of schizophrenia are often preceded by a wide range of childhood behavioral and developmental abnormalities, this rotation would also help trainees integrate information regarding the continuity between childhood development and adult psychopathology. Trainee would observe all aspects of first contact evaluations (including semi-structured diagnostic interviews and cognitive testing), participate in multidisciplinary case conferences discussing new evaluation cases and observe follow-up clinic visits involving patients with psychotic and/or neurodevelopmental disorders. Trainee would also be required to write a literature review on a topic relevant to the rotation.

Student time distribution: Outpatient 50%, Conferences/Lectures 50%; Subspecialty Care 100%
Major teaching responsibility: Coursemaster and/or psychiatry attending
Patients seen/weekly: 4
On call/weekend responsibility: None

M85 889 INTERVENTIONAL PSYCHIATRY
Instructor(s): Charles Conway, MD, Nuri Farber, MD, Michael Jarvis, PhD, MD, Jose Mathews MD, Yvette Sheline MD, Dragan Svrakic PhD, MD, Charles Zorumski MD, and ECT staff
Location: Barnes-Jewish Hospital, South Campus
Elective Contact: Charles Conway, MD, 362-1816
Interventional psychiatry involves the application of ECT (electroconvulsive therapy), rTMS (repetitive transcranial magnetic stimulation) and VNS (vagus nerve stimulation) in the treatment of medication-resistant psychiatric illness. The student will participate in the evaluations of patients referred to the Treatment Resistant Depression Clinic supervised by Dr. Charles Conway. The student will be involved in the neuropsychiatric assessment of patients referred for ECT. In addition, the student will receive training in the application of ECT and in the clinical management of patients receiving inpatient and outpatient ECT. As cases become available, the student will be involved in rTMS and VNS evaluations and treatment. The student will be encouraged to review appropriate literature and make clinically relevant case-oriented presentations. The student will be expected to write a review of a self-selected clinic topic relevant to interventional psychiatry.

As advances in the field occur, the rotation may also involve exposure to individuals receiving other modalities of intervention, including deep brain stimulation (DBS) and magnetic seizure therapy (MST).

Student time distribution: Inpatient 70%, Outpatient 20%, Conferences/Lectures 10%; Subspecialty Care 100%
Major teaching responsibility: Charles Conway, MD
Patients seen/weekly: 20
On call/weekend responsibility: None

Research

(M85 900)

Andrey Anokhin, Ph.D., Central Institute for the Deaf (CID) Building, Suite 1, 660 S. Euclid Ave, 286-2201, andrey@wustl.edu. Genetics of brain function and behavior. This research elective is intended for students interested in cognitive neuroscience, biological psychology, psychophysiology and behavior genetics. Dr. Anokhin’s laboratory is investigating relationships between genes, brain and behavior in order to better understand individual differences in cognition, emotion and risk for mental disorders. Our main focus is on studying the determinants and consequences of addiction. We are particularly interested in the genetic and neurobiological bases of traits associated with addiction risk such as impulsivity, risk taking and abnormal affective processing of social-emotional information. In our laboratory-based studies with human volunteers, including twins, we investigate individual differences in brain activity using the recording of brain waves (event-related brain potentials, or ERPs) during the performance of different behavioral tasks. A subsample of our twin subjects also undergoes functional magnetic resonance imaging (fMRI) scanning. Other assessments used in the lab include psychiatric diagnostic interviews, personality questionnaires, neuropsychological tests and collection of DNA samples. For example, the ongoing longitudinal study of adolescent twins explores developmental trajectories and genetic determinants of brain activity related to inhibitory control of behavior and processing of emotional information in order to identify prospective predictors of substance abuse and associated behavioral problems. Another twin study investigates the consequences of heavy drinking during adolescence by comparing neurocognitive functioning in twins who are discordant for past alcohol use. Interested students will be able to learn a variety of methods used in these studies, such as the recording and analysis of brain oscillations (EEG), cognitive ERPs, startle response, and autonomic measures, administration of neuropsychological and behavioral tests, and statistical analysis of data. Format of this research elective may include: (1) directed reading; (2) participation in laboratory experiments with human subjects; (3) analysis of existing data from a variety of past and ongoing research projects; (4) designing and piloting new behavioral tests and ERP experiments. Qualifications: Reliability and responsibility, ability to commit specified amount of time per week and work on schedule which can be negotiated on an individual basis, good computer skills, and willingness to obtain short training and certification in ethical issues related to human studies.

Deanna M. Barch, Ph.D., 6612 Renard Hospital, 747-2160. Cognitive and Affective Neuroscience of
Schizophrenia and Depression. Students may participate in the conduct of clinical studies of schizophrenia and depression. Involvement in clinical studies can include training and experience in interviewing psychiatric patients or gaining experience in the techniques of assessing cognitive and emotional function using behavioral and brain imaging methods.

Laura Jean Bierut, M.D., Maternity Hospital, 362-3492. This research elective will focus on analyzing data from high-risk studies of addiction. Substance-dependent individuals were recruited from chemical dependency treatment centers and their relatives were interviewed. Students will have the opportunity to examine family and environmental factors that place some at risk for developing alcohol and other substance dependence and protect others from the development of these disorders.

Kevin J. Black, M.D., 4525 Scott Ave., Room 2106, 362-5041, Kevin@wustl.edu. Students will participate in ongoing studies of brain imaging, movement disorders or neuropsychiatric illnesses. Degree of participation will relate to the student’s available research time, skills and interest. See www.nil.wustl.edu/labs/kevin for examples of past research.

Alison Goate, D.Phil., ninth floor, BJC Institute of Health, 362-8691. Genetic studies of Alzheimer’s disease. Studies can involve laboratory-based projects on the genetics or cell biology of Alzheimer’s disease or clinical studies involving the collection of data through telephone or personal interview of individuals with a family history of dementia.

Ginger E. Nicol, M.D., 4412 Renard Building, 362-5939. Clinical research concerning substrate (glucose and lipid) metabolism and the regulation of weight and body composition in persons with mental illness, particularly concerning the effect of psychotropic medications. Additional projects include the analysis of large administrative data sets with respect to clinical prescribing and monitoring practices in antipsychotic-treated individuals, as well as the examination of clinical and cost effectiveness of novel service delivery paradigms to minimize medical comorbidity in mentally ill populations. This elective offers the student a broad exposure to clinical research protocols, including protocols in adults and children. Students will have an opportunity to focus on a particular project of interest.

Rumi Kato Price, Ph.D., M.P.E.*, Kathleen B. Bucholz, Ph.D., M.P.E., Arpana Agrawal, Ph.D., Anne Glowinski, M.D., M.P.E., Rick Grucza, Ph.D., M.P.E., Michael Lynskey, Ph.D., Alexandre Todorov, Ph.D. (*program contact). 4560 Clayton Rd., Central Institute for the Deaf Building, 286-2282. The Psychiatric and Behavioral Sciences Concentration, an integral component of the Master of Population Health Sciences (MPHS) accredited in WUSM, offers didactic course work and independent study programs taught by Psychiatry faculty members. This concentration provides clinician-researchers, postdoctoral fellows, and advanced medical and other graduate students with strong conceptual and methodological skills required for the design, advanced analysis and interpretation of epidemiological and treatment-effectiveness studies. With an emphasis on a clinical approach to psychiatric and addiction health research, training focuses on in-depth understanding of disease phenotypes, pathobiology and developmental trajectories; understanding the underlying biological and environmental factors and their interactions; understanding the role of psychiatric epidemiology in disease prevention and intervention; and evaluating psychiatric clinical treatment and management programs of psychopathology. A student has an option of applying for an MPHS degree program or taking appropriate courses as part of his/her training or academic program. A total of 18 credits is needed for this concentration for a matriculated student. Currently available courses include:

(1) M19 561 Epidemiology of Psychiatric Disorders across the Lifespan
Coursemaster, A. Glowinski, MD, 3 credits
This course takes an integrated developmental approach to the epidemiology, etiology and evolving nosology of psychiatric disorders. Part I lays the conceptual groundwork to understand and conduct research on psychiatric disorders and their risk factors in the general population. Part II covers disorders that are traditionally considered under the purview of child psychiatry but that have developmental consequences for adulthood. Part III covers psychiatric disorders unique in adulthood as well as those
that often emerge in adolescence or earlier. Part IV will be devoted to special and contemporary topics in psychiatric and developmental epidemiology. Discussion and instruction in the use of relevant data sets are integrated into all sections. By the end of the course, students will be expected to design and conduct basic analyses of existing psychiatric epidemiologic data.

(2) M19 562 Addictions and Addictive Behaviors
Coursemaster, M. Lynskey; 3 credits
This course provides an overview of the principles of substance-related addictions and the processes and mechanisms that underlie addiction. Students are introduced to the epidemiology and developmental course of addiction, risk and protective influences that act on the course of addiction and its adverse health consequences. Both genetic and environmental underpinnings are discussed. The impact of policy and economics is studied. Emerging addictive behaviors, effective interventions and treatment modalities are also discussed. Students will be expected to participate in class discussions, complete written assignments and present one of their written assignments via in-class presentation.

(3) Psychiatric Genetic Epidemiology
Coursemaster, A Todorov; 3 credits
This course provides an in-depth introduction to psychiatric genetic epidemiology, with a particular emphasis on the relevant methodology, study design and interpretation. This course is an introduction and assumes only basic knowledge of genetics or statistics on the part of the student. The course examines further details on genetics of several major psychiatric disorders examined in other courses in the PHB concentration. The course format consists of class presentations, question and answer sessions; it concludes with student paper submission.

(4) Independent Study
Format and credit numbers vary, depending on the fellow or student’s competency needs.

Rumi Kato Price, Ph.D., M.P.E., 4560 Clayton Rd., Central Institute for the Deaf Building, 286-2282. The students and postdoctoral fellows will work closely with Dr. Price and her collaborators on ongoing research projects in substance abuse, psychiatric epidemiology and human-genome epidemiology. The current projects include: a longitudinal study assessing the impact of war experience and trauma spectrum disorder (posttraumatic stress disorder (PTSD), mild-traumatic brain injury (mTBI), substance abuse) on National Guard service members and their families after service members’ deployment to Iraq and Afghanistan; prevention and intervention programs on this and other veteran populations; a 30-year longitudinal study of the impact of drug abuse and war trauma, PTSD and suicidality; epidemiology and human-genome epidemiology studies focusing on models for substance abuse and psychiatric disorder comorbidity using private and public domain large databases; and epidemiologic applications of highly-flexible computational techniques to improve predictive modeling and to identify interactions of risk and protective factors. Other opportunities include working with associated faculty members through the pre- and postdoctoral training for NIDA T32 drug abuse epidemiology, services and prevention program; working with WUSM investigators with a joint appointment with the VA, in the St. Louis VA Medical Center, Health Services Research & Development group.

Yvette Sheline, M.D., Renard 1115, East Building 2204, 362-8422. Neuroimaging, Depression and Affective Neuroscience. Students have the opportunity to participate in clinical studies of depression and post-traumatic stress disorder. Students may choose to receive training and experience in interviewing patients, assessing patient cognitive and emotional function through behavioral testing or techniques of assessing brain functions through neuroimaging studies. In addition, students may participate in ongoing studies measuring 3D striatal brain differences in late-life depression.

NOTE TO STUDENTS: There are always a number of research projects in the Department of Psychiatry. For additional information contact Dr. Rubin, 362-2462.

Faculty
Charles F Zorumski, MD  Head of the Department of Psychiatry
Arpana Agrawal, PhD  Assistant Professor of Psychiatry
Aqeeb Ahmad  Instructor in Clinical Psychiatry
Dale J Anderson, MD  Instructor in Clinical Psychiatry
Richard H Anderson, MD, MS, PHD  Instructor in Clinical Psychiatry
Andrey P Anokhin, MS, PHD  Associate Professor of Psychiatry
Scott J Arbaugh, MD  Instructor in Clinical Psychiatry
Ahmad Beheshti Ardekani, MD  Assistant Professor of Clinical Psychiatry
Victoria Brooke Ayden, MD  Instructor in Psychiatry
Michael Roman Banton, MD  Instructor in Clinical Psychiatry (Child Psychiatry)
Ronald Beach, MD  Instructor in Clinical Psychiatry
Andrew Curry Belden, MS  Research Instructor in Psychiatry
Savita Bhat, MS, MS1  Instructor in Clinical Psychiatry
Laura J Bierut, MD  Professor of Psychiatry
Monica E. Bishop  Assistant Professor of Psychiatry
Kevin J. Black, MD  Professor of Psychiatry
Donald David Bohnenkamp, MD  Instructor in Psychiatry
Kelly N Botteron, MD  Professor of Psychiatry (Child Psychiatry)
Gary Boxer, MD  Associate Professor of Psychiatry (Child Psychiatry)
Susan Kathleen Boyer, MD  Instructor in Clinical Psychiatry
Allyson Boyle, MD  Instructor in Clinical Psychiatry
Robert Harry Brady, MD  Adjunct Instructor in Psychiatry (Child Psychiatry)
Robert Harry Brady, MD  Instructor in Clinical Psychiatry (Child Psychiatry)
Peter Anthony Brawer, MA, PHD  Instructor in Clinical Psychiatry
Steven E. Bruce, MA, PHD  Visiting Assistant Professor of Psychiatry
Tony Wayne Buchanan, MA, PHD  Adjunct Asst Professor of Psychiatry
Kathleen K Bucholz, MS, MS1, PHD  Professor of Psychiatry
Joan Rachel Butcher  Instructor in Clinical Psychiatry
James Byrd, MD  Instructor in Clinical Psychiatry (Child Psychiatry)
Joshua W. Calhoun, MD  Instructor in Clinical Psychiatry (Child)
Wilma J. Calvert, BN, MSN, PHD  Adjunct Instructor in Psychiatry
Robert Michael Carney, MS, PHD  Professor of Psychiatry
Patricia A Cavazos-Rehg, PHD  Research Assistant Professor of Psychiatry
Mina Charepoo, MD  Instructor in Clinical Psychiatry
Li-Shiun Chen, M PH, MD, PHS  Assistant Professor of Psychiatry
Zhoufeng Chen, MS, PHD  Professor of Psychiatry
Vesselin M. Chorbov, MS, PHD  Research Assistant Professor of Psychiatry
Theodore J Cicero, MS, PHD  Professor of Neuropharmacology in Psychiatry
Theodore J Cicero, MS, PHD  Vice Chairman for Research, Department of Psychiatry
William W Clendenin, MD Assistant Professor of Clinical Psychiatry
C. Robert Cloninger, MD Professor of Psychiatry
David M Conner, MD Instructor in Clinical Psychiatry
John Nicholas Constantino, MD Blanche F Ittleson Professor of Psychiatry (Child Psychiatry)
Charles Richard Conway, MD Associate Professor of Psychiatry
Linda B Cottler, M PH, PHD Adjunct Professor of Psychiatry
Catherine E. Creeley, MA, PHD Research Instructor in Psychiatry
Lucia del Pilar Cristancho Pimiento, MD Assistant Professor of Psychiatry
Jack L Croughan, MD Associate Professor of Clinical Psychiatry
Carlos Cruchaga, MA, PHD Assistant Professor of Psychiatry
Alejandro M Datuin, AA, MD Assistant Professor of Clinical Psychiatry (On Staff at Malcolm Bliss Mental Health Center)
Mary A Davis, MD Assistant Professor Emeritus of Clinical Psychiatry
Jon Todd Dean, MD Instructor in Clinical Psychiatry
Paul Dewald, MD Assistant Professor of Clinical Psychiatry
Plaridel C Deza, MD Assistant Professor of Clinical Psychiatry (On Staff at Malcolm Bliss Mental Health Center)
Brienne Marie Disabato, MD Assistant Professor of Psychiatry
James Earl Edwards, MD Assistant Professor of Clinical Psychiatry (Child Psychiatry)
Nuri Bradford Farber, MD Professor of Psychiatry
Beverly J. Field, B MUS, M MUS, PHD Associate Professor of Psychiatry
Cynthia Florin, MD Instructor in Clinical Psychiatry
Kenneth E Freedland, MA, PHD Professor of Psychiatry
Darrin Friesen, MD Instructor in Clinical Psychiatry
Michael S Gaffrey, PHD Instructor in Pyschiarty
Nick S. Garg, Instructor in Clinical Psychiatry (Child Psychiatry)
Marcie Epstein Garland, Instructor in Psychiatry
Dawn Lee Garzon, Adjunct Instructor in Psychiatry
Fred W Gaskin, MD Associate Professor of Clinical Psychiatry
Luis Giuffra, MD, MS, PHD Associate Professor of Clinical Psychiatry
Anne L Glowinski, MD, MS Professor of Psychiatry (Child Psychiatry)
Dehra Anne Glueck, MD Assistant Professor of Psychiatry (Child Psychiatry)
Alison Goate, PHD Professor of Genetics in Psychiatry
David Goldmeier, MD Instructor in Clinical Psychiatry
Julia D. Grant, MA, PHD Research Associate Professor of Psychiatry
Richard Grucza, MS, PHD Assistant Professor of Psychiatry
Dong Hyun Han, Visiting Instructor in Psychiatry
Melissa A. Harbit, MD Associate Professor of Psychiatry
Michael P. Harms, BE, PHD Research Assistant Professor of Psychiatry
Sarah McConnell Hartz, MD, PHD Assistant Professor of Psychiatry
Steven Arthur Harvey, MD Instructor in Clinical Psychiatry
Andrew C Heath, PHD Spencer T. Olin Professor of Psychology in Psychiatry
Tamara G Hershey, PHD  Professor of Psychiatry
Frederick G Hicks, MD  Assistant Professor of Clinical Psychiatry
Claudia A Hilton, MBA, PHD  Assistant Professor of Psychiatry
Sheldon G Holstad, PHD, PHS  Assistant Professor of Clinical Pharmacy in Psychiatry (On Staff at Jewish Hospital and St Louis College of Pharmacy)
Barry Allen Hong, MDI, PHD  Professor of Psychiatry
Barry Allen Hong, MDI, PHD  Vice Chairman for Clinical Affairs, Department of Psychiatry
Linda S Horne, MD  Instructor in Clinical Psychiatry
Richard W Hudgens, MD  Professor of Psychiatry
Yukitoshi Izumi, MD, PHD  Research Professor of Psychiatry
Aleksandar Janca, MD  Adjunct Professor of Psychiatry
Michael R Jarvis, MD, MS, PHD  Professor of Psychiatry
Michael R Jarvis, MD, MS, PHD  Vice Chairman for Clinical Affairs, Department of Psychiatry
Mark C. Johnson, MD  Associate Professor of Clinical Psychiatry
La Rhonda Jones  Instructor in Clinical Psychiatry (Child Psychiatry)
Wajiha Parveen Karatela  Instructor in Clinical Psychiatry (Child)
Saaid Khojasteh, MD  Assistant Professor of Clinical Psychiatry
Neha Navsaria Kirtane, MA, PHD  Instructor in Psychiatry (Pending Dean's Approval)
Valerie S. Knopik, MA, PHD  Adjunct Assistant Professor of Psychiatry
Maria Kovacs  Visiting Professor of Psychiatry
Sean D. Kristjansson, MS, PHD  Research Instructor in Psychiatry
Suzanne Nicole L'Ecuyer  Instructor in Clinical Psychiatry (Child Psychiatry)
Eric J Lenze, MD  Professor of Psychiatry
Shannon N Lenze, MA, PHD  Assistant Professor of Psychiatry
F. Timothy Leonberger, MS, PHD  Instructor in Clinical Medical Psychology in Psychiatry (On Staff at Malcolm Bliss Mental Health Center)
Christina Lessov-Schlaggar, PHD  Research Assistant Professor of Psychiatry
Collins E Lewis, M PH, MD  Associate Professor Emeritus of Psychiatry
Penelope Alathea Lind  Adjunct Instructor in Psychiatry
Jay L Liss, MD  Associate Professor of Clinical Psychiatry
Joan L Luby, MD  Professor of Psychiatry (Child Psychiatry)
Philip A Ludbrook, MBBS  Professor of Psychiatry
Patrick Joseph Lustman, MSW, PHD  Professor of Psychiatry
Michael T. Lynskey, MS, PHD  Professor of Psychiatry
Colin Mackenzie  Instructor in Clinical Psychiatry
Pamela A Madden, MS, PHD  Professor of Psychiatry
Virgil Lee Malmberg, MD, MS  Instructor in Clinical Psychiatry
Daniel T. Mamah, MD  Assistant Professor of Psychiatry
Nicholas Gordon Martin  Adjunct Instructor in Psychiatry
Jose Mathews, MD  Assistant Professor of Psychiatry
Thomas F Richardson, MD Professor of Psychiatry
William M Riedesel II, MD Associate Professor of Clinical Psychiatry
Stephen L. Ristvedt, MA, PHD Associate Professor of Psychiatry
Syed T Rizvi Assistant Professor of Clinical Psychiatry (Child Psychiatry)
John Deno Rogakos, MD Instructor in Clinical Psychiatry (Child Psychiatry)
Cynthia E Rogers Instructor in Psychiatry
John W Rohrbaugh, PHD Professor of Psychiatry
Eugene Harold Rubin, MD, PHD Professor of Psychiatry
Eugene Harold Rubin, MD, PHD Vice Chairman for Education, Department of Psychiatry
James Rutherford, MD Assistant Professor Emeritus of Clinical Psychiatry
Jo-Ellyn M Ryall, MD Associate Professor of Clinical Psychiatry
Frank Scott Saccone, PHD Research Assistant Professor of Psychiatry
Marcel T Saghiri, MD Professor of Psychiatry
Berette A Salazar, MD Assistant Professor of Clinical Psychiatry
Carolyn E. Sartor, MS, PHD Adjunct Assistant Professor of Psychiatry
Norman Sartorius Adjunct Professor of Psychiatry
Gregory Stephen Sayuk, MD Assistant Professor of Psychiatry
Lawrence M. Scheier Adjunct Professor of Psychiatry
Jeffrey Frank Scherrer, PHD Research Associate Professor of Psychiatry
Jeffrey I Schulman, MBA, MD Instructor in Clinical Psychiatry (Child Psychiatry)
Earl R Schultz, MD Associate Professor of Clinical Psychiatry
Adelita Segovia Langley Instructor in Clinical Psychiatry (Child Psychiatry)
Paul W Sheffner, MD Assistant Professor of Clinical Psychiatry
Yvette I Sheline, MA, MD Professor of Psychiatry
Barbara Sue Silverstein, MSW, PHD Assistant Professor of Clinical Psychiatry (Child Psychiatry)
Nathan M Simon, MD, MS Professor Emeritus of Clinical Psychiatry
Reed Earl Simpson, MD Assistant Professor of Clinical Psychiatry
Erik J Sirevaag, MA, PHD Research Assistant Professor of Psychiatry
Stacey L Smith, MD Assistant Professor of Clinical Psychiatry
Timothy Eric Spiegel Instructor in Psychiatry (Child Psychiatry)
Wayne A Stillings, MD Assistant Professor of Clinical Psychiatry
Catherine Striley Adjunct Assistant Professor of Psychiatry
Brian K Suarez, MA, PHD Professor of Psychiatry
Yun Ju Sung, PHD Research Assistant Professor of Psychiatry
Jagdish C Suri, MD Assistant Professor of Clinical Psychiatry (Child Psychiatry)
Vinod Suri Instructor in Clinical Psychiatry (Child Psychiatry) (Full-Time at Hawthorn Children's Psychiatric Hospital)
Dragan M Svrakic, MD, PHD Professor of Psychiatry
Mini Tandon, MD Assistant Professor Psychiatry (Child Psychiatry)
Alexandre Todorov, M Ed, PHD Research Professor of Psychiatry
William R. True, M PH, MA, PHD Adjunct Professor of Psychiatry
Dorothy J. Van Buren , PSYD Assistant Professor of Psychiatry
Michele Van Eerdewegh , MD Instructor in Clinical Psychiatry
Jeffrey A. Vander Kooi , MD Instructor in Clinical Psychiatry
Garry M. Vickar Instructor in Clinical Psychiatry
Erin Foster Voegtli , OTD Assistant Professor of Psychiatry
Mary C. Waldron , PHD Adjunct Assistant Professor of Psychiatry
Sarah Walker , MD Instructor in Clinical Psychiatry
Jen-Chyong Wang , MS, PHD Research Assistant Professor of Psychiatry
Reuben R Welch II, M ED, PHD Assistant Professor of Psychiatry
Zila Welner , MD Associate Professor of Clinical Psychiatry (Child Psychiatry)
John Bair Whitfield Adjunct Instructor in Psychiatry
Denise Wilfley , PHD Professor of Psychiatry
Matthew Stewart Wilson Instructor in Clinical Psychiatry
Edwin D Wolfgram , MD Assistant Professor of Clinical Psychiatry
Fay Yeh Womer , MD Assistant Professor of Psychiatry
David F Wozniak , MA, PHD Research Professor of Psychiatry
Christopher Wuertz , MD Assistant Professor of Clinical Psychiatry
Sean H Yutzy Adjunct Professor of Clinical Psychiatry
Charles F Zorumski , MD Samuel B. Guze Professor of Psychiatry

Department’s Website
http://www.psychiatry.wustl.edu/

Department of Radiation Oncology

The Department of Radiation Oncology was created on July 1, 2001, having been part of the Mallinckrodt Institute of Radiology for many years. The department has a broad academic program that focuses on excellence in patient care and the development of new treatment paradigms; innovative research in each of the four divisions of clinical, physics, biology and bioinformatics; and teaching for residents in radiation oncology, medical students and allied health personnel. The department is one of the largest, most academically balanced and best equipped in the country, and is responsible for all radiation therapy procedures at Washington University Medical Center. Our faculty has gained international recognition for innovative technological advances in physics and treatment planning, biological research, computer applications and clinical investigation.

Milestones
- demonstration of a hypoxic subpopulation in tumors in vivo
- demonstrated the importance of the cell cycle in the sensitivity to ionizing radiation
- customized (Cerrobend) shielding system to protect normal tissues during irradiation
- design and construction of the first small dedicated computer for radiation therapy treatment planning
- in collaboration with Varian Associates and NCI, design and construction of the first generation of high-energy, dual-modality, multiple-energies linear accelerator (Clinac 35)
- development of three-dimensional radiation therapy treatment planning and delivery systems
- clinical applications of 3-D conformal and intensity-modulated radiation therapy
- use of multiple imaging modalities in treatment planning in radiation therapy, including CT, PET and MRI scanning
• implementation of novel respiratory gating algorithms
• development of biomarkers of DNA repair capacity of tumors
• demonstrated the use of Proton Therapy

The Department of Radiation Oncology currently occupies a large, attractive and convenient clinical facility on the lower level of the Center for Advanced Medicine. The clinical facilities include nine linear accelerator rooms, four simulator rooms and a brachytherapy center with two high dose-rate treatment units. Furthermore, the facility houses the latest Gamma Knife unit, called Perfexion, which is operated in collaboration with HealthSouth Corporation. We have advanced treatment planning computer systems for 3-D conformal and intensity-modulated radiation therapy. We have four linear accelerators with on-board CT imaging capability. The brachytherapy suite includes capability for high dose-rate remote afterloading and for image-guided permanent prostate seed implants. Interstitial and external hyperthermia treatments are also available. Plans are in progress for the installation of a new type of proton treatment facility, using a miniaturized cyclotron mounted on a gantry.

The Physics faculty and the Bioinformatics group have research laboratories and offices on the fourth floor of the Clinical Sciences Research Building plus designated areas adjacent to the clinical facility in the CAM building. The Radiation Biology laboratory and faculty offices are housed at the 4511 Forest Park Building, where there has been a significant expansion of biology research space.

Courses

Third Year

**M90 740 RADIATION ONCOLOGY CLERKSHIP**
Instructor: Joseph R. Simpson, MD, PhD, 362-8567
The four-week clerkship in radiation oncology will provide students with an introduction to the evaluation and management of a broad range of patients referred for consultation regarding radiation therapy. Clerkship activities will take place within the Barnes-Jewish Hospital/Siteman Cancer Center complex, Christian Hospital and Barnes-Jewish West County Hospital. Students will conduct inpatient and outpatient evaluations under the supervision of radiation oncology department residents and faculty. Students will also attend and participate in regularly scheduled departmental conferences at noon Monday through Wednesday and 8 a.m. on Friday. Students will also have the opportunity to attend the appropriate multidisciplinary conferences (such as pediatric neuro-oncology, cardiothoracic oncology, lymphoma, GYN oncology and ENT) pertaining to their rotation schedule. Students will be given the opportunity to make a teaching case presentation and will meet weekly with the Coursemaster and/or the department Chairman for small-group case discussions.

Instructional materials are available for students on the rotation. (Students are NOT expected to purchase any curricular materials for the clerkship.) Student performance will be evaluated by faculty members who supervise the student over the course of the four-week clerkship.

Fourth Year

Elective

**M90 840 CLINICAL RADIATION ONCOLOGY**
Instructor(s): Joseph Simpson, MD, PhD, 362-8567
Location: Center for Advanced Medicine, Lower Level
Elective Contact: Joseph Simpson, MD, PhD, 362-8567
Other Information: Students should meet the chief resident in the Department of Radiation Oncology in the Siteman Cancer Center on the lower level of the Center for Advanced Medicine (CAM).
Enrollment limit per period: 3
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.
The clinical division offers an elective with emphasis on the evaluation, planning of and administration of radiation therapy in patients with malignant tumors. The students have the opportunity to enhance their knowledge on the natural history, pathological and biological features of cancer and to sharpen their clinical skills participating in the management of these patients.

Student time distribution: Inpatient 7%, Outpatient 78%, Conferences/Lectures 15%; Subspecialty Care 100%
Major teaching responsibility: Attendings, residents and staff
Patients seen/weekly: 20-35 per physician
On call/weekend responsibility: None

Research

(\textit{M90 900})

Dennis Hallahan, MD, 4511 Forest Park, Room 202, 362-9700. (1) Radiation Sensitizers: The overarching hypothesis of this research is that interruption of the signaling will improve cancer response to therapy. Inhibitors of these molecular targets are presently in development at pharmaceutical companies. We study the efficacy of specific inhibitors when combined with radiotherapy in mouse models of human cancer. (2) Radiation Protection of normal tissue: We study the mechanisms of cell death in normal tissues during cancer therapy. In particular, we have found that a signal transduction pathway required for radiation-induced apoptosis in normal tissues involves glycogen synthase kinase 3beta. GSK-3beta regulates the apoptosis machinery within normal tissues. Cancer cells do not require GSK-3beta or apoptotic machinery to respond to cancer therapy. In contrast, injuries in normal tissues such as the brain and intestine require GSK-3 signaling. We have found that inhibitors of GSK-3beta prevent injury in normal tissues. These inhibitors prevent injury to the brain and improve neurocognitive function and reduce injury in the intestine of animal models. Presently, we are studying the mechanisms by which GSK-3 inhibition prevents program cell death in normal tissues. We are also studying new drugs intended for clinical trials. (3) Targeted Drug Delivery to Cancer: We have identified several peptides and over a dozen monoclonal antibodies that bind to cancer following treatment with ionizing radiation. Using this strategy, drug delivery can be targeted specifically to cancer and guided by use of a beam of radiation therapy. These targeting ligands have been conjugated to the drug delivery systems, including liposomes and nanoparticles to improve the specificity of drug delivery of cancer. We collaborate extensively with pharmaceutical companies to target drug delivery to mouse models of human cancer. (4) Immunotherapy: We characterize the immunological response of antibodies targeted by radiation. These monoclonal antibodies bind to radiation inducible neo-antigens. These antibodies can activate immune response. In addition, therapeutic agents are conjugated to the antibodies to provide cancer-specific drug delivery. Identification of radiation inducible neo-antigens involves the co-precipitation of antigens from cancer by use of monoclonal antibodies. Antigens are then identified by use of proteomic technology. Humanization of these mouse monoclonal antibodies is performed with the goal of bringing antibodies into clinical trials.

Jeff Michalski, MD, Radiation Oncology, Clinical Division, 362-8566. Broad range of opportunities for investigation in: (1) prognostic factors and therapy outcome in a variety of patients with cancer; (2) three-dimensional treatment conformal and intensity-modulated radiation therapy in the treatment of patients with head and neck, lung, pancreas, rectal or prostate cancer.

Faculty

\textbf{Dennis E Hallahan}, MD Head of the Department of Radiation Oncology
\textbf{Michael Bernard Altman}, PHD Instructor in Radiation Oncology
\textbf{Abdelkareem Azab}, PHD Assistant Professor of Radiation Oncology
\textbf{Kathy Baglan}, PHD Instructor in Clinical Radiation Oncology
Charles D Bloch, MS, PHD Associate Professor of Radiation Oncology
Walter R Bosch, BE, MS, PHS Research Associate Professor of Radiation Oncology
Jeffrey D Bradley, MD S. Lee Kling Professor of Radiation Oncology
David T Curiel, MD, PHD Distinguished Professor of Radiation Oncology
Venkata Rao Devineni, MD Associate Professor of Clinical Radiation Oncology
Robert E Drzymala, PHD Professor of Radiation Oncology
Jacqueline Esthappan, PHD Associate Professor of Radiation Oncology
Seymour Fox, MS, PHD Instructor in Radiation Oncology
Jose L Garcia, MS Assistant Professor of Radiation Oncology
Hiram Alberto Gay, MD Assistant Professor of Radiation Oncology
Sreekrishna M Goddu, MS, PHD Associate Professor of Radiation Oncology
Olga Leonidovna Green, MS, PHD Instructor in Radiation Oncology
Perry W Grigsby, MBA, MD, MS Professor of Radiation Oncology
Lannis E Hall-Daniels, M PH, MD Assistant Professor of Clinical Radiation Oncology
Dennis E Hallahan, MD Elizabeth H and James S McDonnell III Distinguished Professor of Medicine
Dennis E Hallahan, MD Professor of Radiation Oncology
Yanle Hu, MS, MS1, PHD Assistant Professor of Radiation Oncology
Jiayi Huang, MD Assistant Professor of Radiation Oncology
Enrique Wilmar Izaguirre, MS, PHD Assistant Professor of Radiation Oncology
Jerry Jeff Jaboin, MD, PHD Assistant Professor of Radiation Oncology
Rojano Kashani, MS, PHD Instructor in Radiation Oncology
Eric E. Klein, MS, PHD Professor of Radiation Oncology
Andrei Laszlo, MS, PHD Associate Professor of Radiation Oncology
Hua Li, PHD Assistant Professor of Radiation Oncology
Hui Li, MS, PHD Assistant Professor of Radiation Oncology
Hsiu-San Lin, MD, PHD Professor Emeritus of Radiation Oncology
Muhammad Saleem Mahmood, MD Instructor in Clinical Radiation Oncology
John W Matthews, D SC, MEE Research Associate Professor of Radiation Oncology
Jeff Michael Michalski, MBA, MD Carlos Perez Distinguished Professor of Radiation Oncology
Jeff Michael Michalski, MBA, MD Vice Chairman of Radiation Oncology
Sasa Mutic, MS, PHD Professor of Radiation Oncology
Robert J Myerson, MD, PHD Professor Emeritus of Radiation Oncology
Oscar D. Norton, MD Instructor in Clinical Radiation Oncology
Jeffrey Robert Olsen, MD Assistant Professor of Radiation Oncology
Parag J. Parikh, MD Assistant Professor of Radiation Oncology
Stephanie Mabry Perkins, MD Assistant Professor of Radiation Oncology
James Vernon Piephoff, MD Instructor in Clinical Radiation Oncology
James A Purdy, MA, PHD Adjunct Professor of Radiation Oncology
Gary A Ratkin, MD Instructor in Clinical Radiation Oncology
Keith M Rich, MD Professor of Radiation Oncology
Susan Lynn Richardson, MS, PHD, Assistant Professor of Radiation Oncology
Clifford Grant Robinson, MD, Assistant Professor of Radiation Oncology
Buck Edward Rogers, MA, PHD, Professor of Radiation Oncology
Tapan Roy, MS, Instructor in Clinical Radiation Oncology
Lakshmi Santanam, MS, PHD, Assistant Professor of Radiation Oncology
Julie K Schwarz, MD, PHD, Assistant Professor of Radiation Oncology
Chirag Sudhir Shah, MD, Assistant Professor of Radiation Oncology
Girdhar G Sharma, MS1, Research Instructor in Radiation Oncology
Joel Rahman Simmons, MD, Assistant Professor of Radiation Oncology
Joseph Rogers Simpson, MD, PHD, Professor of Radiation Oncology
William L Straube, MEE, Research Associate Professor of Radiation Oncology
Wade L Thorstad, MD, Associate Professor of Radiation Oncology
Dinesh Thotala, MS, PHD, Research Instructor in Radiation Oncology
Hideyo Ugai, MS, PHD, Research Instructor in Radiation Oncology
Bruce J Walz, MD, Associate Professor of Clinical Radiation Oncology
Xiaowei Wang, PHD, Assistant Professor of Radiation Oncology
Hasani Omar Wooten, MS, PHD, Instructor in Radiation Oncology
Heping Yan, MD, MS, Research Assistant Professor of Radiation Oncology
Deshan Yang, MS, PHD, Assistant Professor of Radiation Oncology
Qin Yang, MD, PHD, Associate Professor of Radiation Oncology
Tianyu Zhao, MS, PHD, Instructor in Radiation Oncology
Imran Zoberi, MD, Associate Professor of Radiation Oncology

Department's Website

http://radonc.wustl.edu/

Department of Radiology

The Edward Mallinckrodt Institute of Radiology (more commonly known as Mallinckrodt Institute of Radiology or MIR) serves as the Department of Radiology for Washington University in St. Louis School of Medicine, helping to guide the consulting physician in the discovery, treatment and, ultimately, the healing of disease. Established in 1930, MIR is one of the largest and most scientifically sophisticated radiology centers worldwide.

Internationally recognized for its groundbreaking research, the Institute continues to pioneer new radiological techniques for better patient care.

Milestones
- development of the first diagnostic test for gallbladder disease
- design and construction of the first cross-sectional X-ray laminagraph
- collaboration on design and installation of the first cyclotron located in a U.S. medical center
- development of positron emission tomography (PET)
- installation of one of the world’s first computed tomography (CT) and magnetic resonance (MR) scanners
• interfacing of a minicomputer with a gamma camera, improving accuracy and efficiency of nuclear medicine procedures
• establishment of the first mobile mammography van west of the Mississippi River
• integration of CT and MR scans with three-dimensional technology
• application of organic chemistry to the preparation of radiopharmaceuticals used in medical imaging
• measurement of cerebral blood flow and metabolism
• establishment of one of the largest, most comprehensive interventional radiology services in the United States
• application of PET for measuring metabolic activity in relation to cardiac blood flow

The Institute occupies more than 400,000 total square feet, comprising its own 12-story building, with satellite facilities in Barnes-Jewish and St. Louis Children’s hospitals; the Clinical Sciences Research and East buildings; the Scott Avenue Imaging Center; the Center for Advanced Medicine; and the Knight Emergency and Trauma Center. The department provides diagnostic radiology, nuclear medicine and radiation physics services for all hospitals in the Washington University Medical Center, Barnes-Jewish West County and Barnes-Jewish St. Peters hospitals. The Institute provides diagnostic radiology for the Washington University Orthopedics and Barnes-Jewish Hospital Outpatient Orthopedic center.

MIR clinical facilities are on the second floor of the Institute (general diagnostic radiology); third floor (neuroradiology); fourth floor (gastrointestinal and genitourinary radiology, and ultrasonography); and the fifth floor (MRI). A comprehensive interventional radiology center occupies the eighth floor. Nuclear medicine is on the ninth floor of the Barnes-Jewish Hospital West Pavilion. Orthopaedic imaging and musculoskeletal radiology services are on the sixth floor of the Center for Advanced Medicine. The Breast Health Center, on the fifth floor of the Center for Advanced Medicine, is a multidisciplinary facility that provides a full range of breast imaging services and interventional procedures. In the north wing of St. Louis Children’s Hospital is a complete pediatric radiology facility, offering ultrasound, nuclear medicine, CT and MRI.

The Institute has 102 examination rooms used for diagnostic radiology. Clinical and research equipment includes two PET/CT scanners, 13 CT scanners, two PET scanners, 15 MR scanners (including an 11.7-Tesla research scanner), 12 high-end ultrasound machines plus seven portable units, nine interventional radiology systems, five digital chest units, 10 computer radiography units, two neurointerventional radiology systems and six mammography units. In addition, as part of the department’s community outreach effort, the Institute cosponsors with the Alvin J. Siteman Cancer Center a mobile mammography van that provides screening services at corporate and public sites in the St. Louis area.

MIR has approximately 200,000 square feet devoted to research, with facilities in the Clinical Sciences Research Building (radiological sciences), in the East Building (electronic radiology), in the Scott Avenue Imaging Center (neurological PET, molecular pharmacology, biomedical MR imaging, optical imaging and cardiovascular imaging), and in the Center for Clinical Imaging Research (a bioimaging facility for basic and translational inpatient and outpatient clinical research).

Administrative, teaching and support functions occupy the sixth floor and the ninth through the 12th floors of the Institute.

Courses

Catherine Appleton, MD, Coordinator of Radiology Medical Student Education; 454-7405; appletonc@mir.wustl.edu

Second Year
Course master: Catherine Appleton, MD; 454-7405; appletonc@mir.wustl.edu

Eight hours of lecture are devoted to an introduction to radiology. The majority of the course is devoted to diagnostic radiology, including conventional radiography, computed tomography, ultrasound, nuclear
Third Year

M90 701 GENERAL RADIOLOGY CLERKSHIP
Coursemasters: Michelle Miller-Thomas, MD, 362-5949, thomasm@mir.wustl.edu, Matthew Parsons, MD, 362-5950, parsonsm@mir.wustl.edu
Contact Person: Melissa Varner, Radiology Staff Library, 362-5139, varnerm@mir.wustl.edu

This four-week introductory radiology elective will be offered to third-year medical students. Each student will rotate through four of the following radiology services: Emergency Department, Pediatric Radiology, Cardiothoracic Imaging, Breast Imaging, Abdominal Imaging, Musculoskeletal Radiology, Neuroradiology, Nuclear Medicine and Interventional Radiology. The primary course objective is to familiarize students with the scope of diagnostic and interventional radiology, including the consulting role radiologists provide to primary care and specialty providers, risks/benefits and cost effectiveness of radiologic examinations, and guidelines for ordering common studies.

Students will report each morning for a service conference. These conferences are both case-based and didactic. Students will have a predominantly observational role in conferences, as they are principally designed for radiology resident teaching. Students will then spend mornings in the reading rooms with residents, fellows and attending radiology faculty. This time will consist of interactive teaching based on daily clinical cases. Each student will keep a log of cases they see to facilitate reading and to provide a vehicle for follow-up of interesting cases. Students will present one case of interest to their peers each Friday at 3 p.m. during the clerkship. These brief (5 to 10 minutes) presentations will be evaluated by a resident or attending radiologist.

Monday through Thursday at 3 p.m., students will meet with a designated radiology resident who will present either a didactic or case-based lecture appropriate for third-year medical student teaching.

Students will select two of their four presented cases for submission to a digital teaching file. Reading lists, references and textbooks will be provided. The first and final days of the elective are mandatory. No high honors will be awarded if a student is absent for more than five days of the rotation.

The course will accommodate four to 10 students each month. The course will not be offered if enrollment falls below four.

Fourth Year

Electives

M90 801 GENERAL RADIOLOGY
Instructor(s): Michelle Miller-Thomas, MD, 362-5949 and Matthew Parsons, MD, 362-5950
Location: Radiology Staff Library (first floor, Mallinckrodt Tower, Room 117)
Elective Contact: Missi Varner, 362-5139
Other Information: Students meet in Mini-Scarpellino, first floor, Mallinckrodt Institute of Radiology, 8 a.m. first day of elective.
Enrollment limit per period: 5
Valid start weeks for 4-week blocks are: Weeks 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41

This four-week introductory radiology elective allows students to rotate through four of the following radiology services: Emergency Radiology, Mammography, Pediatrics, Chest, Abdominal Imaging, Musculoskeletal, Neuroradiology, Interventional Radiology and Nuclear Medicine. The primary course objective is to familiarize students with the scope of diagnostic and interventional radiology including the
consulting role radiologists provide to primary care and specialty providers, risks/benefits and cost effectiveness of radiologic examinations, and guidelines for ordering common studies as well as specific disease entities and their radiologic appearance and work-up.

Students spend the majority of the day in the radiology reading rooms with residents, fellows and faculty for interactive teaching based on daily clinical cases. Students will attend morning case-based conferences and noon didactic conferences with the residents. The students will have an observational role in conferences and in the clinical setting. At 3 p.m., students will convene with a radiology resident for a didactic lecture on a scheduled topic in radiology. An image-based quiz will be given in the final week of the elective covering topics presented in the daily student didactic lectures. On Fridays at 3 p.m., students present an interesting case from the week in PowerPoint format. Two PowerPoint presentations will be submitted at the end of the rotation for grading.

Students will keep a logbook of interesting cases seen daily to provide a foundation for further reading, as well as an opportunity for clinical or radiologic follow-up of cases seen in the reading room. This log will be submitted to the course master at the end of the elective.

Students taking this elective for a second time who have a special interest in a particular area of radiology pertinent to their intended career choice may tailor their experience to focus on one or more services if desired (i.e. fourth-year student going into neurosurgery may spend up to two full weeks in neuroradiology). This will be considered on a case-by-case basis by the course master. These returning students will be expected to keep a log of cases seen but will be exempt from attending the daily afternoon teaching sessions. Returning fourth-year students will be required to present four weekly presentations with the other students in the course and take the end-of-rotation quiz. Please see the separate course listings for Nuclear Medicine and Interventional Radiology.

Reading lists, references and text books will be provided. The first and final days of the elective are mandatory. Grades are based on daily attendance, logbook, end-of-rotation quiz and PowerPoint presentations. No honors will be awarded if a student is absent for more than five days of the rotation.

Student time distribution: Inpatient 40%, Outpatient 30%, Conferences/Lectures 30%; Subspecialty Care 100%
Major teaching responsibility: Radiology Faculty, Fellows and Residents
Patients seen/weekly: N/A
On call/weekend responsibility: None

M90 820 CLINICAL NUCLEAR MEDICINE
Instructor(s): Akash Sharma, MD, 362-2809
Location: 956 West Pavilion
Elective Contact: Akash Sharma, MD, 362-2809
Other Information: Students report to 956 West Pavilion, 8 a.m. first day of elective.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41

This four-week elective will be offered to third- and fourth-year medical students. The clinical service in Nuclear Medicine is divided into five subsections: outpatient general Nuclear Medicine, in-patient general Nuclear Medicine, PET, Pediatric and Cardiac Nuclear Medicine. The recommended schedule will be to spend weeks 1 and 3 on the North Campus, where the emphasis will be on outpatient general and Pediatric Nuclear Medicine with some focused time spent in the PET reading room. Week 2 will be split between the inpatient general Nuclear Medicine and Cardiac services. Week 4 schedule will be determined after a preferences discussion with the student.

The primary objective of this rotation is to provide exposure to the full range of clinical nuclear medicine. Under direct supervision of the clinical staff, the student will be able to participate in the planning and interpreting of imaging studies for patients referred to the division. Opportunity also exists to explore instrumentation techniques, including dedicated computer applications in nuclear medicine.

In addition to the clinical experience, the student will attend the daily morning conference, held in the
Miller Conference Room in 956 West Pavilion, from 8:30 to 9:30 a.m. From noon to 1 p.m., the student will be excused to attend the daily department-wide conference. The student is not expected to do any formal presentations but may participate by preparing a case for the Friday follow-up conference. The student will also be excused to attend any conferences within the Department of Radiology, e.g. the 3 p.m. medical student didactic lectures, if desired.

Students may keep a log of interesting cases to use as a guide for additional reading or for discussions with the course master or the other staff attendings.

A textbook will be provided. The first and final days of the elective are mandatory. No honors will be awarded if a student is absent for more than five days of the rotation.

Student time distribution: Inpatient 25%, Outpatient 50%, Conferences/Lectures 25%; Subspecialty Care 100%
Major teaching responsibility: Attendings, fellows and residents
Patients seen/weekly: ~200
On call/weekend responsibility: None

**M90 830 INTERVENTIONAL RADIOLOGY**

Instructor(s): Robert Pallow, MD, 362-7877
Location: Mallinckrodt Institute of Radiology
Elective Contact: Robert Pallow, MD, 362-7877
Other Information: Students should contact Dr. Pallow to discuss meeting location and time for first day of elective.
Enrollment limit per period: 2
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41

Students will be exposed to all clinical and procedural aspects of interventional radiology including: patient evaluation and consultation, preparation of patients for procedures, performance of a wide range of vascular and nonvascular procedures, post-procedure patient management and longitudinal patient follow-up. Students will actively participate in interventional procedures. Students will attend the departmental noon conference (daily) and section conferences including didactic lectures, morbidity and mortality conference, and case conferences (3-4 times per week).

Student time distribution: Inpatient 60%, Outpatient 30%, Conferences 10%
Major teaching responsibility: Attending Interventional radiology physicians will provide the majority of teaching. Fellows and residents will provide additional teaching.
Patients seen/weekly: Approximately 150 patients per week are seen in consultation or for procedures in the south campus Interventional facility
On call/weekend responsibility: None

**Research**

*(M90 900)*

Interested students should contact the appropriate individual in each division regarding the types of research projects available.

Tom Conturo, MD, PhD, 2120 East Building, 362-8421. Magnetic resonance (MR) imaging is a noninvasive means of providing images of the human body at high spatial resolution and contrast sensitivity. The contrast can be manipulated to depend on different properties of tissue water, enabling the study of a variety of biological processes. In some cases, endogenous or exogenous paramagnetic MR contrast agents are used to alter the MRI contrast by perturbing the tissue water environment. Recently, new MRI hardware has also enabled techniques having high temporal resolution. Using the unique contrast properties of MRI and the higher spatial/temporal resolution, noninvasive techniques can be devised to study neuronal activity, tissue perfusion, water mobility (diffusion), and neuronal fiber pathways in the human brain. The goals of Dr. Conturo's research lab are to develop and apply MR
imaging techniques for quantitative imaging of cerebral perfusion, brain function, water diffusion and neuronal fiber pathways. These techniques use the MR signal effects of exogenous bolus-injected contrast agents, endogenous hemoglobin and microscopic water diffusion. Long-term goals are to apply these methodologies toward imaging and understanding tissue structure, function and physiology in the brain and other organs in normal and abnormal conditions. The approaches that are used in this laboratory cover a broad range of areas, including MRI physics, MRI pulse sequence development, theoretical derivations, computer simulations, image-processing, computer graphics, custom contrast agent design and synthesis, phantom studies, animal models, human studies, clinical patient studies and comparison with other imaging modalities.

Farrokh Dehdashti, MD, Nuclear Medicine PET Facility, 10th floor, Mallinckrodt Institute of Radiology, 362-1474. Positron emission tomography (PET) is an imaging technique that produces images reflective of biochemical processes of normal and abnormal tissues. PET is complementary to anatomic imaging modalities such as computed tomography (CT) and magnetic resonance imaging (MRI). The ability of PET to quantify fundamental processes, such as blood flow, oxygen metabolism, glucose metabolism and receptor density, makes this technique very desirable to both investigators and clinicians. Dr. Dehdashti’s research utilizes the conventional PET radiopharmaceutical, F-18 fluorodeoxyglucose (FDG), as well as a variety of unique PET radiopharmaceuticals such as Cu-64-diacetyl-bis[N4-methylthiosemicarbazone (Cu-64 ATSM), a hypoxic imaging tracer, and 18F-labeled 3'-deoxy-3'fluorothymidine (FLT), a proliferative imaging tracer. Below is a partial list of the research projects relating to PET: (1) PET assessment of progesterone receptors in patients with newly diagnosed breast cancer with a new progesterone-receptor imaging tracer, 21-[18F]Fluoro-16,17-[(R)-1'-furymethylene)dioxy]-19-norpregn-4-ene-3,20-dione (FFNP); (2) Imaging cell proliferation with FLT-PET (the major goal of this project is to assess if tumor FLT uptake before therapy or the change in tumor FLT uptake early after the start of therapy is predictive of response to therapy in patients with cervical, breast or lung cancer); (3) PET assessment of cell proliferation with a new tracer, N-(4-(6,7-dimethoxy-3,4-dihydroisoquinolin-2(1H)-yl)butyl)-2-(2-[18F]-fluorothoxy)-5-methylbenzamide ([18F]3c), also called [18F]ISO-1 by imaging sigma receptors in patients with various solid cancers; (4) PET assessment of tumor hypoxia using 64Cu-ATSM in patients with cervical cancer (the major goal of this project is to predict prognosis); (5) FDG-PET/CT study in cervical cancer to evaluate the change in tumor FDG heterogeneity and SUVmax during chemoradiation and whether these changes are predictive of response to therapy; (6) FDG-PET/CT study in indeterminate thyroid nodules to determine the role of PET in predicting malignancy.

Rob J. Gropler, MD, 1307 East Building, 747-3878. Cardiovascular Imaging Research. The research in the Cardiovascular Imaging Laboratory is designed to better understand the relationship between myocardial perfusion, intermediary metabolism and mechanical function in both normal and abnormal cardiac states. The research involves the integration of several imaging techniques with diverse strengths such as PET, MRI, CT and echocardiography. The success of the research requires several paths of investigation to be pursued in parallel. For example, in order to image the biologic processes of interest requires continued technical developments for each of the imaging methods listed above. There are ongoing efforts to permit more accurate PET measurements of myocardial substrate metabolism. They include the development of novel tracers of extracted substrates, the development of acquisition schemes to assess endogenous substrate metabolism, and the validation of mathematical approaches to correlate the tracer kinetics with the underlying metabolic processes. These studies are being pursued in small and large animal models and then in humans. Another example includes the current efforts to develop approaches to image the coronary arteries noninvasively by MRI using novel contrast agents and acquisition schemes. In addition, techniques are being developed to permit MR-guided interventions on the coronary arteries. This undertaking includes the development of novel guide-wire tracking and catheter tracking schemes using both passive and active approaches. Finally, to permit assessments of myocardial oxygenation and thus, perfusion, techniques are being developed to permit BOLD imaging the myocardium. Another path of the research is to determine how this perfusional-metabolic-functional relation is altered by normal life changes and then determine how disease states alter the relationship. For example, both PET and echocardiography are being used to characterize the age- and gender-related changes on myocardial perfusion, substrate metabolism and function. To study the relationship in disease states, similar studies are being performed in patients with diabetes and obesity. A third path to determine the mechanisms responsible for these changes in this metabolic-functional relation and
identify potential interventions that may reverse or ameliorate them. In this regard, similar imaging studies are being performed to determine the importance of nitric oxide and the PPARα system in defining this metabolic-functional relation.

Stephen M. Moerlein, PharmD, PhD, fourth floor, Clinical Sciences Research Building, 362-8466. Research interests lie in the general area of labeled tracer development for nuclear medicine imaging, especially positron-emission tomography (PET). Developmental effort begins with synthesis of target structures, preclinical screening that involves in vitro biochemistry and pharmacological testing, and ex vivo biodistribution studies in small animals. Promising tracers are then examined by in vivo imaging of animal subjects and tracer kinetic modeling. The final step in the transition of a radiochemical into a labeled drug takes into account radiation dosimetry, pharmaceutical quality and the development of automated production to streamline delivery to human subjects. Each of these aspects of radiopharmaceutical development is investigated, with a primary emphasis in novel agents for evaluation of pathological processes in neurology and oncology.

David Piwnica-Worms, MD, PhD, third floor, East Building, 362-9356. Research projects in molecular imaging are available. Molecular imaging is broadly defined as the characterization and measurement of biological processes in living animals, model systems and humans at the molecular and cellular level using remote imaging detectors such as PET, SPECT, MRI, bioluminescence, and near-infrared fluorescence. Our goal is to advance the understanding of normal biology and pathophysiology through noninvasive investigation of molecular and cellular events in vivo. Projects focus on creation, validation and use of luciferase reporters and bioluminescence imaging as well as PET reporters to investigate protein-protein interactions, signal transduction and gene expression in cancer and infectious disease, development of peptide conjugates for membrane transduction of PET, SPECT and optical contrast agents, and investigations of the transport functions of the multidrug resistance (MDR1) P-glycoprotein family of membrane transporters in cancer and Alzheimer’s disease.

Marc Raichle, MD, second floor, East Building, 362-6907. We use functional imaging techniques, both positron emission tomography and functional magnetic resonance imaging, to study the normal organization of the human brain and the effect of selected diseases. The research focuses on both the methodology (imaging and experimental) and specific questions in cognitive neuroscience.

Michael J. Welch, PhD, fourth floor, Clinical Sciences Research Building, 362-8435. Short-lived positron-emitting radionuclides such as carbon-11 and fluorine-18 can be used to trace physiologic and pharmacologic processes in humans. Tracers are being developed to probe brain receptors, tumor receptors and enzyme systems.

Faculty

R. Gilbert Jost, MD Head of The Department of Radiology
Samuel I Achilefu, PHD Professor of Radiology
Walter John Akers, DVM, PHD Assistant Professor of Radiology
Maryellen Amato, MD Instructor in Clinical Radiology
Carolyn J Anderson, PHD Adjunct Professor of Radiology
Catherine M Appleton, MD Assistant Professor of Radiology
Kyongtae T Bae, MD, ME, MS, PHD Adjunct Associate Professor of Radiology
Jonathan C Baker, MD Assistant Professor of Radiology
Dennis M Balfe, MD Professor of Radiology
Adil Bashir, MEE, PHD Research Instructor in Radiology
Tammie Lee Smith Benzinger, MD, PHD Assistant Professor of Radiology
Mikhail Y Berezin, MS, PHD Assistant Professor of Radiology
Sanjeev Bhalla, MD Professor of Radiology
Andrew J Bierhals, MD, MPH Assistant Professor of Radiology
Joelle Biernacki, MD Instructor in Radiology
Kevin J. Black, MD Professor of Radiology
Kelly N Botteron, MD Professor of Radiology
G. Larry Bretthorst, MS, PHD Research Associate Professor of Radiology
Steven L Brody, MD Professor of Radiology
Meredith S Byers, MD Assistant Professor of Radiology
Meghan Clark Campbell, PHD Research Assistant Professor of Radiology
Delphine L. Chen, AB, MD Assistant Professor of Radiology
Wenhua Chu, MS, PHD Research Instructor in Radiology
Paul Kevin Commean Research Instructor in Radiology
Lisa Tabor Connor, MA, PHD Assistant Professor of Radiology
Thomas E Conturo, MD, PHD Associate Professor of Radiology
Maurizio Corbetta, MD Professor of Radiology
Constance Stone Courtois, MD Assistant Professor of Radiology
James P Crane, MD Professor of Radiology
Dewitte T Cross III, MD Professor of Radiology
Michael G Crowley, MD, PHD Associate Professor of Radiology
Kristopher W Cummings, MD Assistant Professor of Radiology
Nirvikar Dahiya, MD Assistant Professor of Radiology
Michael D Darcy, MD Professor of Radiology
Victor G Davila-Roman, MD Professor of Radiology
Gene Layton Davis Jr, MBA, MD Assistant Professor of Clinical Radiology
Farrokh Dehdashti, MD Professor of Radiology
Jennifer Lee Demertzis, MD Assistant Professor of Radiology
Carmen S Dence, MS Research Associate Professor of Radiology
Colin Pieter Derdeyn, MD Professor of Radiology
Steven Don, MD Associate Professor of Radiology
James R Duncan, MD, PHD Associate Professor of Radiology
Dione M Farria, M PH, MD Associate Professor of Radiology
Keith C Fischer, MD Associate Professor of Radiology
Kathryn Fowler, MD Instructor in Radiology
Mokhtar H Gado, MBBCH, MS Professor of Radiology
Joel Richard Garbow, PHD Research Associate Professor of Radiology
Heather Vallhonrat Garrett, MD Assistant Professor of Radiology
Charles F Garvin, MD Instructor in Clinical Radiology
Edward M Geltman, MD Assistant Professor of Radiology
David S Gierada, MD Professor of Radiology
Louis Arnold Gilula, MD Professor of Radiology
Harvey S Glazer, MD Professor of Radiology
Jennifer E Gould, MD Assistant Professor of Radiology
Diana Lee Gray, MD Professor of Radiology
Perry W Grigsby, MBA, MD, MS Professor of Radiology
Robert John Gropler, MD Professor of Radiology
Robert L Grubb Jr, MD Professor of Radiology
Punita Gupta, MD MPH Instructor in Radiology
Fernando R Gutierrez, MD Professor of Radiology
Jay Paul Heiken, MD Professor of Radiology
Thomas Eugene Herman, MD Associate Professor of Radiology
Pilar Herrero, ME, MS Research Associate Professor of Radiology
Tamara G Hershey, PHD Professor of Radiology
Albert E Hesker, MD Assistant Professor of Clinical Radiology
Charles F Hildebolt, DDENT, MA, PHD Professor of Radiology
Travis J Hillen, MD, MS Assistant Professor of Radiology
Susan O Holley, MD, PHD Assistant Professor of Radiology
Sumner Holtz, MD Associate Professor of Clinical Radiology
Rebecca L Hulett, AB, MD Assistant Professor of Radiology
Terrie Eleanor Inder, MBBS, MD Professor of Radiology
William P James, MD Assistant Professor of Radiology
Cylene Javidan-Nejad, MD Associate Professor of Radiology
Jack W Jennings, MD, MS, PHD Assistant Professor of Radiology
R. Gilbert Jost, MD Director of the Edward Mallinckrodt Institute of Radiology
R. Gilbert Jost, MD Elizabeth E Mallinckrodt Professor of Radiology
James A Junker, MD Instructor in Clinical Radiology
James E. Kelly, MA, MD Instructor in Radiology
Geetika Khanna, MBBS, MS Associate Professor of Radiology
Joong Hee Kim, MS, PHD Instructor in Radiology
Seung Kwon Kim, MD Assistant Professor of Radiology
Zulfia Kisrieva-Ware, MD, PHD Research Instructor in Radiology
Joseph W. Klaesner, MS, PHD Research Associate Professor of Radiology
Seth Jonathan Klein, BSA, MD Instructor in Radiology
Lawrence M Kotner, MD Associate Professor of Radiology
John Jay Kotyk, MA, PHD Research Associate Professor of Radiology
Richard A Kraus, MD Assistant Professor of Radiology
Richard Laforest, MS, PHD Associate Professor of Radiology
Susan M Langhorst, ME, PhD Assistant Professor of Radiology
Suzanne Elizabeth Lapi, MS, PhD Assistant Professor of Radiology
Linda J Larson-Prior, MA, PhD Research Associate Professor of Radiology
Daniel Joseph Leary Jr, MD Assistant Professor of Clinical Radiology
Jin-Moo Lee, MD, PhD Associate Professor of Radiology
Robert G Levitt, MD Associate Professor of Radiology
Michael Fu-Yen Lin, MD, MS Assistant Professor of Radiology
Yongjian Liu, MS, PhD Research Assistant Professor of Radiology (Pending Executive Faculty Approval)
Philip A Ludbrook, MBBS Professor of Radiology
Robert H Mach, PhD Professor of Radiology
Naganathan B Mani, MBBS, MS Assistant Professor of Radiology
Daniel Scott Marcus, PHD Assistant Professor of Radiology
Joanne Markham, MS Research Associate Professor of Radiology
Ben R Mayes Jr, MD Assistant Professor of Clinical Radiology
William H McAlister, MD Professor of Radiology
Mark P. McAvoy, MEE, PHD Research Assistant Professor of Radiology
Jonathan E McConathy, MD, PHD Assistant Professor of Radiology
Robert Carolin McKinstry III, MD, MS, PHD Professor of Radiology
Vincent Michael Mellnick, MD Instructor in Radiology
Christine Onsy Menias, MD Professor of Radiology
Mary Ann Middleton, MD Assistant Professor of Radiology
William D Middleton, MD Professor of Radiology
Francis M Miezin, MS Research Associate Professor of Radiology
Michelle M Miller-Thomas, MD Assistant Professor of Radiology
Mark A Mintun, MD Visiting Professor of Radiology
Stephen M Moerlein, MA, PHARMD, PHD Associate Professor of Radiology
Barbara S Monsees, MD Professor of Radiology
Stephen M Moore, MEE Research Assistant Professor of Radiology
Christopher J Moran, MD Professor of Radiology
Lucy B Morris, M PH, MD Visiting Instructor in Radiology
Michael Jeffrey Mueller, MHS, PHD Professor of Radiology
Vamsi R. Narra, MD Professor of Radiology
Jeffrey J Neil, MD, PHD Professor of Radiology
John Hart Niemeyer, MD Instructor in Clinical Radiology
Gary H Omell, MD Assistant Professor of Clinical Radiology
Robert James Pallow Jr, MD Assistant Professor of Radiology
Matthew S Parsons, MD Assistant Professor of Radiology
Michael K Pasque, MD Professor of Radiology
Michael W Penney, MD Assistant Professor of Radiology
Joel S Perlmutter, MD Professor of Radiology
Mary Culver Department of Surgery

The formal instruction in surgery begins in the third year with the required, 12-week Integrated Surgical Disciplines Clerkship. During this surgical clerkship, students are assigned to clinical rotations, mostly within the Department of Surgery, with some exposure to other surgical-related disciplines outside the department. The clerkship allows students opportunities to participate in the care of surgical patients, both in- and outpatient; spend time in the operating rooms; and attend seminars, teaching conferences and didactic sessions on a regular basis. In the fourth year, students may select “subinternship” electives...
within the Division of General Surgery, which includes a variety of general surgical specialties. In addition to the general surgery subinternships, electives are available in pediatric surgery, transplant surgery, vascular surgery, cardiovascular and thoracic surgery, urologic surgery, and plastic and reconstructive surgery.

Courses

**Third Year**

**M95 790 INTEGRATED SURGICAL DISCIPLINES CLERKSHIP**
During the 12-week surgery clerkship, students are assigned to three four-week rotations, one of which is a required four-week general surgery rotation at Barnes-Jewish Hospital, with alternative rotation sites available at St. Louis Connect Care and the Veterans Administration Medical Center. In addition to the general surgery rotation, each student selects two four-week elective rotations from a variety of surgical specialties and/or related disciplines, such as critical care/anesthesia or musculoskeletal. The 12-week clerkship focuses on the diagnosis, care and management of surgical patients. The student is an active participant in the daily care of patients on each service and attends clinics, rounds, operating rooms, call nights and teaching conferences. Central to the 12-week clerkship are weekly small-group didactic sessions with assigned faculty members and a lecture/workshop series that covers a wide range of surgical topics and specialties, as well as provides opportunity for practice of basic clinical skills in simulated settings.

**Fourth Year**

There is ample opportunity for fourth-year students to participate in elective rotations within each division of the Department of Surgery. Many of the fourth-year surgery electives are structured to allow the student to participate as a “subintern,” facilitating experiences in preoperative, intraoperative and postoperative patient management. Generally, the minimum duration of a fourth-year elective rotation in the Department of Surgery is four weeks. Research electives are also available.

**Electives**

**M95 818 SURGICAL NIGHT FLOAT AND ER SUBINTERNSHIP**
Instructor(s): John Kirby, M.D., and L. Michael Brunt, M.D.
Location: ER
Elective Contact: Doug Brown, 362-8029
Other Information: Student should contact instructor prior to first day of elective.
Enrollment limit per period: 2
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

This subinternship is specifically designed to give senior medical students an intern-level experience in managing acute on-call problems in surgical patients and in evaluating urgent and emergent problems in the ED. The rotation will be divided into two two-week segments — one segment in the ED and the second on night float call on the surgical floors. Students will gain experience evaluating and managing the types of acute problems they will encounter as surgical interns as first responders to patients with acute abdominal pain, chest pain, hypotension, mental status changes and other ER/on-call type problems. They will be assigned to the on-call surgical resident and will have a structured experience to maximize development of their diagnostic, management and case presentation skills in the acute care setting so that they may more smoothly make the transition to a surgical internship.

Student time distribution: Inpatient 50%, Outpatient 50%, Conferences/Lectures TBD; Primary Care
M95 863 ACTING INTERNSHIP, SURGICAL ONCOLOGY AND ENDOCRINE SURGERY
Instructor(s): Timothy Eberlein, M.D., Jeffrey Moley, M.D., Rebecca Aft, M.D., William Gillanders, M.D., and Julie Margenthaler, M.D.
Location: 11th floor, Northwest Tower
Elective Contact: Doug Brown, 362-8029
Other Information: This is NOT a “preceptor” elective. However, students may elect to make prior arrangements to work more closely with a specific attending (based on availability).
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

This subinternship elective is designed to give students in-depth experience in the clinical management of patients on the Endocrine and Surgical Oncology Service (Unit I Service). Students will serve as clerks and will be responsible for patient management with house staff under the guidance of the chief resident and attending surgeons. Clinical exposure is focused on thyroid, parathyroid and adrenal surgery, as well as breast oncology, GI oncology, melanoma and soft-tissue sarcomas. The course will offer opportunities for students to gain experience in preoperative, intraoperative and postoperative patient management. There will be opportunity for students to evaluate patients, decide on a diagnostic and management strategy and provide care under house staff and faculty guidance, as well as ample opportunity to attend and participate in conferences. Note: If a student desires to work more closely with a “specific attending,” he/she must make special arrangements with the faculty member prior to beginning this elective. If you have any questions regarding this notice, please call Doug Brown in the Surgical Education Office (362-8029).

Student time distribution: Inpatient 75%, Outpatient 15%, Conferences/Lectures 10%; Primary Care 100%
Major teaching responsibility: Attending, chief resident and junior residents
Patients seen/weekly: 20-40 (varies)
On call/weekend responsibility: Every third or fourth night with a resident who will directly supervise

M95 879 ACTING INTERNSHIP, HEPATOBILIARY PANCREATIC SURGERY
Instructor(s): Steven Strasberg, M.D., William Hawkins, M.D., and David Linehan, M.D., 362-7147
Location: 11th floor, Northwest Tower
Elective Contact: Doug Brown, 362-8029
Other Information: This is NOT a “preceptor” elective. However, students may elect to make prior arrangements to work more closely with a specific attending on this service (based on availability).
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

This subinternship elective is designed to give students in-depth experience in the clinical management of patients on the Hepatobiliary/Pancreatic (Unit II) Service. The Unit II Service is a busy upper gastrointestinal service with a focus on hepatobiliary and pancreatic diseases and their treatment. The course will offer opportunities for students to gain experience in preoperative, intraoperative and postoperative patient management. Students will serve as clerks and will be responsible for patient management with house staff under the guidance of the fellow, chief resident and attending surgeons. There will be opportunity for students to evaluate patients, decide on a diagnostic and management strategy and provide care under house staff and faculty guidance, as well as ample opportunity to attend and participate in conferences. Note: If a student desires to work more closely with a “specific attending,” he/she must make special arrangements with the faculty member prior to beginning this elective. If you have any questions regarding this notice, please call Doug Brown in the Surgical Education Office (362-8029).
M95 814 ACTING INTERNSHIP, TRAUMA SERVICE
Instructor(s): John Mazuski, M.D., John Kirby, M.D., Douglas Schuerer, M.D., Robert Southard, M.D., and Kareem Husain, M.D.
Location: 1411 Queeny Tower
Elective Contact: Jo Ann Thaller, 362-5345
Other Information: This is NOT a “preceptor” elective. However, students may elect to make prior arrangements to work more closely with particular attendings on this service (based on availability).
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

The student on this elective will function as a subintern on the Trauma and Acute Care Surgical Service within the Section of Acute and Critical Care Surgery. Student involvement in all aspects of clinical surgery is accomplished by student attendance in the outpatient office, preoperative patient evaluation, in-hospital patient management and postoperative outpatient follow-up after discharge. Practical experience will focus on the initial evaluation and resuscitation of traumatized patients and other emergency care patients. The student will also participate in regular rounds, conferences and in-house call. Note: If a student desires to work more closely with a “specific attending,” he/she must make special arrangements with the faculty member prior to beginning this elective. If you have any questions regarding this notice, please call Doug Brown in the Surgical Education Office (362-8029).

M95 893 ACTING INTERNSHIP, MINIMALLY INVASIVE SURGERY
Instructor(s): L. Michael Brunt, M.D., and Brent Matthews, M.D., 454-7194
Location: 11th floor, Northwest Tower
Elective Contact: Student should contact Dr. Brunt at 454-7194 prior to the first day of the elective
Other Information: This is NOT a “preceptor” elective. However, students may elect to make prior arrangements to work more closely with Dr. Brunt on this elective (based on availability).
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

This subinternship elective in minimally invasive surgery is offered by L. Michael Brunt, M.D., a member of the Section of Minimally Invasive Surgery in the General Surgery Division. Surgeons in the Minimally Invasive Surgery group regularly perform the following procedures laparoscopically: cholecystectomy, splenectomy, adrenalectomy, hiatal hernia repair, inguinal hernia repair, ventral hernia repair and gastric bypass for morbid obesity. The medical student electing this rotation will participate in the outpatient office and direct patient care, assist and observe in a wide range of laparoscopic procedures and participate in teaching rounds and conferences. During this rotation, the student may also have the opportunity to observe and participate in minimally invasive surgical procedures performed by various surgeons within the Division of General Surgery. Additionally, the student may also elect to participate in the laboratory of the Washington University Institute for Minimally Invasive Surgery one or two days per week. Notice: If a student desires to work more closely with a “specific attending,” he/she must make special arrangements with the faculty member prior to beginning this elective. If you have any questions regarding this notice, please call Doug Brown in the Surgical Education Office (362-8029).

The student time distribution: Inpatient 80%, Outpatient 10%, Conferences/Lectures 10%; Subspecialty Care 20%
Major teaching responsibility: Attendings, residents and fellows
Patients seen/weekly: 30
On call/weekend responsibility: Yes

M95 814 ACTING INTERNSHIP, TRAUMA SERVICE
Instructor(s): John Mazuski, M.D., John Kirby, M.D., Douglas Schuerer, M.D., Robert Southard, M.D., and Kareem Husain, M.D.
Location: 1411 Queeny Tower
Elective Contact: Jo Ann Thaller, 362-5345
Other Information: This is NOT a “preceptor” elective. However, students may elect to make prior arrangements to work more closely with particular attendings on this service (based on availability).
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

The student on this elective will function as a subintern on the Trauma and Acute Care Surgical Service within the Section of Acute and Critical Care Surgery. Student involvement in all aspects of clinical surgery is accomplished by student attendance in the outpatient office, preoperative patient evaluation, in-hospital patient management and postoperative outpatient follow-up after discharge. Practical experience will focus on the initial evaluation and resuscitation of traumatized patients and other emergency care patients. The student will also participate in regular rounds, conferences and in-house call. Note: If a student desires to work more closely with a “specific attending,” he/she must make special arrangements with the faculty member prior to beginning this elective. If you have any questions regarding this notice, please call Doug Brown in the Surgical Education Office (362-8029).

M95 893 ACTING INTERNSHIP, MINIMALLY INVASIVE SURGERY
Instructor(s): L. Michael Brunt, M.D., and Brent Matthews, M.D., 454-7194
Location: 11th floor, Northwest Tower
Elective Contact: Student should contact Dr. Brunt at 454-7194 prior to the first day of the elective
Other Information: This is NOT a “preceptor” elective. However, students may elect to make prior arrangements to work more closely with Dr. Brunt on this elective (based on availability).
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

This subinternship elective in minimally invasive surgery is offered by L. Michael Brunt, M.D., a member of the Section of Minimally Invasive Surgery in the General Surgery Division. Surgeons in the Minimally Invasive Surgery group regularly perform the following procedures laparoscopically: cholecystectomy, splenectomy, adrenalectomy, hiatal hernia repair, inguinal hernia repair, ventral hernia repair and gastric bypass for morbid obesity. The medical student electing this rotation will participate in the outpatient office and direct patient care, assist and observe in a wide range of laparoscopic procedures and participate in teaching rounds and conferences. During this rotation, the student may also have the opportunity to observe and participate in minimally invasive surgical procedures performed by various surgeons within the Division of General Surgery. Additionally, the student may also elect to participate in the laboratory of the Washington University Institute for Minimally Invasive Surgery one or two days per week. Notice: If a student desires to work more closely with a “specific attending,” he/she must make special arrangements with the faculty member prior to beginning this elective. If you have any questions regarding this notice, please call Doug Brown in the Surgical Education Office (362-8029).

Student time distribution: Inpatient 80%, Outpatient 10%, Conferences/Lectures 10%; Subspecialty Care 20%
Major teaching responsibility: Attendings, residents and fellows
Patients seen/weekly: 30
On call/weekend responsibility: Yes
Major teaching responsibility: Attending and residents
Patients seen/weekly: ~25 (varies)
On call/weekend responsibility: One call weekend which consists of morning rounds and home call. No in-house call.

**M95 871 ACTING INTERNSHIP, VASCULAR SURGERY**
Instructor(s): Patrick Geraghty, M.D., Gregorio Sicard, M.D., Brian Rubin, M.D., M. Wayne Flye, M.D., and Luis Sanchez, M.D., 362-7841
Location: 5103 Queeny Tower
Elective Contact: Students should contact Andrea Portlock in Dr. Geraghty’s office prior to the start of this rotation at 362-6519.
Other Information: This is NOT a “preceptor” elective. However, students may elect to make prior arrangements to work more closely with Dr. Sicard (362-7841) or other attendings on this service (based on availability).
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

This subinternship elective is designed to give students in-depth experience in the clinical management of patients on the Vascular Surgery Service. The elective will offer opportunities for students to gain experience in preoperative, intraoperative and postoperative management of patients with surgically treated vascular diseases/conditions. Students will serve as clerks and will be responsible for patient management with house staff under the guidance of the chief resident and attending surgeons. There will be opportunity for students to evaluate patients, decide on a diagnostic and management strategy and provide care under house staff and faculty guidance, as well as ample opportunity to attend and participate in conferences. Notice: If a student desires to work more closely with a “specific attending,” he/she must make special arrangements with the faculty member prior to beginning this elective. If you have any questions regarding this notice, please call Doug Brown in the Surgical Education Office (362-8029).

Student time distribution: Inpatient 70%, Outpatient 20%, Conferences/Lectures 10%; Primary Care 10%, Subspecialty Care 90%
Major teaching responsibility: Attending, fellows, chief resident and junior residents
Patients seen/weekly: 100+ (varies)
On call/weekend responsibility: Student’s option

**M95 862 ACTING INTERNSHIP, COLON AND RECTAL SURGERY**
Instructor(s): Steve Hunt, M.D., James W. Fleshman, M.D., Elisa Birnbaum, M.D., Anne Lin, M.D., Ira Kodner, M.D., Matthew Mutch, M.D., and Bashar Safar, M.D., 454-7182
Location: 14102 Queeny Tower, South Campus
Elective Contact: Joni Menke, 454-7182
Other Information: This is NOT a “preceptor” elective. However, students may elect to make prior arrangements to work more closely with a specific attending on this elective (based on availability).
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

This subinternship elective is designed to give students in-depth experience in the clinical management of patients on the Colorectal Surgery Service. Students work closely with the attendings within the Section of Colon and Rectal Surgery, and clinical exposure is focused on a wide range of benign and malignant colorectal diseases. There is exposure to radiation oncology and the specialized areas of nursing related to care of patients with colorectal cancer and inflammatory bowel disease. The course will offer opportunities for students to gain experience in preoperative, intraoperative and postoperative patient management under house staff and faculty guidance, as well as ample opportunity to attend and participate in conferences. Notice: If a student desires to work more closely with a “specific attending,” he/she must make special arrangements with the Colorectal Surgery Office prior to beginning this elective.

Student time distribution: Inpatient 75%, Outpatient 20%, Conferences/Lectures 5%; Subspecialty Care
M95 891 ORGAN TRANSPLANTATION
Instructor(s): William Chapman, M.D., 362-7792, Surendra Shenoy, M.D., Ph.D., 362-4338, Jeffrey Lowell, M.D., 362-2820, Majella Doyle, MD, 362-2880, Christopher Anderson, M.D., 362-2880, and Jason Wellen, M.D., 362-2840
Location: Barnes-Jewish Hospital
Elective Contact: Dr. Shenoy's secretary, Vicky Dean, at 362-4338
Other Information: Student should contact instructor if interested in scheduling elective.
Enrollment limit per period: 2
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

The care of transplant patients requires the integration of multiple diverse medical and surgical disciplines. This elective clerkship in organ transplantation encompasses the preoperative evaluation and management of adult and pediatric recipients of liver, kidney and pancreas. Students participate in procurement of allografts from cadaveric or living donors, organ preservation and transplantation. Emphasis is also placed on postoperative care, multimodality immunosuppression and management of allograft rejection. Basic hepatic and renal physiology, fluid and electrolyte balance, and transplantation immunology are stressed. Rotation provides an elaborate exposure to different facets of management of end-stage renal and liver disease. Management of the complications of diabetes, hypertension, portal hypertension and infectious problems are an integral part of pre- and post-transplant care. This course is designed to offer the student an overview of the field of organ transplantation, however, in addition to transplant surgery, students will also get some exposure to vascular access and hepatobiliary surgery. The student functions as a member of the transplant team and assumes appropriate responsibilities under supervision.

Student time distribution: Inpatient 80%, Outpatient 10%, Conferences/Lectures 10%; Subspecialty Care 100%
Major teaching responsibility: Full attending and resident staff
Patients seen/weekly: 40
On call/weekend responsibility: Yes

M95 820 CARDIOTHORACIC SURGERY
Instructor(s): Jennifer Lawton, M.D., Michael Avidan, MBBCH, Traves Crabtree, M.D., Ralph Damiano, M.D., Charles B. Huddleston, M.D., Pirrooz Eghtesady, M.D., Ph.D., Dan Kreisel, M.D., Ph.D., Sasha Krupnick, M.D., Bryan Meyers, M.D., Nader Moazami, M.D., Marc Moon, M.D., Michael K. Pasque, M.D., G. Alexander Patterson, M.D., I-wen Wang, M.D., Ph.D., Scott Silvestry, M.D., Charl DeWet, M.D., Hersh Maniar, M.D., Varun Puri, M.D., and Lauren Hill, M.D.
Location: 3106 Queeny Tower
Elective Contact: Jennifer Lawton, M.D. (Secretary, Beverly Wolff, 362-2821)
Other Information: Students should contact Beverly Wolff at 362-2821 prior to the first day of elective.
Students should report to 3106 Queeny Tower, 7 a.m. first day of elective.
Enrollment limit per period: 3
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37 and 41.

The senior elective in cardiothoracic surgery is a four-week clinical rotation with two-week blocks divided between adult cardiac, pediatric cardiothoracic and general thoracic surgery according to the student's preference. Students will participate in morning work rounds, attend the operative procedures of their choice, and attend weekly conferences and teaching rounds. Students will be introduced not only to the surgical procedures but also to the postoperative care of the surgical patients. On the pediatric and adult cardiac services, students will be introduced to the principles of cardiopulmonary bypass, repair of congenital heart defects, ventricular assist devices, cardiac transplantation, coronary artery bypass surgery (on and off pump), valve repair and replacement, complex aortic surgery, the MAZE procedures and others.
On the adult cardiac surgery service, students will function as subinterns under the direct supervision of a faculty member.

On the thoracic surgical rotation students will have the opportunity of performing bronchoscopy, esophagoscopy and gastroscopy and participating in surgical resections of lung cancer and esophageal cancer, as well as surgery for emphysema and for benign esophageal conditions. Students will also participate in lung transplantation surgery.

Student time distribution: Inpatient 80%, Outpatient 10%, Conferences/Lectures 10%; Subspecialty Care 100%
Major teaching responsibility: Attendings and residents
Patients seen/weekly: 20
On call/weekend responsibility: One in three, no weekend call

**M95 830 PLASTIC RECONSTRUCTIVE SURGERY**
Instructor(s): Ida Fox, M.D.
Location: 11th floor, Northwest Tower
Elective Contact: Jo Ann Herman, 454-6089
Other Information: Students should meet at 7 a.m. as scheduled by Dr. Fox’s secretary on the first day of the rotation.
Enrollment limit per period: 2
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

The period on plastic surgery may either be spent as a clinical clerkship or conducting a research project. The purpose of the clinical clerkship is to familiarize the student with the basic principles of tissue repair and reconstruction. The student will have successive assignments to each of the attending staff and the ward resident services during the four weeks. This will expose the student to the breadth and depth of plastic surgery. Alternatively, if the student has identified a focus of interest, the student may participate on those services of special interest, such as hand or pediatric plastic surgery. The student will assume an active role on the plastic surgery service and will participate in the total management of a wide variety of surgical problems including congenital anomalies, microvascular surgery, surgery of the upper extremity, peripheral nerve surgery, cosmetic surgery and general reconstructive plastic surgery. Research projects should be student-motivated and need to be approved prior to scheduling and confirming the research rotation.

Student time distribution: Inpatient 70%, Outpatient 20%, Conferences/Lectures 10%; Subspecialty Care 100%
Major teaching responsibility: Attendings and residents
Patients seen/weekly: 12
On call/weekend responsibility: Recommended

**M95 831 PLASTIC SURGERY AMBULATORY CARE**
Instructor(s): Ida Fox, M.D.
Location: 11th floor, Northwest Tower
Elective Contact: Jo Ann Herman, 454-6089
Other Information: Students should meet at 7 a.m. as scheduled by Dr. Fox’s secretary on the first day of the rotation.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

The period on plastic surgery ambulatory care will focus on outpatient management of hand fractures, nerve injuries, facial traumas, wound healing/repair, pediatric injury, skin lesions, and general outpatient plastic surgery. This rotation will focus on teaching outpatient management, radiology-related duties, casting, and splinting.

Student time distribution: Outpatient 90%, Conferences/Lectures 10%; Subspecialty Care 100%
Major teaching responsibility: Attendings and residents
Patients seen/weekly: 150
On call/weekend responsibility: Recommended

M95 832 PLASTIC SURGERY EXTERNSHIP (Visiting Students Only)
Instructor(s): Keith E. Brandt, M.D., 747-0541
Location: 11th floor, Northwest Tower
Elective Contact: Sue Grimm, (314) 747-0541
Other Information: Please contact the Plastic Surgery Residency Coordinator, Sue Grimm at grimms@wustl.edu or 747-0541 to arrange your schedule.
Enrollment limit per period: Varies
Flexible start days for 3 to 4-week blocks are available beginning July 1, 2011 through December 31. Certain rotation dates/weeks may be limited depending on the number of students requesting rotations.

Students rotate on each of the Plastic Surgery Services for one- or two-week blocks. Services include breast reconstruction, hand, nerve and general recon. One week on each service is recommended to maximize exposure to all faculty. Participation in conferences is expected.

Please contact the Plastic Surgery Residency Coordinator, Sue Grimm at grimms@wustl.edu or 747-0541 to arrange your schedule.

Student time distribution: Inpatient 70%, Outpatient 20%, Conferences/Lectures 10%; Subspecialty Care 100%
Major teaching responsibility: Attendings and residents
Patients seen/weekly: 12
On call/weekend responsibility: one day per week, one weekend per month

M95 850 UROLOGY
Instructor(s): Gerald Andriole, M.D., 362-8212
Location: Wohl Hospital
Elective Contact: Sally Wahlbrink, 362-8212
Other Information: Students should contact Dr. Andriole’s office at 362-8212 prior to first day for room assignment.
Enrollment limit per period: 2
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

A four-week clinical clerkship in pediatric and/or adult urology will offer the interested student experience with a spectrum of problems in clinical urology. The student will learn the basic diagnostic procedures and management of surgical and non-surgical aspects of patient care on the private and ward services under the supervision of the attending staff and house staff. Clinical conferences are held four days per week.

Student time distribution: Inpatient 80%, Outpatient 10%, Conferences/Lectures 10%; Subspecialty Care 100%
Major teaching responsibility: Several attendings, chief resident and resident staff
Patients seen/weekly: >20
On call/weekend responsibility: None

M95 880 PEDIATRIC SURGERY
Instructor(s): Brad Warner, M.D., Martin Keller, M.D., Jacqueline Saito, M.D., Pat Dillon, M.D., Kate Bernabe, M.D., and Brad Segura, M.D.
Location: 5S40 St. Louis Children’s Hospital
Elective Contact: Gerri Fisher, 454-8197
Other Information: Students should report at 6 a.m. on the first day of the rotation.
Enrollment limit per period: 1
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.
The student will participate as a subintern in all aspects of pediatric surgical patient care and will be exposed to a wide variety of pediatric surgical cases. This includes the preoperative and postoperative evaluation of patients as well as the care of pediatric trauma patients. Daily rounds are made with both the resident and attending staff, and active participation is expected in the pediatric surgery clinic and the operating room. Weekly conferences include Mortality and Morbidity, Radiology, Pathology and case presentations, with the student expected to prepare a conference presentation on a topic of interest.

Student time distribution: Inpatient 60%, Outpatient 30%, Conferences/Lectures 10%; Subspecialty Care 100%
Major teaching responsibility: Attendings
Patients seen/weekly: 35
On call/weekend responsibility: Optional

**M95 864 ETHICAL CHALLENGES IN SURGERY AND MEDICINE**
Instructor(s): Ira J. Kodner, M.D., 454-7177
Location: 14th Floor, Queeny Tower, Suite 14102
Elective Contact: Students should contact Dr. Kodner at ijkodner@aol.com or Kodner@wudosis.wustl.edu prior to the first day of the elective.
Other Information: Coordinate time to report first day of elective with Liz Nordike 454-7183 or nordikel@wudosis.wustl.edu
Enrollment limit per period: 2
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 33, 37, and 41.

This elective will involve exploration of the ethical challenges discussed during eight years of presentations at the monthly "Surgery/Ethics/Pizza Rounds" conducted by the Department of Surgery at Washington University School of Medicine. The readings, discussions and conclusions will be guided by Washington University and Barnes-Jewish Hospital (BJH) ethicists and will result in a finished manuscript to be published, with the student as co-author, in the journal *Surgery*. This elective provides the opportunity to work closely with the faculty in surgery and ethics and to participate in the many activities within the School, the Center and BJH. It should appeal to any in the medical system interested in the ethical and humanitarian challenges facing medicine and society in general.

Student time distribution: Conferences/Lectures 100%
Major teaching responsibility: Ira J. Kodner, M.D.
Patients seen/weekly: N/A
On call/weekend responsibility: None

**M10 820 CRITICAL CARE**
Instructor(s): Heidi Atwell, D.O., 362-1196, Course Master; Watler Boyle, M.D.; Grant Bochicchio, M.D.; Anne Drewry, M.D.; Daniel Emmert, M.D.; Alex Evers, M.D.; Brian Fuller, M.D.; Thomas J. Graetz, M.D.; Richard Hotchkiss, M.D.; Kareem Husain, M.D.; John Kirby, M.D.; John Mazuski, M.D.; Tiffany Osborn, M.D.; Patricia Penkoske, M.D.; Adnan Sadiq, M.D.; Doug Schuerer, M.D.; Robert Southard, M.D.; George Tseng, M.D.; Mike Wall, M.D.; and Brian Wessman, M.D.
Location: Barnes-Jewish Hospital, South Campus
Elective Contact: Barbara McKinney, 747-3581
Other Information: Students should meet in the 8400 Surgical Intensive Care Unit, eighth floor of Barnes-Jewish Hospital, 7:30 a.m. on the first day of the elective.
Enrollment limit per period: 4
Valid start weeks for 4-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37, and 41.

Students on this rotation are integral members of the multidisciplinary intensivist-led critical care team in the Surgical Intensive Care Unit (SICU). Students learn an organ systems-based approach for evaluation and management of critically ill and injured patients, and application of evidence-based principles in delivery of state-of-the-art critical care. Emphasis is placed on critical care knowledge and techniques used at the bedside in the clinical management of serious traumatic and surgical conditions. Students become familiar with resuscitation and cardiopulmonary support, including methods for noninvasive and invasive hemodynamic monitoring, and techniques for airway management and
pulmonary support in respiratory failure. Basic knowledge and skills in the management of neurologic injuries, liver and/or renal failure, and life-threatening infections in the surgical patient are also taught, as is the importance of treatments to alleviate anxiety and pain, maintain fluid and electrolyte balance and provide adequate nutrition. Practical experience is gained in placement of vascular access devices, interpretation of laboratory data and use of guidelines, protocols and quality assurance tools in the management of critically ill patients.

Student time distribution: Inpatient 80%, Conferences/Lectures 20%; Subspecialty Care 100%
Major teaching responsibility: ICU Attendings
Patients seen/weekly: 50
On call/weekend responsibility: Variable

Research

(M95 900)

L. Michael Brunt, M.D., 1160 Northwest Tower, Barnes-Jewish Hospital, 454-7194. Minimally invasive surgery, including endocrine applications. Minimum rotation length: four weeks. Under the auspices of the Washington University Institute for Minimally Invasive Surgery (WUIMIS), a number of surgeons are investigating the physiologic consequences of laparoscopic surgery and new applications for procedures and technologies. Dr. Brunt is currently investigating clinical outcomes of various laparoscopic surgical procedures, laparoscopic hiatal hernia surgery and adrenal surgery, and is carrying out education-related research of skills training for senior medical students planning to enter a surgical internship.

Susan E. Mackinnon, M.D., 660 S. Euclid Ave., Box 8238, 362-4586. Peripheral nerve surgical research. Our laboratory investigates nerve injury and regeneration including nerve transplantation. The student will be encouraged to design and complete his/her own research study during the elective.

Susan E. Mackinnon, M.D., 660 S. Euclid Ave., Box 8238, 362-4586. Plastic surgery research laboratories. Minimum rotation length: six weeks. The research rotation can be conducted in the plastic surgery laboratories under the direction of Drs. Kane, Borschel, Tung, Myckatyn, Fox or Mackinnon. A project will be designed with the student prior to his/her rotation on plastic surgery so that all the materials and methods will be available at the beginning of the rotation. Ongoing projects include: (1) nerve repair and regeneration; (2) nerve and composite tissue transplantation; (3) in vivo tissue generation and tissue differentiation; (4) the mechanical, structural and biochemical effects of stress on scar tissue maturation; (5) in vivo anatomy of craniofacial deformities; and (6) outcome analysis of methods of cleft lip and palate management.

Brent D. Matthews, M.D., 1160 Northwest Tower, Barnes-Jewish Hospital, 454-7195. Laparoscopic ventral hernia repair: prospective outcomes study. Insurance companies, HMOs and patients are interested in quantifying the outcomes of surgeons and hospital systems for complex surgical procedures and high-volume operations in search of the best possible care available. Year 2003 data from the National Center for Health Statistics revealed that approximately 800,000 inguinal hernia repairs and 90,000 ventral hernia repairs were performed in the United States. This underscores the importance of developing and implementing a surgical program with expertise in the care of hernia disease. Through the support of the Washington University Institute for Minimally Invasive Surgery (WUIMIS), this Washington University Medical Center Human Studies Committee-approved prospective outcomes study will investigate outcomes in patients undergoing laparoscopic ventral hernia repair in an attempt to define preoperative patient variables as surrogate markers for risk factors for a difficult laparoscopic repair. The student will participate in the perioperative evaluation of study patients, attend operative procedures, coordinate data collection and contribute in outcomes analysis.

Faculty
Timothy J Eberlein, MA, MD Head of the Department of Surgery
Rebecca L Aft, MD, PHD Professor of Surgery (General Surgery)
Jennifer Elizabeth Allsworth, AB, PHD Assistant Professor of Surgery (Public Health Sciences)
Dorothy A Andriole, MD Associate Professor of Surgery (General Surgery)
Gerald L Andriole, MD Robert Killian Royce, M.D. Distinguished Professor of Urologic Surgery
Jeffrey Michael Arbeit, MD Professor of Surgery (Urologic Surgery)
Kenneth J Arnold, MD Assistant Professor of Clinical Surgery (General Surgery)
Heidi Kathleen Atwell, DOST Assistant Professor of Surgery (Cardiothoracic Surgery)
Paul F Austin, MD Associate Professor of Surgery (Urologic Surgery)
Michael Simon Avidan, MBBCH Professor of Surgery (Cardiothoracic Surgery)
Michael Magdi Awad, MD, PHD Assistant Professor of Surgery (General Surgery)
Jeffrey Allen Bailey, M PA, MD Assistant Professor of Surgery (General Surgery)
Joaquin Barnoya, MD, MS Research Assistant Professor of Surgery (General Surgery)
Mark Edward Beehner, DDENT, MD Assistant Professor of Clinical Surgery (Plastic and Reconstructive Surgery)
Kenneth J Bennett, MD Associate Professor of Clinical Surgery (General Surgery)
Brian Michael Benway, MD Assistant Professor of Surgery (Urologic Surgery)
Kathryn Quitasol Bernabe, MD Assistant Professor of Surgery (Pediatric Surgery)
Sam B Bhayani, MD Associate Professor of Surgery (Urologic Surgery)
Lawrence J Billy, MD Instructor in Clinical Surgery (General Surgery)
Elisa H Birnbaum, MD Professor of Surgery (General Surgery)
Thomas J Blanke Sr, MD Instructor in Surgery (General Surgery)
Grant Bochicchio, M PH, MD Professor of Surgery (General Surgery)
Stephanie Lynn Bonne, MD Instructor in Surgery (General Surgery) (Pending Dean's Approval)
Umar Sekou-Toure Boston, MD Associate Professor of Surgery (Cardiothoracic Surgery)
Walter A Boyle Ill, MD Professor of Surgery (General Surgery)
Steven B Brandes, MD Professor of Surgery (Urologic Surgery)
Keith E Brandt, MD William G. Hamm Professor of Surgery (Plastic and Reconstructive Surgery)
Stephen Broderick, MD Instructor in Surgery (Cardiothoracic Surgery)
L. Michael Brunt, MD Professor of Surgery (General Surgery)
John B Buettner, MD Instructor in Clinical Surgery (General Surgery)
Arnold D Bullock, MD Professor of Surgery (Urologic Surgery)
David Anthony Caplin, MD Instructor in Clinical Surgery (Plastic and Reconstructive Surgery)
Will C Chapman, MD Eugene M. Bricker Professor of Surgery (General Surgery)
Alexander Chi Chen, MD Assistant Professor of Surgery (Cardiothoracic Surgery)
John E. Codd, MD Professor of Clinical Surgery (Cardiothoracic Surgery)
Graham A Colditz, DRPH, M PH, MBBS Niess-Gain Professor of Surgery (General Surgery)
H. Groves Cooke III, DDENT, MS Instructor in Clinical Surgery (Plastic and Reconstructive Surgery)
Douglas E Coplen, MD Associate Professor of Surgery (Urologic Surgery)
James L Cox, MD Evarts A. Graham Professor Emeritus of Surgery (Cardiothoracic Surgery)
Traves D. Crabtree, MD  Assistant Professor of Surgery (Cardiothoracic Surgery)
Brian P. Cupps, MS, PHD  Research Associate Professor of Surgery (Cardiothoracic Surgery)
John A Curci, MD  Associate Professor of Surgery (General Surgery)
Amy Cyr, MD  Assistant Professor of Surgery (General Surgery)
Ralph James Damiano Jr, MD  John M. Shoenberg Professor of Surgery (Cardiothoracic Surgery)
Michael D Darcy, MD  Associate Professor of Surgery (General Surgery)
Charli Johan De Wet, MBCHB  Associate Professor of Surgery (Cardiothoracic Surgery)
Corey Renee Deeken, PHD  Instructor in Surgery (General Surgery)
Alana C Desai, MD  Assistant Professor of Surgery (Urologic Surgery)
Sekhar Dharmarajan, MD  Assistant Professor of Surgery (General Surgery)
Patrick A Dillon, MD  Associate Professor of Surgery (Pediatric Surgery)
Maria Bernadette Majella Doyle, MD  Assistant Professor of Surgery (General Surgery)
Bettina Drake, M PH, PHD  Assistant Professor of Surgery (General Surgery)
Joseph W Eades, MD  Assistant Professor of Clinical Surgery (Plastic and Reconstructive Surgery)
J. Chris Eagon, MD, MS  Associate Professor of Surgery (General Surgery)
Stephen Ray Eaton  Instructor in Surgery (General Surgery) (Pending Dean's Approval)
Timothy J Eberlein, MA, MD  Bixby Professor of Surgery (General Surgery)
Pirooz Eghtesady, D SC, MD, MS  Professor of Surgery (Cardiothoracic Surgery)
Daniel Emmert  Assistant Professor of Surgery (Cardiothoracic Surgery)
Christopher R. Erwin, MS, PHD  Research Associate Professor of Surgery (Pediatric Surgery)
Ryan Courtney Fields  MD  Assistant Professor of Surgery (General Surgery)
Robert S Figenshau, MD  Taylor Family and Ralph V. Claman, M.D. Professor of Surgery (Urologic Surgery)
Timothy Peter Fleming, PHD  Research Professor of Surgery (General Surgery)
James W Fleshman Jr, MD  Professor of Surgery (General Surgery)
Ida K Fox, MD  Assistant Professor of Surgery (Plastic and Reconstructive Surgery)
Bradley D. Freeman, MD  Professor of Surgery (General Surgery)
William A Gay, MD  Professor of Surgery (Cardiothoracic Surgery)
Andrew E. Gelman, PHD  Assistant Professor of Surgery (Cardiothoracic Surgery)
Patrick J Geraghty, MD  Associate Professor of Surgery (General Surgery)
William Ewald Gillanders, MD, MS, MS1  Professor of Surgery (General Surgery)
Louis Arnold Gilula, MD  Professor of Surgery (Plastic and Reconstructive Surgery)
Simon P Goedegebuure, MA, PHD  Research Associate Professor of Surgery (General Surgery)
Thomas J Graetz  Assistant Professor of Surgery (Cardiothoracic Surgery)
Robert Lee Grubb III, MD  Assistant Professor of Surgery (Urologic Surgery)
Jun Guo, MS, PHD  Research Assistant Professor of Surgery (Pediatric Surgery)
Bruce Lee Hall, MBA, MD, PHD  Professor of Surgery (General Surgery)
David A. Hardy, MD  Instructor in Surgery (Urologic Surgery)
William G. Hawkins, MD  Associate Professor of Surgery (General Surgery)
Michael E Hayek, MD, MS  Instructor in Clinical Surgery (General Surgery)
Elizabeth Hilliker, MA, MD  Assistant Professor of Surgery (General Surgery)

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Christine Michelle Hoehner, MS, PHS  Assistant Professor of Surgery (General Surgery)
Richard S Hotchkiss, MD  Professor of Surgery (General Surgery)
M'liss Ann Hudson, MD  Associate Professor of Surgery (Urologic Surgery)
Donald V Huebner, DDENT, MA, MS  Professor of Surgery (Plastic and Reconstructive Surgery)
Peter A Humphrey, MD, PHD  Professor of Surgery (Urologic Surgery)
Steven R Hunt, MD  Associate Professor of Surgery (General Surgery)
Kareem D. Husain, MD  Assistant Professor of Surgery (General Surgery)
Jennifer Lynn Ivanovich, MBA, MS  Research Assistant Professor of Surgery (General Surgery)
Aimee S. James, M Ph, MA, PhD  Assistant Professor of Surgery (General Surgery)
David P. Jaques  Professor of Surgery (General Surgery)
Jeffrey Jim, MD, MS  Assistant Professor of Surgery (General Surgery)
Philip J Johnson, BE, ME, PHD  Assistant Professor of Surgery (Plastic and Reconstructive Surgery)
Kimberly Anne Kaphingst, D SC, MA, MS  Assistant Professor of Surgery (General Surgery)
Demetrios Katsikas, MD  Instructor in Clinical Surgery (Urological Surgery)
Martin S Keller, MD  Associate Professor of Surgery (Pediatric Surgery)
Andrew M Kim, DDENT, MS  Assistant Professor of Clinical Surgery (Plastic and Reconstructive Surgery)
Seung Kwon Kim, MD  Assistant Professor of Surgery (General Surgery)
John P. Kirby, MD, MS  Associate Professor of Surgery (General Surgery)
Saul Klein, MD  Instructor in Clinical Surgery (Urologic Surgery)
Mary E Klingensmith, MD  Mary Culver Distinguished Professor
Mary E Klingensmith, MD  Professor of Surgery (General Surgery)
Carl G Klutke, MD  Professor of Surgery (Urologic Surgery)
Ira Joe Kodner, MD  Solon and Bettie Gershman Professor of Surgery (General Surgery)
David Paul Krajcovic, MD  Instructor in Clinical Surgery (General Surgery)
Daniel Kreisel, MD, PHD  Associate Professor of Surgery (Cardiothoracic Surgery)
Alexander S. Krupnick, MD  Assistant Professor of Surgery (Cardiothoracic Surgery)
Hing Hung H Lai, MD  Assistant Professor of Surgery (Urologic Surgery)
John M Lasala, MD, PHD  Professor of Surgery (Cardiothoracic Surgery)
Jennifer S Lawton, MD  Professor of Surgery (Cardiothoracic Surgery)
Jerome F Levy  Professor Emeritus of Surgery (General Surgery)
Wenjun Li, MD, MS  Research Assistant Professor of Surgery (Cardiothoracic Surgery)
Yiing Lin, MD, PHD  Assistant Professor of Surgery (General Surgery)
David C Linehan, MD  Professor of Surgery (General Surgery)
Ying Liu, MD, PHD  Instructor in Surgery (Public Health Sciences)
Rebecca Lobb, PHD  Assistant Professor of Surgery (Public Health Sciences)
Alan M Londe, MD  Instructor in Clinical Surgery (General Surgery)
Stanley L London, MD  Associate Professor Emeritus of Clinical Surgery (General Surgery)
Jeffrey A Lowell, MD  Professor of Surgery (General Surgery)
Zhi Hong Lu, PHD  Research Assistant Professor of Surgery (Urologic Surgery)
Mark A Ludwig, MD  Instructor in Clinical Surgery (General Surgery)
Susan E Mackinnon, MD Sydney M., Jr. and Robert H. Shoenberg Professor of Surgery (Plastic and Reconstructive Surgery)

Hersh Maniar, MD Assistant Professor of Surgery (Cardiothoracic Surgery)

Julie Ann Margenthaler, MD Associate Professor of Surgery (General Surgery)

Brent D. Matthews, MD Professor of Surgery (General Surgery)

John E. Mazuski, MD, MS, PHD Professor of Surgery (General Surgery)

Patricia A McGuire, MD Instructor in Clinical Surgery (Plastic and Reconstructive Surgery)

Bryan F Meyers, MD Patrick and Joy Williamson Endowed Professor of Surgery (Cardiothoracic Surgery)

Jerry R Meyers, MD Assistant Professor of Clinical Surgery (General Surgery)

Kevin Joseph Mitchell, MD Instructor in Clinical Surgery (General Surgery)

Thalachallour Mohanakumar, PHD Jacqueline G. and William E. Maritz Professor of Surgery (General Surgery)

Jeffrey F Moley, MD Professor of Surgery (General Surgery)

Marc R Moon, MD Professor of Surgery (Cardiothoracic Surgery)

Amy M. Moore, MD Assistant Professor of Surgery (Plastics and Reconstructive Surgery)(Pending Executive Faculty Approval)

Julian C Mosley, MD Instructor in Clinical Surgery (General Surgery)

Nabil A Munfakh, MD Professor of Surgery (Cardiothoracic Surgery)

Matthew G Mutch, MD Associate Professor of Surgery (General Surgery)

Terence M. Myckatyn, MD Associate Professor of Surgery (Plastic and Reconstructive Surgery)

Neal Neuman, MD Instructor in Clinical Surgery (Urologic Surgery)

Thomas E Niesen, MD Instructor in Clinical Surgery (General Surgery)

Richard James Nissen, DDENT, MS Assistant Professor of Clinical Surgery (Plastic and Reconstructive Surgery)

Anthony Ian Nunez, MD Instructor in Clinical Surgery (Cardio Surgery)

George A Oliver, MD Assistant Professor Emeritus of Clinical Surgery (General Surgery)

Margaret Olsen, MPH, PHD Research Associate Professor of Surgery (Public Health Sciences)

Tiffany Medlin Osborn, MPH, MD Associate Professor of Surgery (General Surgery)

Pamela L Owens, MS, PHD Research Assistant Professor of Surgery (Public Health Sciences)

Sharad P Parikh, Instructor in Clinical Surgery (General Surgery)

Charles L Parks, MD Instructor in Clinical Surgery (General Surgery)

Jeffrey Andrew Parres, MD Instructor in Clinical Surgery (Urologic Surgery)

Michael K Pasque, MD Professor of Surgery (Cardiothoracic Surgery)

Kamlesh Babulal Patel, MD Assistant Professor of Surgery (Plastic & Reconstructive Surgery)

G. Alexander Patterson, MD Evarts A. Graham Professor of Surgery (Cardiothoracic Surgery)

Enrique Pedro Perinetti, MD, PHD Instructor in Clinical Surgery (Urologic Surgery)

Daniel D Picus, MD Professor of Surgery (General Surgery)

Mary Politi, MPH, MD Assistant Professor of Surgery (General Surgery)

Sunil Prasad, MD Assistant Professor of Surgery (Cardiothoracic Surgery)

Varun Puri, MD, MS Assistant Professor of Surgery (Cardiothoracic Surgery)

Sabarinathan Ramachandran, MS, PHD Research Instructor in Surgery (General Surgery)

Kathleen G Raman, MPH, MD Assistant Professor of Surgery (General Surgery)

Ricardo Rao, MD Instructor in Clinical Surgery (General Surgery)

Antonella Luisa Rastelli, MD Instructor in Surgery (General Surgery)
Frank O Richards, MD Assistant Professor Emeritus of Clinical Surgery (General Surgery)
Shale M Rifkin, MD Assistant Professor of Clinical Surgery (General Surgery)
Brian G Rubin, MD Professor of Surgery (General Surgery)
Nael E. A. Saad, MBBCH Assistant Professor of Surgery (General Surgery)
Adnan Sadiq, MD Assistant Professor of Surgery (Cardiothoracic Surgery)
Bashar Safar, MD Assistant Professor of Surgery (General Surgery)
Jacqueline Mitsouko Saito, MD Assistant Professor of Surgery (Pediatric Surgery)
Luis A Sanchez, MD Gregorio A. Sicard Distinguished Professor
Luis A Sanchez, MD Professor of Surgery (General Surgery)
Donald C Sauer, MD Assistant Professor Emeritus of Clinical Surgery (General Surgery)
Stefano Schena, MD, PHD Assistant Professor of Surgery (Cardiothoracic Surgery)
Douglas J Schuerer, MD Associate Professor of Surgery (General Surgery)
Richard B Schuessler, MS, PHD Research Professor of Surgery (Cardiothoracic Surgery)
Maryls E Schuh, MD Instructor in Clinical Surgery (General Surgery)
Homayoun Sedighi, DDENT Assistant Professor of Clinical Surgery (Plastic and Reconstructive Surgery)
Debra L Seoane, MD Instructor in Clinical Surgery (General Surgery)
Courtney Shands III, MD Instructor in Clinical Surgery (Urologic Surgery)
Surendra Shenoy, MD, PHD Professor of Surgery (General Surgery)
Gregorio A Sicard, MD Professor of Surgery (General Surgery)
Scott C Silvestry, MD Associate Professor of Surgery (Cardiothoracic Surgery)
David Siroospour, MD Assistant Professor of Clinical Surgery (General Surgery)
Alison K Snyder-Warwick, MD Assistant Professor of Surgery (Plastic and Reconstructive Surgery)
Robert Ellis Southard, MD Assistant Professor of Surgery (General Surgery)
Dirk M Spitzer, PHD Research Instructor in Surgery (General Surgery)
Alan Joel Stein, MD Assistant Professor of Clinical Surgery (Urologic Surgery)
Steven M Strasberg, MD Pruett Professor of Surgery (General Surgery)
Seth A Strope, M PH, MD Assistant Professor of Surgery (Urologic Surgery)
Herbert Sunshine, MD Instructor in Clinical Surgery (Urologic Surgery)
Siobhan Sutcliffe, MHS, MS, PHD Assistant Professor of Surgery (General Surgery)
Marissa Morningstar Tenenbaum, MD Assistant Professor of Surgery (Plastic and Reconstructive Surgery)
Robert W Thompson, MD Professor of Surgery (General Surgery)
Adetunji Toriola Assistant Professor of Surgery (General Surgery)
Ralph J Torrence, MD Instructor in Clinical Surgery (Urologic Surgery)
Erica J Traxel, MD Assistant Professor of Surgery (Urologic Surgery)
Thomas H Tung, MD Associate Professor of Surgery (Plastic and Reconstructive Surgery)
Javier Esteban Varela, M PH, MD Associate Professor of Surgery (General Surgery)
Suresh Vedantham, MD Professor of Surgery (General Surgery)
Adam Mark Vogel, BE, MD Assistant Professor of Surgery (Pediatric Surgery) (Pending Executive Faculty Approval)
Howard S Walker, MD Instructor in Clinical Surgery (Cardiothoracic Surgery)
Michael Harold Wall, MD Professor of Surgery (Cardiothoracic Surgery)
Jean S Wang, MD, PHD Assistant Professor of Surgery (General Surgery)
Yian Wang, MD, PHD Professor of Surgery (General Surgery)
Brad W. Warner, MD Jessie L. Ternberg, M.D., PhD. Distinguished Professor of Pediatric Surgery in Surgery (Pediatric Surgery)
Erika Waters, M PH, MS PSYC, PHD Assistant Professor of Surgery (General Surgery)
Leonard B Weinstock, MD Assistant Professor of Clinical Surgery (General Surgery)
Jason R Wellen, MD Assistant Professor of Surgery (General Surgery)
Brad C White, MD Instructor in Clinical Surgery (Urologic Surgery)
Bruce I White, MD Instructor in Clinical Surgery (Plastic and Reconstructive Surgery)
Robert David Winfield Assistant Professor of Surgery (General Surgery) (Pending Executive Faculty Approval)
Paul Edward Wise, MD Associate Professor of Surgery (General Surgery)
Kathleen Y. Wolin, D SC Assistant Professor of Surgery (General Surgery)
Albert S Woo, MD Assistant Professor of Surgery (Plastic and Reconstructive Surgery)
Yan Yan, MD, MHS, PHD Research Associate Professor of Surgery (General Surgery)
William D Yates, MD Instructor in Clinical Surgery (General Surgery)
Ming You, MD, PHD Adjunct Professor of Surgery (General Surgery)
Robert A Young, JD, MD, MS Instructor in Clinical Surgery (Plastic and Reconstructive Surgery)
Alan Zajarias, MD Assistant Professor of Surgery (Cardiothoracic Surgery)
Darryl Adam Zuckerman, MD Assistant Professor of Surgery (General Surgery)

Department's Website

http://www.surgery.wustl.edu/
Alvin J. Siteman Cancer Center

Introduction

The Alvin J. Siteman Cancer Center at Barnes-Jewish Hospital and Washington University School of Medicine is designated by the National Cancer Institute as a Comprehensive Cancer Center, the only such center in Missouri and for a 240-mile radius. Siteman is world-renowned for its basic science, translational and prevention and control research. Siteman enhances, promotes and supports interactions among the cancer research efforts throughout the campus and has provided an organizational focus and stimulus for researchers to continue to produce cutting-edge institutional research. The Center holds more than $160 million in extramural funding for cancer research and is organized into eight research programs (Cancer and Developmental Biology, Tumor Immunology, Hematopoietic Development and Malignancy, Cellular Proliferation, Oncologic Imaging, Prevention and Control, Translational and Clinical Research, Breast Cancer Research). Siteman also provides 14 shared resource facilities to its more than 362 research members. Shared resource facilities include: Biologic Therapy Core Facility; Biomedical Informatics Core; Biostatistics Core; Clinical Trials Core; Embryonic Stem Cell Core; Hereditary Cancer Core; Flow Cytometry Core; High-Throughput Screening Core; Imaging Response Assessment Core (IRAC); Molecular and Genomic Analysis Core; Proteomics Core; Small Animal Cancer Imaging Core; Health Behavior, Communication and Outreach Core; and Tissue Procurement Core. Siteman is integrated with The Genome Institute at Washington University, the Institute for Public Health and the Mallinckrodt Institute of Radiology. The Siteman Program for the Elimination of Cancer Disparities (PECaD), in partnership with the community, addresses racial, ethnic, socioeconomic and other disparities in cancer-related education, care and research.

The Siteman Cancer Center provides numerous opportunities in cancer research education and training through seminars, conferences, courses and research opportunities. Individuals are encouraged to contact Siteman at (800) 600-3606 or via the website, www.siteman.wustl.edu, for more information. A few educational opportunities are listed below.

Siteman Basic Science Seminar Series

Siteman sponsors a campuswide seminar series for basic cancer biology topics on the second or third Thursday of each month at 4 p.m. at the Eric P. Newman Education Center. Speaker information can be found on the Siteman website at www.siteman.wustl.edu. Attendance is open.

Research Program Specific Activities

All of the Siteman Cancer Center research programs have regular internal seminars or work-in-progress discussion groups, and these frequently involve students and postdocs.

• The Cancer and Developmental Biology Program runs a weekly laboratory research presentation seminar on Wednesdays at noon. Contact David Ornitz, MD, PhD, or Joshua Rubin, MD, PhD, for more information.

• The Tumor Immunology Program utilizes the long-standing Immunology Seminar Series sponsored by the Department of Pathology and Immunology on Mondays in the Eric P. Newman Education Center. The program also hosts a monthly Translational Tumor Immunology meeting on Monday evening. There are also dedicated sessions allotted to the topics of Tumor Immunology. Contact Robert Schreiber, PhD, or William Gillanders, MD, for more information.

• The Hematopoietic Development and Malignancy Program convenes a weekly journal club to review primary and published data. About three-fourths of the presentations are in a journal club format, with the remainder from participating laboratories. Current literature regarding hematopoiesis and current trials in gene therapy are presented and critically reviewed. Contact Dan Link, MD, or Peter Westervelt, MD, PhD, for more information.
• The Cellular Proliferation Program sponsors a weekly seminar series titled “Signaling/Cell Cycle.” Each academic year, up to six speakers from outside the medical school are invited to present their current work. On weeks alternating with invited speakers, graduate students and postdoctoral research fellows working in the laboratories of our members present their research. Contact Helen Piwnica-Worms, PhD, or Greg Longmore, MD, for more information.

• The Translational and Clinical Research Program features research meetings and external speakers through disease-oriented cancer research working groups:
  – genitourinary/prostate
  – gastrointestinal/colorectal/pancreatic
  – gynecologic/endometrial
  – lung
  – neuro-oncology
Contact Lee Ratner, MD, PhD, or Jeffrey Moley, MD, for more information.

• The Marilyn Fixman Clinical Cancer Conference is held on the third Wednesday of each month in the Steinberg Amphitheater on the Barnes-Jewish Hospital north campus. Speakers at this conference present a disease-based clinical topic at each session. Contact the Siteman administration office at (314) 454-8439 for the schedule.

• The Prevention and Control Program has multiple regular research group meetings in nicotine dependence and smoking cessation, early detection, cancer communication and intervention research and psychosocial factors. Contact Sarah Gehlert, PhD, or Matthew Kreuter, PhD, for more information.

• The Oncologic Imaging Program holds a monthly seminar series featuring external speakers on selected Fridays at noon. Contact Michael Welch, PhD, or Farrokh Dehdashti, MD, for more information.

• The Breast Research Program has multiple regular research group meetings and regular seminars and discussions. Contact Matthew Ellis, MB, BChir, PhD, or Jason Weber, PhD, for more information.

Two developing programs, the Neuro Oncology and the DNA Metabolism and Repair groups have ongoing seminars and external speakers. For Neuro Oncology, the contact is David Gutmann, MD, PhD, and for the DNA Metabolism and Repair the contacts are Barry Sleckman, MD, PhD, or Tom Ellenberger, DVM, PhD, for more information.

• There are more than 15 weekly/biweekly disease-based clinical conferences, and these can be found on the Siteman website.

**Cancer Biology Special Emphasis Pathway**

The Siteman Cancer Center launched a special emphasis pathway as part of the Division of Biology and Biomedical Sciences graduate program in 2002. Siteman sponsors six to seven total (new and continuing) predoctoral students per year in the program, which focuses on multidisciplinary cancer biology research. The pathway includes participation in a cancer biology course each spring (two different courses alternating each year), the Siteman basic science seminar series, work-in-progress interlab meetings, and journal clubs with at least one of the eight Siteman research programs. For more information on this program, contact Lee Ratner, MD, PhD.

**Faculty**

*Timothy J Eberlein* Director, Alvin J. Siteman Cancer Center; Spencer T. and Ann W. Olin Distinguished Professor; and Bixby Professor and Chairman, Department of Surgery, Washington University School of Medicine

*John F DiPersio* Deputy Director, Alvin J. Siteman Cancer Center; Virginia E. and Samuel J. Golman Endowed Professor of Oncology; and Chief, Division of Oncology, Washington University School of Medicine

*Jeffrey F Moley* Associate Director of Translational and Clinical Investigation, Alvin J. Siteman Cancer Center; Professor of
Surgery; and Chief, Section of Endocrine and Oncologic Surgery, Washington University School of Medicine

Michael J Welch Associate Director of Oncologic Imaging, Alvin J. Siteman Cancer Center, and Professor of Radiology, Mallinckrodt Institute of Radiology, Washington University School of Medicine

Melanie D Baxter Genetic/Clinical Counselor, Siteman Cancer Center, Washington University School of Medicine

Graham A. Colditz Associate Director, Prevention and Control, Alvin J. Siteman Cancer Center, and Niess-Gain Professor in the School of Medicine, Department of Surgery, Washington University School of Medicine

Teresa L Deshields Manager, Psycho-Oncology Service, Alvin J. Siteman Cancer Center

Steven M Devine Co-Director, Alvin J. Siteman Cancer Center Good Manufacturing Practice Facility, Assistant Professor of Medicine, Division of Oncology, Section of Bone Marrow Transplantation and Stem Cell Biology, Washington University School of Medicine

Amanda Kracen Psychologist, Psycho-Oncology Service, Siteman Cancer Center

Shannon Nanna Psychologist, Psycho-Oncology Service, Alvin J. Siteman Cancer Center

Samuel I Achilefu Professor of Radiology, Division of Radiological Sciences, Mallinckrodt Institute of Radiology, Washington University School of Medicine

Joseph JH Ackerman William Greenleaf Eliot Professor and Chair, Department of Chemistry, Washington University School of Medicine

Kassandra Alcaraz Doctoral Student, George Warren Brown School of Social Work, Washington University

D. Craig Allred Professor of Pathology and Immunology, Division of Anatomic and Molecular Pathology, Washington University School of Medicine

Catherine M. Appleton Assistant Professor of Radiology and Chief, Section of Breast Imaging, Washington University School of Medicine

Maria Q. Baggstrom Assistant Professor of Medicine, Division of Oncology, Section of Medical Oncology, Washington University School of Medicine

Elizabeth A Baker Professor of Community Health, Division of Behavioral Science and Health Education, Saint Louis University School of Public Health

Dennis M Balfe Professor of Radiology, Mallinckrodt Institute of Radiology, Washington University School of Medicine

Tammie LS Benzinger Assistant Professor of Radiology, Division of Diagnostic Radiology, Section of Neuroradiology, Mallinckrodt Institute of Radiology, Washington University School of Medicine

Mikhail Y. Berezin Assistant Professor of Radiology, Division of Radiological Sciences, Mallinckrodt Institute of Radiology, Washington University School of Medicine

Elisa H Birnbaum Professor of Surgery, Division of General Surgery, Section of Colon and Rectal Surgery, Washington University School of Medicine

Ingrid B Borecki Associate Professor of Genetics, Washington University School of Medicine

Keith E Brandt William G. Hamm Professor of Surgery, Division of Plastic and Reconstructive Surgery, Washington University School of Medicine

Steven L Brody Professor of Medicine, Division of Pulmonary and Critical Care Medicine, Washington University School of Medicine

Peter MJ Burgers Professor of Biochemistry and Molecular Biophysics, Washington University School of Medicine

Charlene A. Caburnay Research Assistant Professor of Public Health, George Warren Brown School of Social Work, Washington University

Kenneth R. Carson Assistant Professor of Medicine, Division of Oncology, Section of Medical Oncology, Washington University School of Medicine

Grant A. Challen Assistant Professor of Medicine, Division of Oncology, Section of Molecular Oncology, Washington University School of Medicine

Li-Wei Chang Research Instructor of Pathology and Immunology, Division of Laboratory and Genomic Medicine, Washington University School of Medicine

Li-Shiuin Chen Assistant Professor of Psychiatry, Washington University School of Medicine

Rebecca D Chernock Assistant Professor of Pathology and Immunology, Division of Anatomic and Molecular Pathology,
University School of Medicine

Harvey S Glazer  Professor of Radiology, Division of Diagnostic Radiology, Section of Chest Radiology, Mallinckrodt Institute of Radiology, Washington University School of Medicine

Simon P Goedegebuure  Assistant Professor of Surgery, Section of General Surgery, Division of Endocrine and Oncologic Surgery, Washington University School of Medicine

Robert L. Grubb, III  Assistant Professor of Surgery, Division of Urologic Surgery, Washington University School of Medicine

Robert L. Grubb, Jr.  Herbert Lorie Professor of Neurological Surgery, Washington University School of Medicine

Lannis E. Hall  Assistant Professor of Clinical Radiation Oncology, Washington University School of Medicine

Anjum Hassan  Assistant Professor of Pathology and Immunology, Division of Anatomic Pathology, Washington University School of Medicine

Jay P Heiken  Professor of Radiology and Chief, Section of Abdominal Imaging, Mallinckrodt Institute of Radiology, Washington University School of Medicine

Cheryl R. Herman  Assistant Professor of Radiology, Division of Diagnostic Radiology, Section of Breast Imaging, Washington University School of Medicine

Erik D. Herzog  Professor of Biology, Neuroscience Program, Washington University

Chyi-Song Hsieh  Assistant Professor of Medicine, Division of Rheumatology, Washington University School of Medicine

Andrew J.W. Huang  Professor of Ophthalmology and Visual Sciences, Washington University School of Medicine

Peter A Humphrey  Ladenson Professor of Pathology and Chief, Division of Anatomic and Molecular Pathology, Washington University School of Medicine

Eva A. Hurst  Assistant Professor of Medicine, Division of Dermatology, Washington University School of Medicine

Shin-Ichiro Imai  Assistant Professor of Developmental Biology, Washington University School of Medicine

Jennifer L Ivanovich  Research Assistant Professor of Surgery, Washington University School of Medicine

Jerry J Jaboin  Assistant Professor of Radiation Oncology, Washington University School of Medicine

Kimberly J. Johnson  Assistant Professor of Public Health, George Warren Brown School of Social Work, Washington University

Stephen L Johnson  Professor of Genetics, Washington University School of Medicine

Emily S. Jungheim  Assistant Professor of Obstetrics and Gynecology, Division of Reproductive Endocrinology and Infertility, Washington University School of Medicine

Cheryl M. Kelly  Assistant Professor of Community Health, Division of Behavioral Science and Health Education, Saint Louis University School of Public Health

Evan D. Kharasch  Russell D. and Mary B. Shelden Professor of Anesthesiology and Chief, Division of Clinical and Translational Research, Washington University School of Medicine

Seung K. Kim  Assistant Professor of Radiology, Division of Diagnostic Radiology, Section of Interventional Radiology, Mallinckrodt Institute of Radiology, Washington University School of Medicine

Eynav Y Klechevsky  Assistant Professor of Pathology and Immunology, Division of Immunobiology, Washington University School of Medicine

Eric E. Klein

Ira J Kodner  Solon and Bettie Gershman Professor of Surgery, Division of General Surgery, Section of Colon and Rectal Surgery, Washington University School of Medicine

Kerry Kornfeld  Associate Professor of Developmental Biology, Washington University School of Medicine

Daniel Kreisel  Associate Professor of Surgery, Division of Cardiothoracic Surgery, Washington University School of Medicine

Friederike Kreisel  Assistant Professor of Pathology and Immunology, Division of Anatomic and Molecular Pathology, Washington University School of Medicine

Shashikant Kulkarni  Associate Professor of Pathology and Immunology, Division of Laboratory and Genomic Medicine, Washington University School of Medicine

David I Kuperman  Instructor of Medicine, Division of Oncology, Section of Medical Oncology, Washington University School of Medicine

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Richard Laforest Assistant Professor of Radiology, Division of Radiological Sciences, Washington University School of Medicine

Susan E. Lanzendorf Associate Professor of Obstetrics and Gynecology, Division of Reproductive Endocrinology and Infertility, Washington University School of Medicine

Suzanne Lapi Assistant Professor of Radiology, Division of Radiological Sciences, Mallinckrodt Institute of Radiology, Washington University School of Medicine

Steven J Lawrence Assistant Professor of Medicine, Division of Infectious Diseases, Washington University School of Medicine

Deborah J. Lenschow Assistant Professor of Medicine, Division of Rheumatology, Washington University School of Medicine

Jeffrey R. Leonard Associate Professor of Neurosurgery, Division of Pediatric Neurosurgery, Washington University School of Medicine

Eric C. Leuthardt Assistant Professor of Neurosurgery, Washington University School of Medicine

Greg D Longmore Professor of Medicine, Division of Oncology, and Co-Director, Section of Molecular Oncology, Washington University School of Medicine

Gregg T Lueder Professor of Ophthalmology and Visual Sciences, Washington University School of Medicine

Jingqin (Rosy) Luo Instructor of Biostatistics, Washington University School of Medicine

Robert H Mach Professor of Radiology, Division of Radiological Sciences, Mallinckrodt Institute of Radiology, Washington University School of Medicine

George A. Macones Mitchell and Elaine Yanow Professor and Chair of Obstetrics and Gynecology, Washington University School of Medicine

Pamela AF Madden Professor of Psychiatry, Washington University School of Medicine

Naganathan B. Mani Assistant Professor of Radiology, Division of Diagnostic Radiology, Section of Interventional Radiology, Mallinckrodt Institute of Radiology, Washington University School of Medicine

Daniel S. Marcus Research Assistant Professor of Radiology, Washington University School of Medicine

L. Stewart Massad Professor of Obstetrics and Gynecology, Division of Gynecologic Oncology, Washington University School of Medicine

Douglas J McDonald Professor of Orthopaedic Surgery, Washington University School of Medicine

Robert C McKinstry III Professor of Radiology and Chief, Pediatric Radiology and Pediatric Neuroradiology, Mallinckrodt Institute of Radiology, Washington University School of Medicine

Robert P Mecham Alumni Endowed Professor of Cell Biology and Physiology, Washington University School of Medicine

Bryan F Meyers Patrick and Joy Williamson Endowed Chair in Cardiothoracic Surgery and Chief, Section of Thoracic Surgery, Washington University School of Medicine

Craig A. Micchelli Assistant Professor of Developmental Biology, Washington University School of Medicine

Stephen M Moerlein Associate Professor of Radiology, Division of Radiological Sciences, Mallinckrodt Institute of Radiology, Washington University School of Medicine

Kelle H. Moley James P. Crane Professor of Obstetrics and Gynecology, Washington University School of Medicine

Barbara S Monsees Professor of Radiology, Section of Breast Imaging, Washington University School of Medicine

Christopher J Moran Professor of Radiology, Division of Diagnostic Radiology, Section of Neuroradiology, Mallinckrodt Institute of Radiology, Washington University School of Medicine

Jeremiah J. Morrissey Research Professor of Anesthesiology, Division of Clinical and Translational Research, Washington University School of Medicine

Daniel K. Mullady Assistant Professor of Medicine, Division of Gastroenterology, Washington University School of Medicine

Matthew G Mutch Associate Professor of Surgery, Division of General Surgery, Section of Colon and Rectal Surgery, Washington University School of Medicine

Terence M. Myckatyn Associate Professor of Surgery, Division of Plastic and Reconstructive Surgery, Washington University School of Medicine

April E Nesin Instructor in Clinical Pediatrics, Washington University School of Medicine

Rodney D. Newberry Associate Professor of Medicine, Division of Gastroenterology, Washington University School of Medicine

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Brian Nussenbaum Christy J. and Richard S. Hawes III Professor and Vice Chairman for Clinical Affairs, Department of Otolaryngology, Washington University School of Medicine

Margaret A Olsen Research Associate Professor of Medicine, Division of Infectious Diseases, Washington University School of Medicine

Dipanjan Pan Research Assistant Professor of Medicine, Division of Cardiovascular Diseases, Washington University School of Medicine

Randal C Paniello Associate Professor of Otolaryngology, Division of Head and Neck Surgical Oncology, Washington University School of Medicine

Parag J. Parikh Assistant Professor of Radiation Oncology, Washington University School of Medicine

TS Park Shi H. Huang Professor of Neurosurgery and Chief, Division of Pediatric Neurosurgery, Washington University School of Medicine

Alec Patterson Evarts A. Graham Professor of Surgery and Chief, Division of Cardiothoracic Surgery, Washington University School of Medicine

Jacqueline E Payton Assistant Professor of Pathology and Immunology, Division of Laboratory and Genomic Medicine, Washington University School of Medicine

John D Pfeifer Professor of Pathology and Immunology, Division of Anatomic Pathology, Washington University School of Medicine

Mary C. Politi Assistant Professor of Surgery, Division of Public Health Sciences, Washington University School of Medicine

Katherine P Ponder Professor of Medicine, Division of Hematology, Washington University School of Medicine

Matthew A Powell Associate Professor of Obstetrics and Gynecology, Division of Gynecologic Oncology, Washington University School of Medicine

Jason Q. Purnell Assistant Professor of Public Health, George Warren Brown School of Social Work, Washington University

Antonella L Rastelli Assistant Professor of Medicine, Division of Oncology, Section of Breast Oncology, Washington University School of Medicine

David E Reichert Associate Professor of Radiology, Division of Radiological Sciences, Mallinckrodt Institute of Radiology, Washington University School of Medicine

Valerie C. Reichert Assistant Professor of Radiology, Division of Diagnostic Radiology, Section of Breast Imaging, Washington University School of Medicine

Caron Rigden Assistant Professor of Medicine, Division of Oncology, Section of Medical Oncology, Washington University School of Medicine

Catherine M Roe Research Assistant Professor of Neurology, Washington University School of Medicine

Buck E Rogers Professor of Radiation Oncology, Division of Radiation and Cancer Biology, Washington University School of Medicine

John W Rohrbaugh Associate Professor of Psychiatry, Washington University School of Medicine

Henry D Royal Professor of Radiology and Chief, Division of Nuclear Medicine, Mallinckrodt Institute of Radiology, Washington University School of Medicine

Nael Saad Assistant Professor of Radiology, Division of Diagnostic Radiology, Section of Interventional Radiology, Mallinckrodt Institute of Radiology, Washington University School of Medicine

J. Evan Sadler Professor of Medicine and Chief, Division of Hematology, Washington University School of Medicine

Bashar Safar Assistant Professor of Surgery, Division of General Surgery, Section of Colon and Rectal Surgery, Washington University School of Medicine

Mark S Sands Associate Professor of Medicine, Division of Oncology, Section of Stem Cell Biology, Washington University School of Medicine

Paul Santiago Associate Professor of Neurosurgery, Washington University School of Medicine

Kenneth B Schechtman Associate Professor of Biostatistics, Washington University School of Medicine

Tim B Schedl Professor of Genetics, Washington University School of Medicine

Robert D Schreiber Alumni Endowed Professor of Pathology and Immunology, Section of Immunology and Molecular Pathology, Washington University School of Medicine

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Julie K. Schwarz Assistant Professor of Radiation Oncology, Washington University School of Medicine

Clay F. Semenkovich Herbert S. Gasser Professor and Chief of Endocrinology, Metabolism and Lipid Research, Washington University School of Medicine

Jiuya Shao Research Instructor of Neurology, Washington University School of Medicine

Girdhar G. Sharma Research Instructor of Radiation Oncology, Division of Cancer Biology, Washington University School of Medicine

Vijay Sharma Associate Professor of Radiology, Washington University School of Medicine

Kathleen CF Sheehan Assistant Professor of Pathology and Immunology, Division of Immunobiology, Washington University School of Medicine

Monica Shokeen Instructor of Radiology, Washington University School of Medicine

Steven M Sorscher Associate Professor of Medicine, Division of Oncology, Section of Medical Oncology, Washington University School of Medicine

Gershon J. Spector Professor of Otolaryngology, Division of Head and Neck Surgical Oncology, Washington University School of Medicine

William F Stenson Dr. Nicholas V. Costrini Professor of Gastroenterology and Inflammatory Bowel Disease, Washington University School of Medicine

Keith Stockerl-Goldstein Associate Professor of Medicine, Division of Oncology, Section of Bone Marrow Transplantation, Washington University School of Medicine

Steven M Strasberg Pruett Professor of Surgery, Section of Hepatobiliary-Pancreatic and Gastrointestinal Surgery, Washington University School of Medicine

Rama Suresh Assistant Professor of Medicine, Division of Oncology, Section of Medical Oncology, Washington University School of Medicine

Siobhan Sutcliffe Assistant Professor of Surgery, Division of Public Health Sciences, Washington University School of Medicine

Robert A Swarm Associate Professor of Anesthesiology and Chief, Division of Pain Management, Washington University School of Medicine

Susan C Sylvia Clinical Psychologist and Program Director, Medical Crisis Coping Center, St. Louis Children's Hospital

Yuan-Chuan Tai Associate Professor of Radiology, Division of Radiological Sciences, Mallinckrodt Institute of Radiology, Washington University School of Medicine

John-Stephen A Taylor Professor of Chemistry, Washington University School of Medicine

Marie E Taylor Assistant Professor of Radiation Oncology, Washington University School of Medicine

Sharlene A Teefey Professor of Radiology, Division of Diagnostic Radiology, Section of Abdominal Imaging, Mallinckrodt Institute of Radiology, Washington University School of Medicine

Steven L Teitelbaum Wilma and Roswell Messing Professor of Pathology, Division of Anatomic Pathology, Washington University School of Medicine

Sandeep K. Tripathy Assistant Professor of Medicine, Division of Gastroenterology, Washington University School of Medicine

Peter G Tuteur Associate Professor of Medicine, Division of Pulmonary and Critical Care Medicine, Washington University School of Medicine

Emil R Unanue Professor of Pathology and Immunology, Washington University School of Medicine

Ravindra Uppaluri Associate Professor of Otolaryngology, Division of Head and Neck Surgical Oncology, Washington University School of Medicine

Nina D Wagner-Johnston Assistant Professor of Medicine, Division of Oncology, Section of Medical Oncology, Washington University School of Medicine

Lihong V. Wang Gene K. Beare Distinguished Professor in Biomedical Engineering, Washington University School of Medicine

Ting Wang Assistant Professor of Genetics, Washington University School of Medicine

Xiaowei Wang Assistant Professor of Radiation Oncology, Division of Cancer Biology, Washington University School of Medicine

Yian Wang Professor of Surgery, Division of General Surgery, Washington University School of Medicine

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Alison J Whelan  Professor of Medicine, Division of Medical Genetics, Washington University School of Medicine

Kimberly N Wiele  Assistant Professor of Radiology, Division of Diagnostic Radiology, Section of Breast Imaging, Mallinckrodt Institute of Radiology, Washington University School of Medicine

Franz J Wippold  Professor of Radiology and Chief, Section of Neuroradiology, Mallinckrodt Institute of Radiology, Washington University School of Medicine

Kathleen Y Wolin  Assistant Professor of Surgery, Division of Public Health Sciences, Washington University School of Medicine

Ricardo J Wray  Associate Professor of Community Health, Division of Behavioral Science/Health Education, School of Public Health, Saint Louis University

Neill M Wright  Herbert Lourie Professor in Neurological Surgery, Washington University School of Medicine

Zhongsheng You  Assistant Professor of Cell Biology and Physiology, Washington University School of Medicine

Chenbo Zeng  Research Instructor of Radiology, Mallinckrodt Institute of Radiology, Washington University School of Medicine

Dong Zhou  Research Instructor of Radiology, Division of Radiological Sciences, Mallinckrodt Institute of Radiology, Washington University School of Medicine

Imran Zoberi  Associate Professor of Radiation Oncology, Washington University School of Medicine

Alvin J. Siteman Cancer Center Website

http://www.siteman.wustl.edu
Teaching and Research Divisions and Programs

Teaching and Research Divisions and Programs

Division of Biostatistics

The Division of Biostatistics engages in research, biostatistical consultation and training activities. Interested students may pursue intensive studies through the Master of Science in Biostatistics, a Certificate in Genetic Epidemiology, or individual courses offered by the division. Research activities include several independent lines of research as well as numerous collaborative projects with various departments of the medical school. Biostatistical consultation represents an important activity of the division, providing expertise in both theoretical and applied areas. The division participates actively in a post-doctoral training.

Research activities of the division span a wide range of topics dealing with a number of disease areas and provide research opportunities at both theoretical and applied levels. Several research projects involve close interaction and collaboration with a number of research groups at the Washington University Medical Center. Independent research programs of the division deal with genetic epidemiology of cardiovascular and metabolic diseases, bioinformatics and statistical issues in imaging sciences and Alzheimer’s disease. A number of theoretical and applied problems are addressed, including nature-nurture resolution and identification of the genetic basis of risk factor domains such as lipids, obesity, blood pressure and hypertension, and insulin resistance and diabetes; exploration of gene-gene and gene-environment interactions; and multivariate associations among multiple risk factors.

Current and recent collaborative research projects include: a coordinating center for a multicenter study to assess the genetic basis of response to exercise training (HERITAGE); a coordinating center for a multicenter NETWORK study on the genetics of hypertension (HyperGEN), and the Family Blood Pressure Program (FBPP); coordinating centers for a multicenter study to assess the genetic basis of response to intervention through incorporation of gene-environment interactions (Gensalt); the coordinating center for the PRIDE program with the goal of mentoring junior faculty in underrepresented minorities and/or faculty with disabilities into independent research careers in biomedical sciences; the coordinating center for the Data Analysis and Coordinating Center (DACC) which tracks the education and careers of people who have participated in the NHGRI Diversity Action Plan (DAP) and NHGRI T-32s that concentrate on genomics and genetics; important collaborative studies through support roles as biostatistics cores on the Washington University Institute of Clinical and Translational Sciences, the Alzheimer’s Disease Research Center, the Adult Children’s Study, Healthy Aging and Senile Dementia (HASD), The Dominantly Inherited Alzheimer Network (DIAN), the Alvin J. Siteman Cancer Center, the Silent Infarct Transfusion Study, the Optimization of Chemotherapy for Control and Elimination of Onchodermatitis, the Washington University Sporias Center, the Washington University Intellectual & Developmental Disabilities Research Center and Childhood Obesity Treatment. We also have a significant role on studies that focus on lung transplants, asthma, COPD, pediatric heart and ischemic heart disease and on several epidemiological research projects developing methods for increasing public awareness and utilization of measures that are known to decrease the likelihood of developing heart disease and for encouraging behaviors that will improve prognosis following a heart attack.

The division provides consultation through the Washington University Institute of Clinical and Translational Sciences (ICTS), the Washington University Intellectual & Developmental Disabilities Research Center, and the Biostatistics Consulting Service in a wide range of areas including the statistical design of experiments and clinical trials, protocol development, database management, analysis of data and interpretation of results. Some of the areas of special strength and expertise include cardiovascular biostatistics, computing and statistical packages. The division is well-equipped to provide assistance at the stage of preparing grant applications, including careful discussions of study design, sample size calculations, randomization schemes, computer resources and data analysis.
One of the division's specialties is statistical genetics/genetic epidemiology. We participate in a postdoctoral training in this area. Statistical genetics is the scientific discipline that deals with an analysis of the familial distribution of traits, with a view to understanding any possible genetic basis. However, one cannot study genes except as they are expressed in people living in certain environments, and one cannot study environmental factors except as they affect people who have certain genotypes. Statistical genetics is a unique interdisciplinary field that seeks to understand both the genetic and environmental factors and how they interact to produce various diseases and traits in humans. These studies are carried out in relatively large samples of participants in relevant populations, thus, the population history and dynamics often come into play. Population dynamics alter the frequency and distribution of both genetic and environmental factors, and thus, their net effect on the phenotype of interest. Some population characteristics also can be exploited for the purposes of gene discovery and mapping because the history has affected the genomic structure in a way that specific genotypes associated with disease can be identified.

Human diseases have been the focal point of these studies, and recent efforts are directed toward complex disorders such as coronary heart disease, hypertension, diabetes, obesity, cancer, atopy and allergies, and neurological and psychiatric disorders, to name a few. It is commonly thought that an understanding of the genetic underpinnings of such disorders will revolutionize medicine in the 21st century, enabling better preventive measures, diagnosis, prognosis and novel treatments. Given progress in the Human Genome Project, in computing power and in the creation of powerful statistical methods of analysis, we are poised to shepherd this revolution. It is an exciting time in science, and opportunities for careers in statistical genetics/genetic epidemiology abound.

**NIH Sponsored Training Programs**

**Summer Institute for Training in Biostatistics (SIBS) with a concentration on Biostatistics Research in Disease and Genetic Epidemiology (BRIDGE)** is a six-week residential summer training program in biostatistics, sponsored by the National Heart, Lung and Blood Institute (NHLBI) and the National Center for Research Resources (NCRR), for quantitatively-oriented undergraduates and beginning graduate students who are interested in the biological and health sciences. SIBS-BRIDGE at Washington University School of Medicine has a concentration on statistical genetics/genetic epidemiology, and bioinformatics. Our goal is to demonstrate that biostatistics is useful and important for modern biomedical research, and that doing biostatistical research can also be exciting and fun! Available for summers 2011 and 2012. Visit the website at http://www.biostat.wustl.edu/sibs/.

The PRIDE Summer Institute in Cardiovascular Genetic Epidemiology with a focus on Cardiovascular and other Heart, Lung, Blood and Sleep Disorders: An all-expense-paid summer institute continues in the summer of 2011 with funding from the NHLBI. The goal is to mentor junior faculty in underrepresented minorities and/or faculty with disabilities into independent research careers in biomedical sciences. For further information, visit the website at http://www.biostat.wustl.edu/pridege/or contact the program administrator at pride-ge@wubios.wustl.edu.

**Graduate Studies**

The Division of Biostatistics sponsors a Master of Science in Biostatistics (MSIBS), and a Certificate in Genetic Epidemiology. The Division had sponsored the The Genetic Epidemiology Masters of Science (GEMS) program from 2002 - 2012. In 2012 the GEMS program was streamlined into the MSIBS program. Students who would benefit from the GEMS program should look into the Statistical Genetic pathway of the MSIBS program.

**Master of Science in Biostatistics (MSIBS) Program (M21)**

This 18-month, 43 credit hour program offers excellent training in Biostatistics and Statistical Genetics for students who earned undergraduate or higher degrees, with majors in mathematics, statistics, computer science, biomedical engineering or other related major. It prepares graduates for rewarding employment in academia, industry and government, as well as for further graduate studies. For more information, visit http://www.biostat.wustl.edu/msibs/.

**Certificate in Genetic Epidemiology**

We offer a Certificate in Genetic Epidemiology, which is earned after successful completion (with a minimum of a “B” average) of six core courses plus labs (17 credit hours) that are normally offered to
master’s candidates. For more information, visit http://www.biostat.wustl.edu/gems/prospective_students/cert.shtml. To earn the certificate, these courses may be taken over one or two years:

- M21 503 Statistical Computing with SAS (summer)
- M21 515 Fundamentals of Genetic Epidemiology (summer)
- M21 550 Introduction to Bioinformatics (summer)
- M21 5483 Human Linkage and Association Analysis (fall)
- M21 560 Biostatistics I (first half of fall semester)
- M21 570 Biostatistics II (second half of fall semester)

**Location**

The MSIBS program is located in the Division of Biostatistics, on the third floor of Shriners Building (706 S. Euclid Ave. at Clayton Road, at the corner of Euclid and Clayton), Rooms 3301-3312.

**Further Information**

Visit our website, https://biostatistics.wustl.edu/Pages/Main.aspx or contact the program manager at gems@wubios.wustl.edu, (314)362-1052 or msibs@wubios.wustl.edu, (314) 362-1384.

The MSIBS Program
Division of Biostatistics
Campus Box 8067
660 S. Euclid Ave.
St. Louis, MO 63110-1093
Telephone: (314) 362-1052 or 362-1384
Fax: (314) 362-2693

**Registration Instructions**

All students will register with the program manager. Before registering, current Washington University students must obtain appropriate consent from their division or department. Students outside the MSIBS program wishing to enroll in individual courses must have permission of the course master.

**Academic Calendar**

The MSIBS programs begin approximately July 1 each year with preparatory workshops, followed by intensive summer semester courses. For the fall and spring courses, the MSIBS program follows the calendar of the College of Arts & Sciences. See the current MSIBS calendar.

**Courses**

**M21 501 SELECTED TOPICS IN MODERN BIOSTATISTICS**
Department: Division of Biostatistics
Course master: C. Charles Gu
Credit hours: 3 units
Frequency: Summers of 2011 and 2012

An intensive six-week summer course, designed as a survey course that gives broad exposure to the basic concepts, methodology and application of select topics in modern biostatistics, with a concentration in genetic epidemiology and bioinformatics. Current topics will be discussed in six major areas organized by week: principles of modern biostatistics, basics of epidemiology and clinical trials, longitudinal and survival data analysis, fundamentals of genetic epidemiology, introduction to bioinformatics and a primer of pharmacogenetics. Students will hear from expert biostatisticians in their fields about challenging, real-world questions, then focus on selected important concepts and methods, analyze case studies and participate in guided reading and group discussions of publications in biostatistics and bioinformatics research. Prerequisites: Math 3200 Elementary to Intermediate Statistics and Data Analysis at WU or the equivalent. Open only to students admitted to the SIBS program sponsored by NHLBI and NRCC.

Contact the SIBS program administrator for details, to register or to obtain the required permission of the course master: sibs@wubios.wustl.edu or telephone (314) 362-3950.
M21 502 SUMMER PRACTICUM IN BIOSTATISTICS
Department: Division of Biostatistics
Course master: C. Charles Gu
Credit hours: 3-6 units
Frequency: Summers of 2011 and 2012

Companion course of M21 501: Selected Topics in Modern Biostatistics. All activities are designed around the six weekly topics of the didactic course: principles of modern biostatistics, basics of epidemiology and clinical trials, longitudinal and survival data analysis, fundamentals of genetic epidemiology, introduction to bioinformatics, and primer of pharmacogenetics. This practicum reinforces the concepts and methods to which the students are exposed in M21 501, by solving real-life problems using actual datasets. Students will gain authentic experiences of a career biostatistician through a series of practical activities, including computer labs using real datasets, discussion groups for guided reading of publications, student projects and presentations and summer seminars. Qualified students with advanced experience and strong interest in pursuing a career in biostatistics research will be considered for internship opportunities and a possible second-year 6-unit booster including additional training in teaching assistantship and real-world research experiences. Prerequisites: Same as for M21 501 Selected Topics in Modern Biostatistics. Open only to students admitted to the SIBS program sponsored by NHLBI and NRCC.

Contact the SIBS program administrator for details, to register or to obtain the required permission of the course master: sibs@wubios.wustl.edu or telephone (314) 362-3950.

M21 503 STATISTICAL COMPUTING WITH SAS®
Department: Division of Biostatistics
Course masters: Karen Schwander
Credit hours: 2 units
Frequency: Every summer (Section 1 – early July, Section 2 – late August)

Intensive hands-on summer training in SAS® during nine full weekdays. Students will learn how to use the SAS® system for handling, managing and analyzing data. Instruction is provided in the use of the SAS® programming language, procedures, macros and SAS® SQL. The course will include exercises using existing programs written by SAS® experts. Instruction manual and computer lab will be provided. This course meets the prerequisite for M21 560 Biostatistics I offered in fall. The registration/grade option of "Audit" is not available.

Participants are required to participate in the Computing/Unix Workshop and are strongly encouraged to take the Math/Statistics Workshop offered free of charge immediately prior to this course in early July.

For details, to register and to obtain the required permission of the course master, contact the MSIBS program manager: msibs@wubios.wustl.edu or (314) 362-1384.

M21 515 FUNDAMENTALS OF GENETIC EPIDEMIOLOGY
Department: Division of Biostatistics
Course masters: Treva Rice and Yun Ju Sung
Credit hours: 3 units
Frequency: Every summer

Intensive two-week summer course. Lectures cover causes of phenotypic variation, familial resemblance and heritability, Hardy-Weinberg Equilibrium, ascertainment, study designs and basic concepts in genetic segregation, linkage and association. The computer laboratory portion is designed as hands-on practice of fundamental concepts. Students will gain practical experience with various genetics computer programs (e.g., SOLAR, MERLIN, QTDT and PLINK). Auditors will not have access to the computer lab sessions.

Participants are strongly encouraged to participate in the computing/UNIX Workshop offered free of
charge prior to this course in early July. For details, to register and to obtain the required permission of the course master, contact the MSIBS program manager at msibs@wubios.wustl.edu or (314) 362-1384.

**M21 550 INTRODUCTION TO BIOINFORMATICS**  
Department: Division of Biostatistics  
Course master: Jingqin (Rosy) Luo, Co-Coursemaster: C. Charles Gu  
Credit hours: 3 units  
Frequency: Every summer

Intensive two-week summer course designed to provide broad exposure to the basic concepts, methodology and application of bioinformatics to solve biomedical problems. Specifically, students will learn the basics of online genomic databases and database mining tools and will acquire understanding of mathematical algorithms in genome sequence analysis (alignment analysis, gene finding/predicting), gene expression microarray (genechip) analysis, and the impact of recent developments such as protein microarrays or whole-genome DNA chips for genome-wide association studies. Students will also take computer labs and learn basics of bioinformatics tools and databases (BLAST/WUBLAST, Prospector, etc.), practice basics of R/Bioconductor programming, and apply specialized R packages to solve bioinformatics problems pertinent to real medical research of human diseases. Auditors will not have access to the computer lab sessions.

Participants are strongly encouraged to participate in the computing/UNIX Workshop offered free of charge prior to this course in early July.

For details, to register and to obtain the required permission of the course master, contact the MSIBS program manager at msibs@wubios.wustl.edu or (314) 362-1384.

**M21 5483 HUMAN LINKAGE AND ASSOCIATION ANALYSIS**  
Department: Department of Genetics  
Course master: John Rice  
Credit hours: 3 units  
Frequency: Every fall

Basic genetic concepts: meiosis, inheritance, Hardy-Weinberg Equilibrium, linkage, segregation analysis; Linkage analysis: definition, crossing over, map functions, phase, LOD scores, penetrance, phenocopies, liability classes, multipoint analysis, non-parametric analysis (sibpairs and pedigrees), quantitative trait analysis, determination of power for mendelian and complex trait analysis; linkage disequilibrium analyses: allelic association (case control designs and family bases studies), QQ and Manhattan plots, whole genome association analysis; population stratification; quantitative trait analysis; measured genotypes and variance components. Hands-on computer lab experience doing parametric linkage analysis with the program LINKAGE, model free linkage analyses with Genehunter and Merlin, power computations with SLINK, quantitative trait analyses with SOLAR, LD computations with Haploview and WGAViewer, and family-based and case-control association analyses with PLINK and SAS. The methods and exercises are coordinated with the lectures, and students are expected to understand underlying assumptions and limitations and the basic calculations performed by these computer programs. Auditors will not have access to the computer lab sessions. Prerequisite: M21 515 Fundamentals of Genetic Epidemiology. Cross-listed as L41 5483.

For details, to register and to obtain the required permission of the course master, contact the MSIBS program manager at msibs@wubios.wustl.edu or (314) 362-1384.

**M21 560 BIOSTATISTICS I**  
Department: Division of Biostatistics  
Course masters: Kenneth Schechtman and Kathryn Trinkaus  
Frequency: Every fall (ending mid-October)

This course is designed for students who want to develop a working knowledge of basic methods in
biostatistics. The course is focused on biostatistical and epidemiological concepts and on practical hints and hands-on approaches to data analysis rather than on details of the theoretical methods. We will cover basic concepts in hypothesis testing, will introduce students to several of the most widely used probability distributions, and will discuss classical statistical methods that include t-tests, chi-square tests, regression analysis, and analysis of variance. Both in-class examples and homework assignments will involve extensive use of SAS. Prerequisite: M21 503, Statistical Computing with SAS®, or student must have good practical experience with SAS®.

For details, to register and/or to obtain the required permission of the Course Master, contact the Program Manager (msibs@wubios.wustl.edu or telephone 362-1384).

M21 570 BIOSTATISTICS II
Department: Division of Biostatistics
Course masters: Kenneth Schechtman and Kathryn Trinkaus
Credit hours: 3 units
Frequency: Every fall (from mid-October to mid-December)

This course is designed for students who have taken Biostatistics I or the equivalent and who want to extend their knowledge of biostatistical applications to more modern and more advanced methods. Biostatistical methods to be discussed include logistic and Poisson regression, survival analysis, Cox regression analysis, and several methods for analyzing longitudinal data. Students will be introduced to modern topics that include statistical genetics and bioinformatics. The course will also discuss clinical trial design, the practicalities of sample size and power computation and meta analysis, and will ask students to read journal articles with a view towards encouraging a critical reading of the medical literature. Both in-class examples and homework assignments will involve extensive use of SAS. Prerequisite: M21 560, Biostatistics I or its equivalent as judged by the course masters.

For details, to register, and/or to obtain the required permission of the course master, contact the program manager (msibs@wubios.wustl.edu or telephone 362-1384).

M21 617 STUDY DESIGN AND CLINICAL TRIALS
Department: Division of Biostatistics
Course masters: Jingxia (Esther) Liu
Credit hours: 3 units
Frequency: Every spring

The course will focus on statistical and epidemiological concepts of study design and clinical trials. Topics include: different phases of clinical trials, various types of medical studies (observational studies, retrospective studies, adaptive designs, and comparative effectiveness research), and power analysis. Study management and ethical issues are also addressed. Students will be expected to do homework and to practice power analysis during lab sessions. Prerequisites: M21 560 Biostatistics I and M21 570 Biostatistics II. Permission of the course master required.

Contact the MSIBS program manager for details and for the required permission of the course master at MSIBS@wubios.wustl.edu or (314) 362-1384.

M21 618 SURVIVAL ANALYSIS:
Department: Division of Biostatistics
Course masters: Gina Marie D'Angelo
Credit hours: 3 units
Frequency: Every spring

This course will cover the basic applied and theoretical aspects of models to analyze time-to-event data. Basic concepts will be introduced including the hazard function, survival function, right censoring, and the Cox-proportional hazards (PH) model with fixed and time dependent covariates. Additional topics will include regression diagnostics for survival models, the stratified PH model, additive hazards regression
models and multivariate survival models. Prerequisites: Calculus I and II, M21-560 Biostatistics I and M21-570 Biostatistics II. Permission of the course master required.

Contact the MSIBS program manager for details and for the required permission of the course master at MSIBS@wubios.wustl.edu or (314) 362-1384.

**M21 621 COMPUTATIONAL STATISTICAL GENETICS**
Department: Division of Biostatistics
Course masters: Michael Province and Aldi Kraja
Credit hours: 3 units
Frequency: Every spring

This course covers the theory and application of both classical and advanced algorithms for estimating parameters and testing genomic hypotheses connecting genotype to phenotype. Students learn the key methods by writing their own program to do (simplified) linkage analysis in pedigrees in SAS for a simulated dataset provided by the course master. Topics covered in the course include Maximum Likelihood theory for pedigrees and unrelated individuals, Maximization routines such as Newton-Raphson and the E-M Algorithm, Path analysis, Variance components, Mixed model algorithms, the Elston-Stewart and Lander-Green Algorithms, Simulated Annealing and the Metropolis Hastings algorithm, Bayesian and MCMC methods, Coalescent Theory, Haplotyping Algorithms, Genetic Imputation Algorithms, Permutation/Randomization Tests, classification and Data Mining Algorithms, Population Stratification and Admixture Mapping Methods, Loss of Heterozygosity models, Gene Networks, Copy Number Variation methods, Multiple comparisons corrections and Power and Monte-carlo simulation experiments. Course not available to auditors. Prerequisites: M21 5483 Human Linkage & Association, M21 560 Biostatistics I, and M21 570 Biostatistics II or, with permission of the course master.

**M21 580 ADVANCED TOPICS IN BIOSTATISTICS**
Department: Division of Biostatistics
Course master: Chengjie Xiong
Credit hours: 3 units
Frequency: Every spring

The primary objective of this course is to provide students with a solid foundation of most used statistical methods in biology and medicine. The focus will be on likelihood-based approaches for general linear models, random effect models, general and generalized linear mixed models, longitudinal data analysis, meta-analysis, categorical data analyses, multivariate analysis, as well as Bayesian approaches for some of these models. The emphasis will be on linear statistical models, including both the methodology (the interpretation of the models and parameters, point and confidence interval estimation, hypothesis tests) and their biomedical applications as well as the computer implementation. SAS® will be extensively used for computation, both in homework assignments and term projects. Auditors will not have access to the computer lab sessions. Prerequisites: M21 560 Biostatistics I and M21 570 Biostatistics II. Permission of the course master required.

**M21 618 RESEARCH METHODS FOR GENOMIC STUDIES OF HUMAN DISEASE**
Department: Division of Biostatistics
Course master: C. Charles Gu
Credit hours: 3 units
Frequency: Every spring

The course provides in-depth coverage of quantitative aspects of biomedical studies employing contemporary '-omics' technologies and a global approach to uncovering disease biology. Students will acquire understanding of research design and methods including statistical theory and concepts, computational algorithms, and popular programming tools for conducting such studies. We will cover seasonally selected set of topics concerning the study of human diseases from among genomic analysis of variations, transcriptomic study of regulatory mechanisms, metagenomic analysis of human diseases,
and research methods for epigenomics, proteomics, and interactomics and pathway analysis. As part of this course, students will perform critical appraisal of case studies employing these research methods and take part in classroom discussions of their appraisals. It is expected that by taking this course, students will gain a solid grasp of how contemporary 'omics' technologies are used in studying human diseases, what are important design and analytical issues involved, where to find related resources, and how to deal with practical difficulties in real disease studies. Prerequisites: M21 550: Intro to Bioinformatics and permission of the course master.

M21 630 INTERNSHIP
Department: Division of Biostatistics
Course masters: D.C. Rao and J. Philip Miller
Credit hours: 6 units
Frequency: Every summer beginning in 2012

The primary goal of the Internship program is for all students to acquire critical professional experience so that they will be well prepared to enter the job market upon graduation. This provides an opportunity for students to test-drive the job market, develop contacts, build marketable skills and perceive likes and dislikes in the chosen field. Students are required to spend a total of 440 hours in the laboratories of their chosen mentors. One of two types of projects may be pursued as part of the Internship experience. A student may elect to pursue a "Data Analysis Project" involving data management and extensive analyses of data which may lead to a publication-quality manuscript (possibly earning co-authorship for the student). Alternatively, a student may choose a highly focused research-oriented project and carry out "Mentored Research" by working closely with the mentor. In this case, the student will assist the mentor by preparing a publication-quality manuscript as part of the Internship. In either case, as part of the Internship requirements, each student will submit a one-page abstract of the work performed as part of the internship and will give a 5-minute presentation of the Internship experience. Internship presentations will be scheduled in late summer. The grade for each student will be determined in consultation with the mentor. Internships will be facilitated and coordinated by an Internship Committee consisting of professors J. Philip Miller & D.C. Rao (Co-Chairs), Ken Schechtman and Chengjie Xiong. Available to Master of Science in Biostatistics (MSIBS) students only.

M21 640 BIOSTATISTICS CONSULTING LAB
Department: Division of Biostatistics
Course masters: Karen Steger-May and Kenneth Schechtman
Credit hours: 1 unit
Frequency: Every fall beginning in 2012

All M.S. in Biostatistics students are required to take this course with the primary goal to train the students to develop competency for collaborating with and providing biostatistics consultation services to clinical and applied scientists. Students will be trained to develop the art and skill necessary to be good collaborators. Students will work on real time consultation projects and will have opportunities to interact with the Principal Investigators on the projects under close supervision from experienced faculty and staff. This is an invaluable opportunity for students to develop contacts with potential employers upon graduation. Prerequisites: M21 560 Biostatistics I and M21 570 Biostatistics II. Required of Master of Science in Biostatistics (MSIBS) students and to pre-selected others who have the prerequisites and the specific permission of the course master.

M21 650 THESIS
Department: Division of Biostatistics
Course masters: Gina D'Angelo and Chengjie Xiong
Credit hours: 6 units
Frequency: Every fall beginning in 2012

The master's thesis may involve conducting and reporting a comprehensive data analysis or conducting research and reporting on the focused methodological problem. The latter may include a computer simulation approach to solve a problem, an in-depth review of available methods in a certain topical area,
or developing new methods. Each student will work closely with a mentor who has expertise in biostatistics or a related quantitative field. Three bound copies and an electronic copy of the thesis must be submitted to the program manager by the deadline determined by the university for December graduation. A thesis committee consisting of Drs. Gina D’Angelo and Chengjie Xiong (co-chairs), Feng Gao, and Rosy Luo will examine all theses submitted and determine the grade in consultation with the mentors. Available to Master of Science in Biostatistics (MSIBS) students by invitation only.

**Link to Genetic Epidemiology Masters of Science**

**Faculty**

Ingrid B Borecki, MS, PHD Associate Professor of Biostatistics  
Ling Chen, MPH, MS, PHD Research Instructor in Biostatistics  
Robert Culverhouse, MA, PHD Research Assistant Professor of Biostatistics  
Gina Marie D’Angelo, PHD, SCM Assistant Professor of Biostatistics  
Lisa De Las Fuentes, MD Assistant Professor of Biostatistics  
Feng Gao, PHD Research Assistant Professor of Biostatistics  
Mae Etsuko Gordon, MS, PHD Professor of Biostatistics  
Chi Gu, MS, PHD Associate Professor of Biostatistics  
Steven M Kymes, PHD Research Associate Professor of Biostatistics  
Jingxia Liu, MS, PHD Research Instructor in Biostatistics  
Jingqin Luo, MS, MS1, PHD Instructor in Biostatistics  
J. Philip Miller Professor of Biostatistics  
Jay Francis Piccirillo, MD Professor of Biostatistics  
Michael A Province, MA, PHD Professor of Biostatistics  
Dabeeru C Rao, MS, PHD Director of the Division of Biostatistics  
Dabeeru C Rao, MS, PHD Professor of Biostatistics  
John P Rice, MA, PHD Professor of Biostatistics  
Treva Kay Rice, MA, PHD Research Associate Professor of Biostatistics  
Nancy L. Saccone, MS, PHD Associate Professor of Biostatistics  
Kenneth B Schechtman, MA, MS, PHD Associate Professor of Biostatistics  
William D Shannon, MS, PHD Professor of Biostatistics  
Jeannette M Simino, MS, MS1, PHD Research Instructor in Biostatistics  
Yun Ju Sung, PHD Research Assistant Professor of Biostatistics  
Chengjie Xiong, MS, PHD Associate Professor of Biostatistics  
Yan Yan, MD, MHS, PHD Research Associate Professor of Biostatistics

**Link to Division of Biostatistics Web Site**

https://biostatistics.wustl.edu/Pages/Main.aspx
Humanities Program in Medicine

The Humanities Program in Medicine is a University-wide program dedicated to providing students with a broadened exposure to areas other than the biological sciences during their medical education. These areas include clinical ethics, jurisprudence, history, economics, literature and health policy. The program is directed from the dean’s office at the School of Medicine and utilizes faculty at the Danforth Campus, medical school and School of Law, as well as extramural faculty.

The mission of the program is to generate an appreciation of the relationship of human experience, culture, institutions and values to medicine and thereby help to educate professionals who will apply that understanding to their activities as practicing physicians, biomedical researchers and/or medical administrators. This program is an enhancement of an already strong curriculum to prepare medical students to pursue their professional careers more effectively. It takes a major role in the Practice of Medicine course integrated over the first two years of medical school. In addition, several electives are offered during the fourth year.

Courses

M80 541 TOPICS IN MEDICINE/MEDICAL HUMANITIES
Instructor: Stephen S. Lefrak, MD, 454-7116

This is a required course for the first year of medical school. This interdepartmental course is highly coordinated with Medical Humanities. Students select topics of interest for in-depth study initiated by discussions in a small-group seminar format. Development of topics includes input from a broad range of disciplines, including sociology, philosophy, ethics, history, communications and economics, as well as the biological and medical sciences. It is offered as a menu of mini-courses, each limited to approximately 15 students. Each section consists of six 1.5-hour sessions with a faculty member(s) devoted to an individual subject. Each student must select one course from the menu.

Link to Web Site

http://pohim.wustl.edu/

Interdisciplinary and Capstone Courses

M80 849 FOURTH-YEAR CAPSTONE
Instructor(s): L. Michael Brunt, M.D.; Thomas De Fer, M.D.
Elective Contact: Dr. Brunt, 454-7194; Dr. De Fer, 747-4366
Other Information: Additional details will be provided at a later date.
Enrollment limit per period: 40
Valid start weeks for this 2-week course are: Weeks 39-40

The goal of this two-week course is to provide opportunities for students to refine the cognitive and clinical skills needed to enter graduate medical training. The target group for this course is primarily students entering clinical residency training positions. As outlined in the course objectives, topics to be covered include acute clinical problems commonly faced on the inpatient service or emergency room, review of key diagnostic testing, basic procedural skills and patient and family communications regarding informed consent and end-of-life issues. Course work will be divided between didactic and small group discussions and “hands-on” skills practice and simulation. Parts of the course will be tailored to individuals entering internal medicine, pediatrics and surgical disciplines. Students will be assessed by performance on simulation exercises and a written exam.

Learning Objectives
By the end of this course:
1. The student will be able to respond to common acute patient problems as tested with simulation by rapidly assessing the patient, requesting relevant information from the patient, medical record, and nursing staff, generate a differential diagnosis and order appropriate diagnostic testing and initial treatment for the problem.

2. Demonstrate competence in a set of designated technical skills commonly needed in residency including NG tube placement, basic suturing, Foley catheter placement and IV placement.

3. Demonstrate the ability to interpret diagnostic tests, such as chest X-ray and EKG, commonly used for initial evaluation of acute medical problems.

4. Demonstrate and discuss the key elements of obtaining informed consent, dealing with difficult patient and family situations, end-of-life issues and pain management.

Alternative clinical skills sessions will be offered on an ad hoc basis for students as have been done in the past. These will be available in March and April depending on demand and faculty availability. These will not be “for credit”.

**M04 582 01 ALZHEIMER’S DISEASE IN THE CLINIC AND THE LAB**

Instructors: John C. Morris, MD, and other faculty affiliated with the Knight Alzheimer’s Disease Research Center, Department of Neurology. For information, contact Jennifer Phillips at 286-2882 or phillipsj@abraxas.wustl.edu.

Alzheimer’s disease (AD) affects more than 5 million Americans, and will increase substantially as our population ages. Of the top 10 causes of death in the United States, AD is the only disease without any way to prevent, cure or slow the progression. The cost of caring for AD patients has been estimated at over $172 billion annually, and the human toll on patients and family members can be devastating. Patients and families turn to primary care and specialist physicians (e.g., neurologists, psychiatrists, geriatricians) for answers to their plight. The good news for physicians is that research on AD is moving at a rapid pace. Exciting advances in our understanding of AD etiology, early diagnosis and treatment are changing the landscape of dementia care.

Students in this course are offered a dynamic and interactive overview of the most exciting areas of AD clinical and science research from one of the top Alzheimer’s disease research centers in the world. Find out how amyloid plaques and other AD-related abnormalities form in the brain and new discoveries about their possible reversal! The course includes lecture and student presentation components, plus opportunities to observe patients and families in an active neurology memory disorder clinic, participate in neuropathology evaluations of demented individuals, experience and administer psychometric evaluation tools and interact with investigators from the fields of molecular genetics, cell biology and neuropathology.

**M35 851 CLINICAL ASPECTS OF AGING AND DEMENTIA**

Instructor(s): John C. Morris, MD, and B. Joy Snider, MD, PhD, Jennifer Phillips, MPA (coordinator), 286-2882

Location: Knight Alzheimer's Disease Research Center (ADRC) 4488 Forest Park Ave. (two-story brick building at intersection with Taylor)

Elective Contact: Jennifer Phillips, MPA (coordinator), 286-2882, phillipsj@wustl.edu

Other Information: Contact Jennifer Phillips at least one week prior to first day of elective to set up orientation.

Enrollment limit per period: 1

Valid start weeks for 4-week blocks are: Weeks 9, 13, 17, 21, 33, and 37.

This elective focuses on the characterization of the clinical and cognitive features of healthy brain aging and the distinction of dementia from healthy aging. Experienced clinicians will review the differential diagnosis of dementia with the students, including Alzheimer’s disease, dementia with Lewy bodies, frontotemporal dementias, cerebrovascular disorders and affective disorders. The student will gain proficiency in interviewing techniques and in the neurologic examination of the geriatric patient, be introduced to neuropsychology, neuropathology, biomarkers, neuroimaging, genetics and other
biomedical procedures important in the diagnostic evaluation of older adults. Experience in community assessment and long-term care is provided. Demonstration of clinical trials of experimental agents used in memory disorders and practical aspects of the management of the demented patient and his or her family is provided. An interdisciplinary approach is emphasized and students will have opportunity to interact with physicians, nurse clinicians, psychologists and social workers. Students have the option of becoming certified in the Clinical Dementia Rating, the gold standard in dementia staging.

Student time distribution: Research and Clinical Patient Evaluation 80%, Conferences/Lectures 20%; Subspecialty Care 100%
Major teaching responsibility: Attending neurologists, psychiatrists and geriatricians involved in the evaluation of memory and aging
Patients seen/weekly: 6-12
On call/weekend responsibility: None
Graduate Programs

Applied Health Behavior Research

The Master of Science in Applied Health Behavior Research (MS AHBR) addresses the science of health behavior change and applies this to the development and evaluation of programs in clinical and community settings designed to improve health behavior. Sponsored by Washington University School of Medicine and offered through University College, the MS AHBR is a multidisciplinary, 30-unit program that focuses on the applied skills required for the development, management and evaluation of health behavior programs or research studies. Students enrolled in this program choose one of two concentrations: 1) Health Education, Program Planning and Evaluation; or 2) Health Behavior Research.

The MS AHBR degree can be pursued on a part-time basis, with most courses held during the late afternoon or evening hours to accommodate the working professional. Course work is typically completed in 2-3 years. Applications are reviewed on a rolling basis with a recommended program start in the fall semester of each year.

A 15-unit Graduate Certificate in Health Behavior Planning and Evaluation is also available. This certificate is designed primarily for individuals who work in agencies and organizations that develop, implement and evaluate health behavior programs and want the formal course work and skills to complement their experience in the field and enhance their professional opportunities.

Faculty

Director
Mario Schootman, PhD
University of Iowa, 1993 (Chief and Associate Professor of Epidemiology and Medicine, Division of Health Behavior Research, Departments of Internal Medicine and Pediatrics)

Associate Director
Irene Fischer, MPH
Saint Louis University, 1998 (Research Patient Coordinator, Division of Health Behavior Research, Departments of Internal Medicine and Pediatrics)

Instructors
Patricia A. Cavazos-Rehg, PhD
State University of New York, Buffalo, 2004 (Research Instructor, Department of Psychiatry)

Anjali D. Deshpande, PhD, MPH
Emory University, 2000; University of Oklahoma Health Sciences Center 1995 (Research Assistant Professor, Division of Health Behavior Research)

Michael Elliott, PhD
The Ohio State University School of Public Health, 2001  (Assistant Professor, Saint Louis University)

Cheryl A. Houston, PhD, RD, LD
Saint Louis University, 2000 (Director of Dietetics, Program in Dietetics, Department of Environmental Sciences, Fontbonne University)

Donna B. Jeffe, PhD
Washington University, 1993 (Research Assistant Professor, Division of Health Behavior Research, Departments of Internal Medicine and Pediatrics)

Jeanne Kloeckner, OTD, OTR/L
Washington University, 2010 (Clinical Specialist, Washington University Program of Occupational Therapy)

Amy McQueen, PhD
University of Houston, 2002 (Research Assistant Professor, Division of Health Behavior Research)

Shannon Nanna, PsyD
Pacific University, 2007 (Clinical Psychologist, Psycho-Oncology Services, Siteman Cancer Center)

Maria Perez, MA
University of Missouri, 2004 (Research Patient Coordinator, Division of Health Behavior Research)

Donald R. Rickert, PhD
Saint Louis University, 1984 (Professor, St. Louis College of Pharmacy)

Enbal Shacham, PhD
Indiana University, 2006 (Research Assistant Professor, School of Social Work)

Susan Sylvia, PhD
Washington University, 1997 (Clinical Psychologist)

Leigh E. Tenkku, PhD, MPH
Saint Louis University, 2007 (Assistant Professor and Director for Research, Department of Community and Family Medicine, Saint Louis University School of Medicine)

Link to Website


Audiology and Communication Sciences

The Program in Audiology and Communication Sciences (PACS) provides training and graduate programs in the fields of clinical audiology, deaf education, and speech and hearing sciences. Established at Central Institute for the Deaf (CID) in 1914, the training programs are now a member of a consortium of programs known as CID at Washington University School of Medicine, which also includes affiliated clinical services and research programs operated by the Department of Otolaryngology.

Doctor of Audiology (AuD)

The Doctor of Audiology (AuD) program is a four-year course of study that prepares students as independent clinical audiologists. Established in 1947, the program is among the oldest and most prestigious of its kind. Today, its curriculum serves as a national model, immersing students in academic course work, clinical experiences and research opportunities.

The audiology program is accredited by the American Speech-Language-Hearing Association (ASHA) and the Accreditation Commission for Audiology Education (ACAE). Graduates are eligible for national certification by ASHA.

Master of Science in Deaf Education (MSDE)

The Master of Science in Deaf Education (MSDE) program is a two-year course of study that prepares students as teachers of the deaf and hard of hearing. With its origins going back to 1914, the program is recognized internationally as one of the most prestigious of its kind in the world. The program's intensive curriculum, emphasis on immersion in practice teaching and experienced faculty attract students
nationally from a wide variety of backgrounds.

The deaf education program is accredited by the State of Missouri’s Department of Elementary and Secondary Education (DESE) and the Council on Education of the Deaf (CED). Graduates of the program are eligible for teacher certification in the State of Missouri (Deaf/Hearing Impaired, Birth-Grade 12) and for national certification by CED in the areas of early childhood and elementary education.

**Doctor of Philosophy (PhD) in Speech and Hearing Sciences**

The PhD program prepares students for academic and research careers in speech and hearing sciences. Established in 1947, the program is dedicated to fostering scientific inquiry in speech and hearing sciences and related disciplines. The program is administered through Washington University’s Graduate School of Arts & Sciences.

**Minor in Speech and Hearing Sciences**

The Minor in Speech and Hearing Sciences is designed for current undergraduate students interested in exploring topics related to human communication. Course work provides an overview of the fields of hearing, deafness, language and speech, with opportunities to explore related topics in more depth. This minor is especially valuable for students in fields such as psychology, education, philosophy-neuroscience-psychology (PNP) and linguistics, but has broad applicability for many fields of study. Course work completed as part of this minor can also be used to fulfill prerequisites for graduate studies in audiology, deaf education and speech-language pathology.

**Contact Information**

Further information may be obtained by contacting:

Washington University School of Medicine  
Program in Audiology and Communication Sciences  
Campus Box 8042  
660 S. Euclid Ave.  
St. Louis, MO 63110

Phone: (314) 747-0104  
Fax: (314) 747-0105  
Email: pacs@wusm.wustl.edu  
Web: http://pacs.wustl.edu

**Faculty**

**Professors (Joint)**

Barbara A. Bohne, PhD  
Washington University, 1971

Richard A. Chole, MD, PhD  
University of Minnesota, 1977

William W. Clark, PhD, Program Director  
University of Michigan, 1975

Nancy Tye Murray, PhD  
University of Iowa, 1984
Michael Valente, PhD
University of Illinois, 1975

Mark E. Warchol, PhD
Northwestern University, 1989

**Associate Professors (Joint)**

Jianxin Bao, PhD
University of Florida, 1992

Jill B. Firszt, PhD
University of Illinois, 1998

Keiko Hirose, MD
Harvard Medical School, 1993

Johanna G. Nicholas, PhD
Washington University, 1990

Kevin K. Ohlemiller, PhD
Northwestern University, 1990

L. Maureen Valente, PhD, Director of Audiology Studies
Washington University, 2005

**Assistant Professors (Joint)**

Lisa S. Davidson, PhD
Washington University, 2003

Brian T. Faddis, PhD
University of California-Davis, 1994

Heather J. Hayes, PhD, Director of Deaf Education Studies
Washington University, 2009

Timothy E. Hullar, MD
Harvard University, 1996

Roanne K. Karzon, PhD
Washington University, 1982

Rosalie M. Uchanski, PhD
Massachusetts Institute of Technology, 1988

**Instructors**

Lynda C. Berkowitz, MSSH
Washington University, 1983

Carl D. Bohl, DSc
University of Cincinnati, 1973

Christine M. Clark, MAEd
Maryville University, 1999

Christine H. Gustus, MSSH
Washington University, 1975

Barbara A. Lanfer, MAEd
University of Missouri-St. Louis, 1998

E. Tracy Mishler, AuD
Arizona School of Health Sciences, 2007

Lisa G. Potts, PhD
Washington University, 2006

Mary A. Shortal, MA
Washington University, 1976

Karen S. Stein, MAEd
Washington University, 1974

Julia L. West, MSSH
Washington University, 1995

Lecturers

A.U. Bankaitis, PhD
University of Cincinnati, 1995

Carol E. Bergmann, AuD
Arizona School of Health Sciences, 2003

Amanda L. Dunaway, MSDE
Washington University, 2006

Elizabeth A. Elliott, MAT
Webster University, 2004

Michelle A. Gremp, PhD
Washington University, 2006

Dave A. Harris, PhD
University of Cincinnati, 2005

Stanton C. Jones, AuD
Salus University, 2006

Christina M. Koehler, MSSH
Washington University, 2000

Karen R. Kupper, MSSH
Washington University, 1979

Robert J. Mareing, AuD
Pennsylvania College of Optometry, 2003

Jean S. Moog, MS
Washington University, 1964
Amanda J. Ortmann, MSSH
Washington University, 2003

Kimberly K. Ott, MS
Southern Illinois University – Edwardsville, 1981

Judy L. Peterein, AuD
Salus University, 2009

Justine L. Preston, MA
Washington University, 2006

Marie K. Richter, AuD
Salus University, 2009

Catherine M. Schroy, MSSH
Washington University, 2009

Brent P. Spehar, PhD
Washington University, 2005

Ellen R. White, MAEd, MSSH
Washington University, 2003

Professors Emeritus

David P. Pascoe, PhD

Link to Website

http://pacs.wustl.edu

Biology and Biomedical Sciences

The Division of Biology and Biomedical Sciences, organized in 1973, is a consortium of university departments that together provide interdisciplinary training for full-time doctoral students. This unique organization was formed because of the realization that research and training in modern biology transcend the limits of departmental structure. The faculty consists of members of seven preclinical departments in the School of Medicine — Anatomy and Neurobiology, Biochemistry and Molecular Biophysics, Cell Biology and Physiology, Genetics, Molecular Microbiology, Pathology and Immunology, and Developmental Biology; 11 clinical departments — Anesthesiology, Medicine, Neurological Surgery, Neurology, Obstetrics and Gynecology, Ophthalmology and Visual Sciences, Otolaryngology, Pediatrics, Psychiatry, Radiology and Surgery; the Department of Biology; the Departments of Chemistry and Psychology in the School of Arts & Sciences; and the Departments of Computer Science and Biomedical Engineering in the School of Engineering & Applied Science. More than 430 faculty are affiliated with one or more of 12 broad training programs: Biochemistry; Computational and Molecular Biophysics; Computational and Systems Biology; Developmental, Regenerative and Stem Cell Biology; Evolution, Ecology and Population Biology; Human and Statistical Genetics; Immunology; Molecular Cell Biology; Molecular Genetics and Genomics; Molecular Microbiology and Microbial Pathogenesis; Neurosciences; and Plant Biology. Faculty in these programs take responsibility for all divisional activities, including recruiting, admissions, advising and research training. In addition, many divisional courses and seminars are offered by the participating faculty.

Currently, more than 650 graduate students are enrolled in the division, including 195 students pursuing both the PhD and the MD through the Medical Scientist Training Program (see Degree Programs area of Admissions and Educational Programs section.) Requirements for the PhD include a series of courses tailored to a student’s background and interests, qualifying examinations, execution of laboratory
research and defense of a dissertation generated through original scientific investigation. Although
students enter the division through an affiliation with one of the 12 programs, it is possible for a student
to transfer to another program as interests evolve. During the first year, advisers are appointed to assist
students in selecting courses and seminars, as well as to help them in choosing three laboratory rotations
in which they will spend several months becoming acquainted with a particular area of scientific research.
Most students choose a research adviser by the end of the first year.

Applications for admission to the PhD programs of the division are due December 1 for matriculation the
following fall. Admission is based on demonstrated ability, future promise and the number of positions
currently available. Applicants should have completed rigorous undergraduate training in biology,
chemistry, physics, psychology, computer science, engineering or related fields at a high level of
scholastic achievement. It is required that each applicant take the aptitude test of the Graduate Record
Examination (GRE). Additional information and application for admission to the PhD programs may be
obtained from our website at dbbs.wustl.edu or by writing to the Director of Admissions, Washington
University School of Medicine, Campus Box 8226, 660 S. Euclid Ave., St. Louis, MO 63110-1093 (email:
admissions@dbbs.wustl.edu). Students who wish to pursue both the PhD and MD degrees must apply to
the Medical Scientist Training Program (see Degree Programs area of Admissions and Educational
Programs section of this website.)

Students admitted to the graduate programs are guaranteed full stipend and tuition support contingent
upon satisfactory performance. The stipend for the 2012-13 academic year will be $28,000 annually.
Tuition remission is provided to all students, and life, disability and health care also is provided by the
Medical Center Student Health Service. The division provides support for its PhD students from several
sources, including federally funded training grants provided by the National Institutes of Health.

Courses

The following graduate courses are offered by the Division of Biology and Biomedical Sciences, and they
are available both to PhD and MD students who meet the prerequisites for the appropriate course. Those
courses particularly relevant to a given department are cross-listed under the department in this Bulletin.

L41 (BIO) 501 THE HUMAN BODY: ANATOMY, EMBRYOLOGY, AND IMAGING
For full description, see Department of Anatomy and Neurobiology’s M05 501A Human Anatomy and
Development.

L41 (BIO) 5011 ETHICS AND RESEARCH SCIENCE
Instructors: Staff, Division of Biology and Biomedical Sciences, 362-3365
Exploration of ethical issues that research scientists encounter in their professional activities. Topics will
include, but are not limited to: student-mentor relationships, allegations of fraud, collaborators’ rights
and responsibilities, conflicts of interest, confidentiality and publications. Case study and scenario
presentations will provide focus for discussions. Prerequisite: open to graduate students engaged in
research. Six 90-minute sessions. Credit: 1 unit.

L41 (BIO) 5014 BIOTECH INDUSTRY INNOVATORS
Instructor: Erwin H. Peters, PhD, 862-4867
The Basics of Bio-Entrepreneurship investigates issues and decisions that inventor/scientists encounter
when they are considering the application and commercialization of early-stage scientific discoveries.
This course is intended for anyone interested in working in the life sciences industry as a chief scientist,
entrepreneur, manager, consultant or investor. It focuses on the issues and decisions that researchers
typically face when considering how a discovery might be moved from a university laboratory to actual
use. Credit: 3 units. Same as B63 MGT 500U.

L41 (BIO) 502 GENERAL PHYSIOLOGY
Instructor: Robert S. Wilkinson, PhD, 362-2300
This course applies the fundamental physiological mechanisms of cell biology to the functions of the
major organ systems of the body, namely, the cardiovascular, renal, respiratory, gastrointestinal and
endocrine systems. The course is intended primarily for first-year medical students. The Physiology and Microscopic Anatomy courses are closely coordinated within the same schedule. Course continues into the spring semester with a different schedule. Prerequisites: Bio 5061 or the equivalent and permission of course director. Credit: 6 units.

**L41 (BIO) 5053 IMMUNOBIOLOGY I**
Instructor: Paul Allen, PhD, 362-8758
Immunobiology I and II are a series of two courses taught by the faculty members of the Immunology Program. These courses cover in-depth modern immunology and are based on Janeway's Immunobiology 8th Edition textbook. In Immunobiology I, the topics include: basic concepts in immunology, innate immunity: the first lines of defense, the induce responses of innate immunity, antigen recognition by B-cell and T-cell receptors, the generation of lymphocyte antigen receptors, antigen presentation to T lymphocytes and signaling through immune system receptors. In Immunobiology II the topics include: the development and survival of lymphocytes, T cell-mediated immunity, the humoral immune response, dynamics of adaptive immunity, the mucosal immune system, failures of host defense mechanisms, allergy and allergic diseases, autoimmunity and transplantation, and manipulation of the immune response. These courses are open to graduate students. Advanced undergraduate students may take these courses upon permission of the course master. Prerequisite: DBBS students and advanced undergraduates with permission. Credit: 4 units.

**L41 (BIO) 5054 IMMUNOBIOLOGY II**
Instructor: Paul Allen, PhD, 362-8758
Immunobiology I and II are a series of two courses taught by the faculty members of the Immunology Program. These courses cover in-depth modern immunology and are based on Janeway's Immunobiology 8th Edition textbook. In Immunobiology I, the topics include: basic concepts in immunology, innate immunity: the first lines of defense, the induce responses of innate immunity, antigen recognition by B-cell and T-cell receptors, the generation of lymphocyte antigen receptors, antigen presentation to T lymphocytes and signaling through immune system receptors. In Immunobiology II the topics include: the development and survival of lymphocytes, T cell-mediated immunity, the humoral immune response, dynamics of adaptive immunity, the mucosal immune system, failures of host defense mechanisms, allergy and allergic diseases, autoimmunity and transplantation, and manipulation of the immune response. These courses are open to graduate students. Advanced undergraduate students may take these courses upon permission of the course master. Prerequisite: DBBS students and advanced undergraduates with permission. Credit: 4 units.

**L41 (BIO) 5066 BIOSTATISTICS FOR RESEARCH WORKERS**
For full description, see Division of Biostatistics, M21 505.

**L41 (BIO) 5068 FUNDAMENTALS OF MOLECULAR CELL BIOLOGY**
Instructor: John A. Cooper, MD, PhD, 362-3964
This is a core course for incoming graduate students in Cell and Molecular Biology programs to learn about research and experimental strategies used to dissect molecular mechanisms that underlie cell structure and function, including techniques of protein biochemistry. Enrolling students should have backgrounds in cell biology and biochemistry, such as courses comparable to L41 BIO 334 and L41 BIO 4501. The format is two lectures and one small group discussion section per week. Discussion section focuses on original research articles. Same as M15 5068 and M04 5068. Credit: 4 units. Same as E62 BME 5068.

**L41 (BIO) 5069 EXPANDING THE CENTRAL DOGMA: DETOURS BETWEEN GENOME AND PROTEOME**
Instructor: Heather True-Krob, PhD, 362-3934
How many genes are in the genome? That number is only the beginning of the story leading to a regulated, functional proteome. Recent discoveries suggest that the production and regulation of a functional proteome is quite complex. Several emerging themes may serve to regulate transcription and translation in ways we hadn’t considered. In this course we will take a look at these exciting new discoveries and recent twists on existing knowledge that increase our understanding of how the cell responds to internal and environmental changes. Prerequisites: Nucleic Acids. Credit 2 units.

**L41 (BIO) 5123 EXPERIMENTAL HEMATOPOIESIS JOURNAL CLUB**
Journal club in which papers that describe significant advances in the field of experimental hematopoiesis are discussed. Students are expected to present one paper per semester and attend the weekly (1 hour) session. No prerequisites. Credit: 1 unit.

**L41 (BIO) 5125 STUDENT-RUN CELL BIOLOGY JOURNAL CLUB**
Instructor: Robert W. Mercer, PhD, 362-6924
Participants (students) present summaries of current research published in various journals in the field of cell biology. A large component of this journal club includes coaching in oral presentation. Students receive one credit for regular participation and for making one presentation. Credit: 1 unit.

**L41 (BIO) 5128 CELL BIOLOGY OF EXTRACELLULAR MATRIX JOURNAL CLUB**
Instructor: Jeff Miner, PhD, 362-8235
This journal club covers a broad range of topics related to extracellular matrix and cell-cell communication, including the fields of biochemistry, molecular biology, cell biology and developmental biology. Speakers give a brief background to introduce the topic and then focus on one or two papers from the current literature. Presentations are given by students, faculty and postdoctorates. Students receive one credit for regular participation and for making one presentation. Credit: 1 unit.

**L41 (BIO) 5137 ION CHANNELS JOURNAL CLUB**
Instructor: Colin G. Nichols, PhD, 362-6630
Student will attend journal club every week and participate in group discussion of recent paper. Once per semester student will choose a paper and present it to the group. Credit: 1 unit.

**L41 (BIO) 5138 JOURNAL CLUB FOR THE MOLECULAR MECHANISM OF AGING**
Instructor: Shin-ichiro Imai, MD, PhD, 362-7228
Why do we age? What causes aging? How is our life span determined? This journal club will address such fundamental but challenging questions of aging and longevity. Recent studies on aging and longevity are now unveiling regulatory mechanisms of the complex biological phenomenon. We’ll cover the latest progress in this exciting field and stimulate discussions on a variety of topics including aging-related diseases. One hour of paper presentation or research talk and discussion per every two weeks. Prerequisite: Basic knowledge of molecular biology and genetics of model organisms, such as yeast, C. elegans, Drosophila and mouse. Registered students are expected to have at least one presentation for 1 unit credit. Credit: 1 unit.

**L41 (BIO) 5139 SEMINAR IN IMAGING SCIENCE AND ENGINEERING**
Instructor: Joseph O’Sullivan, PhD, 935-4173
This seminar course consists of a series of tutorial lectures on Imaging Science and Engineering with emphasis on applications of imaging technology. Students are exposed to a variety of imaging applications that vary depending on the semester, but may include multispectral remote sensing, astronomical imaging, microscopic imaging, ultrasound imaging and tomographic imaging. Guest lecturers come from several parts of the university. This course is required of all students in the Imaging Science and Engineering program; the only requirement is attendance. This course is graded Pass/Fail. Prerequisite: Admission to Imaging Science and Engineering Program.

**L41 (BIO) 5146 PRINCIPLES AND APPLICATIONS OF BIOLOGICAL IMAGING**
Instructors: Monica Shokeen, 362-8979, Joseph Culver, PhD, 747-1341, Joshua Shimony, MD, PhD, 362-5950
Principles and Applications of Biological Imaging will introduce the interdisciplinary nature of the imaging sciences and conduct a comprehensive survey of the array of interrelated topics that define biological imaging. The course will cover the basics of the optical, magnetic resonance, CT, SPECT and PET imaging modalities, and microscopy, while focusing on applications of imaging to different disease states, such as oncology, neurology, cardiology and pulmonary diseases. Prerequisites: One year each of Biology, Chemistry, Physics and Calculus. Credit: 3 units.

**L41 (BIO) 5147 CONTRAST AGENTS FOR BIOLOGICAL IMAGING**
Instructor: Carolyn J. Anderson, PhD, 362-8427
Contrast Agents in Biological Imaging will build the chemistry foundations for the design and use of contrast agents in imaging applications such as nuclear medicine, magnetic resonance imaging (MRI)
and optical imaging. The course will include lectures on the design of radiopharmaceuticals for gamma scintigraphy and positron emission tomography, MRI contrast agents and agents for optical imaging, including bioluminescence and fluorescence microscopy. Prerequisite: one year of general chemistry, one semester of organic chemistry. Credit 3 units. Same as L07 Chem 5147.

L41 (BIO) 5148 METABOLISM JOURNAL CLUB
Instructors: Daniel Ory, MD, 362-8737, Jean Schaffer, MD, 362-8717
The purpose of the Metabolism Journal Club is to introduce the graduate students to advanced topics spanning the biochemistry, cell biology and genetics of cellular and whole body metabolism. Under the guidance of the course directors (Drs. Ory and Schaffer), students will select recent topical articles for discussion in the weekly journal club. Students will be expected to provide a succinct introduction to the topic and lead discussion of the data presented in the journal article. Students will be evaluated on the basis of their presentation and their participation in the seminar throughout the semester. Prereqs: Successful completion of Fundamentals of Molecular Cell Biology (Bio 5068) and Nucleic Acids and Protein Biosynthesis (Bio 548). 1 unit.

L41 (BIO) 5149 HIGH THROUGHPUT, HIGH CONTENT, ASSAY DEVELOPMENT, SCREENING AND TARGET VALIDATION — PRINCIPLE AND PRACTICE
Instructor: Raphael Kopan, PhD, 747-5520
The objective of our course is to introduce students to the world of automation-based discovery science. We will discuss the power of this approach, its constraints and their practical solutions. Specifically, we will introduce the class to the range of available assay tool kits (detection modalities), and the principles that apply towards assay development, library selection (compound, RNAi) and the translation of benchtop methods to automated platforms. We will also discuss sources of error and statistical tools for analyzing large datasets, the hit validation process and lead optimization. Along the way, we will hear from individual investigators describing their own academic or industry screens and critique the growing literature describing results born from high throughput/high content approaches. We realize that high throughput screening raises philosophical issues such as the merit of discovery science vs. hypothesis-driven research, big science, the role of technology in opening new fields of research, etc. We encourage the students to engage with us in these debates while covering the nuts and bolts of high throughput experiments. Prereqs: Sound foundation in at least one of: biochemistry, cell biology, developmental biology, microbiology, virology, statistics or computational biology. Credit variable, max 3 units.

L41 (BIO) 5151 RNA BIOLOGY JOURNAL CLUB
Instructors: Daniel Ory, MD, 362-8737, Jean Schaffer, MD, 362-8717
The purpose of the RNA Biology Journal Club is to introduce the graduate students to advanced topics spanning the bioinformatics, biochemistry, cell biology and genetics of RNA biology. Under the guidance of the course directors (Drs. Ory and Schaffer), students will select recent topical articles for discussion in the weekly journal club. Students will be expected to provide a succinct introduction to the topic and lead discussion of the data presented in the journal article. Students will be evaluated on the basis of their presentation and their participation in the seminar throughout the semester. Prereqs: Successful completion of Fundamentals of Molecular Cell Biology (Bio 5068) and Nucleic Acids and Protein Biosynthesis (Bio 548). 1 unit.

L41 (BIO) 5152 DEVELOPMENT, REGENERATION AND STEM CELL BIOLOGY JOURNAL CLUB
Instructor: Craig Micchelli, PhD, 362-7036
Focuses on developing a dialog around current topics in developmental and regenerative biology at the molecular, cellular and systems levels. 1 unit.

L41 (BIO) 5171 MEDICAL IMMUNOLOGY
Instructor: Andrey S. Shaw, MD, 362-4614
An introduction to basic concepts in immunology and immunopathology. Lectures focus on antigen-antibody interactions, immunoglobulin structure and genetics, the cellular basis of the immune response and immune regulation, T cell effector mechanisms, the inflammatory response, complement, the positive and negative roles of hypersensitivity, and immune deficiency. Prerequisite: some background in biochemistry and genetics helpful. Restricted to medical students only except in unusual circumstances, with permission of coursemaster. Offered during the first half of the second medical semester. Three-four lecture hours a week, two (2) two-hour lab periods, four (4) one-hour clinical
discussion groups. Credit: variable, maximum 3 units.

L41 (BIO) 5191 PATHOBIOLOGY OF HUMAN DISEASE STATES
Instructors: Matthew Walter, MD, 362-9409, Thomas Baranski, MD, PhD, 747-3997
Three human disease states will be discussed in detail. Topics will include background clinical and epidemiological information, followed by a detailed examination of the molecular and cellular events that underlie the disease state. Examples of pertinent topics include Alzheimer's disease, AIDS, leukemia, cystic fibrosis, sickle cell anemia, diabetes, etc. Prerequisite: Must be a Markey Pathway student and have HIPAA training. Credit: 2 units.

L41 (BIO) 5192 CANCER BIOLOGY JOURNAL CLUB
Instructor: Jason D. Weber, PhD, 747-3896
This journal club covers current papers in molecular oncology, cancer genetics and contemporary molecular biology. Presentations will be given by students, post-docs and faculty, then discussed. Credit: 1 unit.

L41 (BIO) 5196 SPECIAL EMPHASIS PATHWAY IN CANCER BIOLOGY
Instructor: David Wilson, MD, PhD, 286-2834
This course is designed to present pre- and postdoctoral trainees with an organized educational format to explore major contemporary topics in cancer biology. The elective will provide an integrated view of cancer research including basic science, translational science and clinical investigation. Approximately 60 minutes will be devoted to a didactic presentation by a faculty member with interaction by the participants. The remaining 30 minutes will be used to discuss a pivotal research paper from this field, preselected by the faculty member. Outside reading (30-60 minutes per week) will be required. Credit: 2 units.

L41 (BIO) 5217 SPECIAL TOPICS IN MICROBIAL PATHOGENESIS
Instructor: Dong Yu, PhD, 362-7367; Douglas Berg, PhD, 362-2772
Primarily for graduate and MSTP students, this course involves oral presentation and discussion of current research articles on pathogenic microorganisms (bacteria, viruses, parasites and fungi) and the cellular and molecular basis of host-pathogen interactions. Emphasis will be placed on understanding experimental techniques and design of future experiments in the areas covered. Students are expected to prepare all articles covered and to participate actively in each discussion. Prerequisite: advanced elective course Molecular Microbiology and Pathogenesis or permission of instructors. Class meets twice per week for 1.5 hours each. Credit 2 units.

L41 (BIO) 5222 INTRO TO SAS FOR BIOMEDICAL RESEARCHERS
Instructor: Lili Wang, 362-2796
This course is a hands-on introduction to analyzing data using the SAS programming language and procedures. SAS stands for Statistical Analysis System and is one of the most powerful statistical packages used to analyze biological (and other) data sets in a meaningful way. The course will train students how to create, manage, manipulate, store, retrieve and analyze SAS data sets as well as how to produce graphs and reports from different types of data sets. Critically, the course will also teach students the fundamental concepts of key statistical tests (e.g., t-test, Chi-square test, ANOVA and non-parametric tests), and therefore provide students the intellectual foundation from which to identify the most appropriate statistical test depending on the specific data set to be analyzed. Upon completion of the course, students should have a basic understanding of how to use the SAS program and be able to use SAS to work with various types of data to perform routine statistical analyses and testing. In addition, the course should facilitate the future ability of students to use SAS to manipulate and analyze the ever increasingly large data sets common in essentially all genome-wide approaches. Credit 2 units.

L41 (BIO) 5224 MOLECULAR, CELL AND ORGAN SYSTEMS
Instructor: Kendall Blumer, PhD, 362-1668
This course will introduce PhD and MSTP students to fundamental problems in cell and molecular biology at the systems level. The course is divided into five themes: 1) microbial systems; 2) organ development and repair; 3) cardiovascular system and disease; 4) tumor and host systems; and 5) metabolic systems and disease. Topics within each theme highlight current research concepts, questions, approaches and findings at the molecular, cellular and physiological levels. Students will write an original research grant proposal on a topic of their choosing in one of the five themes. Students will critique proposals.
anonymously in an NIH-like study section. Prerequisites: Fundamentals of Molecular Cell Biology and Nucleic Acids and Protein Synthesis.

**L41 (BIO) 5235 GENETICS JOURNAL CLUB**
Instructor: Stephen L. Johnson, PhD, 362-0362
This journal club will be focused on the Genetics Department seminar series. Students will present one or a few recent papers by the seminar speaker scheduled for that week. Students will provide a brief written evaluation (on a form that will be provided) of their peers' presentations, and the faculty advisors will meet with each student after the presentation to provide feedback. Credit: 1 unit.

**L41 (BIO) 5255 EXPERIMENTAL SKELETAL BIOLOGY JOURNAL CLUB**
Instructor: Steven Teitelbaum, MD, 454-8463
The journal club, which meets weekly, focuses on cellular and molecular biology of the skeleton. Emphasis is placed on gaining insights into normal skeletal homeostasis as well as systemic disorders of bone. Papers presented for review are selected from the most competitive journals. Participants are encouraged to "think outside of the box" and discuss novel molecular discoveries that may impact bone cell function. Prerequisite: Permission of instructor. Credit: 1 unit.

**L41 (BIO) 5261 MOLECULAR MECHANISMS OF IMMUNOLOGICAL DISEASES**
Instructor: Wayne Yokoyama, MD, 362-9075
Advanced immunology students will be exposed to human diseases that appear to have an immunological basis. In addition to lectures and evaluation of recent clinical and relevant basic immunology literature, an emphasis will be placed on direct encounters with patients and pathologic material when feasible, providing students with a human aspect to discussions of immune pathogenesis. Diseases covered will include those with known causes such as AIDS and autoimmune disorders such as systemic lupus erythematosus and rheumatoid arthritis for which a molecular basis is not fully understood. Other areas may include asthma and tissue transplantation, where effector mechanisms are better characterized. Since most of these disorders have no cure or are imperfect clinical entities, the class will discuss research areas that may be fruitful and lead to improved diagnosis and treatment. Prerequisite: Foundations of Immunology or permission of instructor.

**L41 (BIO) 5272 ADVANCED TOPICS IN IMMUNOLOGY**
Instructor: Wojciech A. Swat, PhD, 747-8889
This course uses a journal club format to discuss contemporary issues in the cell and molecular biology of the immune system. Discussions focus on the use of current approaches to analyze the cellular and molecular basis of immunity. Topics include mechanisms of antigenic specificity, diversity, cell communication, differentiation, activation and effector activity. Prerequisite: L41 (Bio) 5051 and permission of instructor. Credit: 2 units. This is referenced in the Department of Pathology and Immunology.

**L41 (BIO) 5282 CHROMATIN STRUCTURE AND GENE EXPRESSION**
Instructors: Sarah Elgin, PhD, 935-5348, Douglas Chalker, PhD, 935-8838
This special topics course will use "Epigenetics" ed. By Allis, Jenuwein, Reinberg, and Caparros (2007, Cold Spring Harbor Laboratory Press) as the organizing text. Each week a faculty member will provide a background lecture on an important topic or model system, and a student will present and lead discussion of a paper from the current scientific literature related to the previous week's background lecture. Topics to be considered will include background on chromatin structure, histone modifications and histone variants; epigenetic regulation in yeast, other fungi, ciliates, flies, mammals and plants; dosage compensation in different systems; DNA methylation and imprinting in mammals; stem cells, nuclear transplantation and reprogramming; and the epigenetics of cancer and other human diseases (some variation in topics in different years). Students enrolled in the course will be required to present one paper and to come prepared to each session, with a question for discussion. Prerequisite: BIO 548 Nucleic Acids and Protein Biosynthesis. Credit 2 units.

**L41 (BIO) 5284 CURRENT RESEARCH IN CHROMATIN, EPIGENETICS AND NUCLEAR ORGANIZATION**
Instructors: Sarah Elgin, PhD, 935-5348; Douglas L. Chalker, PhD, 935-8838
This journal club considers papers from the current literature on chromatin structure and function, with an emphasis on regulation of transcription, epigenetics and genomics. Presentations are given by
students, postdocs and faculty, with discussion by all. Students enrolled for credit are expected to attend regularly, and to present a minimum of one paper during the term, with consultation and critique from the faculty. Credit 1 unit.

L41 (BIO) 5285 FUNDAMENTALS OF MAMMALIAN GENETICS
Instructor: Michael Lovett, PhD, 747-3265
This course aims to provide both biologists and those with mathematical backgrounds with a basis in mammalian genetics. The course will include the following modules: Nucleic acid biochemistry; Gene and chromosome organization; Intro to human genetics; Mutations and DNA repair; Cancer genetics; Genomic methodologies; Biochemical genetics; Murine genetics; Epigenetics; Neurodegenerative diseases; Mitochondrial disorders; Pharmacogenetics; Intro to human population genetics; Applications of modern human genetics; Intro to web-based informatics tools for molecular genetics. One of the required courses in the Human Statistical Genetics graduate program. Credit: 3 units.

L41 (BIO) 5288 SPECIAL TOPICS IN MOLECULAR GENETICS
Instructor: Lee Ratner, MD, PhD, 362-8836
A special topics course with lectures and discussion on the molecular basis of cancer including cell cycle regulation, tumor suppressor genes, tumor invasion, angiogenesis, immune evasion, resistance to apoptosis, signaling, imaging, gene expression, chromosomal translocations and viral oncology. Credit: 2 units.

L41 (BIO) 5303 PROTEIN NMR JOURNAL CLUB
Instructor: Katherine Henzler-Wildman, PhD, 362-1674
This journal club covers the recent literature on protein NMR with a focus on using NMR to study protein function, NMR dynamics, and novel methods that expand the range of systems accessible to solution NMR studies. Students, postdocs and faculty discuss a recent paper and present background information on the relevant technical aspects of NMR. Students receive 1 credit for participation and presenting one paper. Credit: 1 unit.

L41 (BIO) 5311 DYNAMICS IN MESOSCOPIC MOLECULAR SYSTEMS
Instructor: Elliot Elson, PhD, 362-3346
This course will provide a background in the theory of the dynamics of mesoscopic systems and introduction to methods for measuring the dynamics of these systems. It will include measurement methods, some of which are in common use and others that have only recently been introduced. This course would be useful for biophysics students and others that are interested in molecular processes and mechanisms in small systems such as cells. Prerequisite: Physical Chemistry. Credit: 3 units.

L41 (BIO) 5312 MACROMOLECULAR INTERACTIONS
Instructor: Timothy M. Lohman, PhD, 362-4393
This course will cover equilibria, kinetics and mechanisms of macromolecular interactions from a quantitative perspective. Thermodynamics, multiple binding equilibria (binding polynomials), linkage phenomena, cooperativity, allostery, macromolecular assembly, enzyme catalysis and mechanism, steady-state and pre-steady state kinetics, and isotope effects. Modern methods of computer analysis using nonlinear least squares fitting and simulation to analyze binding isotherms and full kinetic time courses is emphasized. Prerequisite: Physical Chemistry, Biochemistry, Calculus and Organic Chemistry. Three class hours per week. Credit: 3 units.

L41 (BIO) 5314 MOLECULAR BIOPHYSICS GRADUATE SEMINAR
Instructor: Kathleen B. Hall, PhD, 362-4196
Student presentation of molecular biophysics topic. Second-year students present from literature; senior students give formal research seminar. Attendance required for all molecular biophysics students. Credit: 1 unit.

L41 (BIO) 5319 MOLECULAR FOUNDATIONS OF MEDICINE
Instructor: Linda J. Pike, PhD, 362-9502
This course is designed primarily for medical students and will cover fundamental aspects of biochemistry and cell biology from a medical perspective. The course begins with a treatment of protein structure and the function of proteins in the cytoskeleton and cell motility. The principles of enzyme kinetics and regulation are then discussed and basic pathways for the synthesis and metabolism of carbohydrates and
L41 (BIO) 5352 DEVELOPMENTAL BIOLOGY
Instructor: Kerry Kornfeld, MD, PhD, 747-1480
Analysis of a selected set of key processes in development, such as pattern formation, cell-cell signaling and morphogenesis. The focus is on molecular approaches applied to important model systems, but framed in classical concepts. Prerequisite: L41 (Bio) 5068 Fundamentals of Molecular Cell Biology and L41 (Bio) 548 Nucleic Acids and Protein Biosynthesis. Credit: 3 units.

L41 (BIO) 5357 CHEMISTRY AND PHYSICS OF BIOMOLECULES
Instructor: Jay Ponder, PhD, 362-4195
This course covers three major types of biomolecular structure: proteins, nucleic acids and membranes. Basic structural chemistry is presented, as well as biophysical techniques used to probe each type of structure. Selected topics include: protein folding, protein design, X-ray crystallography, NMR spectroscopy, nucleic acid bending and supercoiling, nucleic acid:protein interactions, RNA folding, membrane organization, fluidity, permeability and transport, and membrane channels. Weekly discussion section will cover problem sets and present current research papers. One of the required courses for the Biochemistry and for the Molecular Biophysics graduate programs. Prerequisites: prior coursework in Biochemistry and in Physical Chemistry is recommended, but not required.

L41 (BIO) 5392 MOLECULAR MICROBIOLOGY AND PATHOGENESIS
Instructor: Joseph Vogel, PhD, 747-1029
First half focuses on prokaryotic physiology and genetics, with special attention to recent discoveries in gene regulation and protein processing. Second half devoted to microorganisms that cause disease, with emphasis on the molecular interactions between pathogen and host. Prerequisite: first-semester core curriculum for programs in Cell and Molecular Biology. Credit: 3 units. This is referenced in the Department of Molecular Microbiology.

L41 (BIO) 5393 MOLECULAR VIROLOGY JOURNAL CLUB
Instructor: Michael Diamond, MD, PhD, 362-2842
Journal club covering a broad range of topics in virology with an emphasis on pathogenesis or molecular biology of medically important viruses. A minimum of one student presentation with faculty critique. Prerequisite: Permission of instructor. Credit: 1 unit.

L41 (BIO) 5394 METAGENOMICS OF MICROBIAL ECOSYSTEMS
Instructor: Jeremy Buhler, PhD, 935-6180
This course introduces students to key questions, approaches, and computational tools used to study the properties of microbial communities in their various habitats. Complex microbial ecosystems are found in a variety of terrestrial and oceanic environments as well as in the various body habitats of metazoan species including humans. These ecosystems, which are composed largely of microbial species that have never been cultured in a lab, are laboratories for the study of genome evolution (eco-genomics), ecological principles and myriad biotransformations. In particular, many animals, including humans, have evolved to live with and benefit from the commensal microbial communities in their GI tracts. The study of microbial ecosystems gives rise to the field of metagenomics — the acquisition, identification and functional and evolutionary analysis of the combined genomic sequences of a diverse population of organisms. Metagenomic analyses must contend with many challenges, including a high volume of genomic sequence data, fragmentary and incomplete sequences, and genomic heterogeneity of sampled organisms. To tackle these challenges, we must bring to bear computational tools that apply models of sequence evolution to interpret metagenomic sequence data. These interpretations form a basis for further investigation and hypothesis testing. Course content will include an overview of questions and major results in metagenomic research, along with an introduction to the experimental protocols and computational tools, models and algorithms of metagenomic analysis. The class will have two 1.5-hour meetings per week for 14 weeks. Enrollment is limited to 25 students. Prerequisites: Graduate standing or permission of instructor. Some basic knowledge of biology is recommended. Students should know or
be prepared to learn basic Python scripting to carry out some course assignments. Credit: 3 units.

**L41 (BIO) 5412 TROPICAL AND MOLECULAR PARASITOLOGY**
Instructor: L. David Sibley, PhD, 362-8873
Graduate-level seminar course focusing on current scientific literature in molecular parasitology. The journal club will meet biweekly during the Fall and Spring semesters. Students will attend both semesters in order to receive one credit. The seminar series will run jointly with a research conference in Tropical and Molecular Parasitology. Outside speakers will be invited for the seminar series to emphasize important developments in tropical medicine and molecular parasitology. In advance of the invited speakers, topics will focus on their previous research publications. Prerequisite: L41 (BIO) 5392 Molecular Microbiology and Pathogenesis. Credit: 0.5 unit.

**L41 (BIO) 5416 MOLECULAR MICROBIOLOGY AND PATHOGENESIS JOURNAL CLUB**
Instructor: Keril Blight, PhD, 286-0065; Jeffrey Henderson, MD, PhD, 362-8065
Presentations by students and postdoctoral fellows on a broad range of topics of current interest in microbiology and pathogenesis including areas of research in bacteriology, mycology, parasitology, virology and immunology. The course will emphasize techniques used to give good presentations. Speakers usually provide a brief background to introduce the topic and then focus on one or two papers from the current literature. Credit requires attendance at all sessions and one presentation. Credit: 1 unit.

**L41 (BIO) 5417 HEMATOLOGY/ONCOLOGY JOURNAL CLUB**
Instructors: Stuart A. Kornfeld, MD, 362-8803; Philip W. Majerus, MD, 362-8801
This journal club covers a broad range of topics of current interest, including the fields of biochemistry, molecular biology, cell biology, developmental biology and immunology. Speakers usually give a brief background to introduce the topic and then focus on one or two papers from the current literature. Presentations are given by graduate students, postdoctorates and faculty. Each attendee presents two to three times per year. Participants are expected to attend all the sessions. This journal club was formed in 1966. Credit: 1 unit.

**L41 (BIO) 5426 ID GATEWAY: TRANSLATIONAL AND PUBLIC HEALTH ASPECTS OF BASIC INFECTIOUS DISEASE RESEARCH**
Instructors: Robyn Klein, MD, PhD, 286-2140; David Haslam, MD, 286-2888
This course provides an opportunity for students, postdoctoral fellows, infectious disease fellows and faculty to explore issues at the interface between patient care, public health and basic research in the area of microbial pathogenesis. Prerequisites: Application and L41 (BIO) 5392 or M30 526, or permission of instructor. Credit: 2 units.

**L41 (BIO) 5445 DNA METABOLISM JOURNAL CLUB**
Instructor: Peter Burgers, PhD, 362-3872
Presentation of current research papers in DNA replication, DNA repair and DNA recombination, with an emphasis on basic biochemical and biophysical approaches.

**L41 (BIO) 5456 ADVANCED CRYSTALLOGRAPHY**
Instructor: Daved Fremont, PhD, 747-6547
The advanced course in protein crystallography will address all aspects of modern protein crystallography including fundamentals of crystallography, the derivation of the structure factor and electron density equation, symmetry and space groups, direct methods, isomorphous replacement, molecular replacement, data collection, and crystal growing theory and techniques. Prerequisite: Physical Chemistry and BIO 5325 Protein Structure and Function. Two class hours per week. Credit: 2 units.

**L41 (BIO) 5466 CURRENT TOPICS IN BIOCHEMISTRY**
Instructor: Kathleen B. Hall, PhD, 362-4196
Student presentations of thesis research. Formal presentations require PowerPoint. Required of all Biochemistry graduate students; first- and second-year students get credit. Credit: 1 unit.

**L41 (BIO) 5468 CARDIOVASCULAR BIOPHYSICS JOURNAL CLUB**
Instructor: Sándor J. Kovács, PhD, MD, 454-7660
This journal club is intended for beginning graduate students, advanced undergraduates and MSTP
students with a background in the quantitative sciences (engineering, physics, math, chemistry, etc.). The subjects covered are inherently multidisciplinary. We will review landmark and recent publications in quantitative cardiovascular physiology, mathematical modeling of physiologic systems and related topics such as chaos theory and nonlinear dynamics of biological systems. Familiarity with calculus, differential equations and basic engineering/thermodynamic principles is assumed. Knowledge of anatomy/physiology is optional. Same as E72 BME 5911. Credit: 1 unit.

L41 (BIO) 5472 CARDIOVASCULAR MRI — FROM PHYSICS TO CLINICAL APPLICATION
Instructor: Samuel A. Wickline, MD, 454-5539
This graduate course (seniors welcome) will cover the basic physics involved in creating an image by magnetic resonance technology. The use of this technology, specifically as it applies to the unique challenges of cardiovascular applications, will be examined. This will include topics such as motion compensation techniques, real-time imaging, exogenous contrast enhancement, and quantitative flow measurements, for example. As much as one-third of the class will involve actual case studies and the discussion of clinical use for cardiovascular MRI. Students will demonstrate competence in the subject through a combination of homework, a final examination and a small semester project. Prerequisites: Calculus, introductory human physiology/anatomy/biology course. Same as E62 BME 502. Credit: 3 units.

L41 (BIO) 548 NUCLEIC ACIDS AND PROTEIN BIOSYNTHESIS
Instructor: Peter Burgers, PhD, 362-3872
Fundamental aspects of structure, biosynthesis and function of nucleic acids and the biosynthesis of proteins. Emphasis on mechanisms involved in the biosynthetic processes and the regulation thereof. Prerequisite: L41 (Bio) 337, 449 or equivalent or permission of instructor. This is referenced in the Department of Biochemistry and Molecular Biophysics. Credit: 3 units.

L41 (BIO) 5483 HUMAN LINKAGE AND ASSOCIATION ANALYSIS
Instructor: John P. Rice, PhD, 286-2572
Basic Genetic concepts: Meiosis, inheritance, Hardy Weinberg Equilibrium, Linkage, segregation analysis, linkage analysis: definition, crossing over, map functions, phase, LOD scores, penetrance, phenocopies, liability classes, multi-point analysis, non-parametric analysis (sibpairs and pedigrees), quantitative trait analysis, determination of power for Mendelian and complex trait analysis, linkage disequilibrium analyses, allelic association (case control designs and family bases studies) whole genome association analysis, quantitative trait analysis, measured genotypes and variance components. Prerequisites: M21 515 Fundamentals of Genetic Epidemiology. Credit: 2 units. Same as M21 GEMS 5483.

L41 (BIO) 5484 GENETICS AND DEVELOPMENT OF C. ELEGANS JOURNAL CLUB
Instructor: Tim Schedl, PhD, 362-6162
Students will present a research paper (or present their current thesis research) and the appropriate background material. Credit: 1 unit.

L41 (BIO) 5488 GENOMICS
Instructors: Barak A. Cohen, PhD, 362-3674, Robi D. Mitra, PhD, 362-2751
This course is designed for beginning students who want to become familiar with the basic concepts and applications of genomics. The course covers a wide range of topics including how genomes are mapped and sequenced as well as the latest computational and experimental techniques for predicting genes, splice sites and promoter elements. High throughput techniques for ascribing function to DNA, RNA and protein sequences including microarrays, mass spectrometry, interspecies genome comparisons and genome-wide knockout collections will also be discussed. Finally, the use of genomic techniques and resources for studies of human disease will be discussed. A heavy emphasis will be put on students acquiring the basic skills needed to navigate databases that archive sequence data, expression data and other types of genome-wide data. Through problem sets the students will learn to manipulate and analyze the large data sets that accompany genomic analyses by writing simple computer scripts. While students will become sophisticated users of computational tools and databases, programming and the theory behind it are covered elsewhere, in Michael Brent's class, Bio 5495 Computational Molecular Biology. Because of limited space in our teaching lab, enrollment for lab credit will be limited to 24 students. Priority will be given to students in the DBBS program. Others interested in the course may enroll for the lectures only. If you have previous experience in computer programming, we ask that you
do not enroll for the laboratory credit. Prerequisites: Molecular Cell Biology (Bio 5068), Nucleic Acids (Bio 548) or by permission of instructor. Lecture 3 units of credit; lab 1 additional unit, space limited. Credit: 3 or 4 units.

**L41 (BIO) 5489 HUMAN GENETICS JOURNAL CLUB**
Instructor: Michael Lovett, PhD, 747-3265
In this biweekly journal club on Human Genetics we will present and discuss current cutting-edge papers in human and mammalian molecular genetics. Students learn presentation skills, how to critique a paper and how to interact with a very active and critical audience. Prerequisites: Any person interested in the current state of the art in Human Genetics may attend this course. It is a requirement that all students wishing to earn credit in this course must present a 1.5-hour journal club talk and must regularly attend and participate in the journal club throughout the year.

**L41 (BIO) 5491 ADVANCED GENETICS**
Instructor: Tim Schedl, PhD, 362-6162
Fundamental aspects of organismal genetics with emphasis on experimental studies that have contributed to the molecular analysis of complex biological problems. Examples drawn from bacteria, yeast, nematodes, fruit flies and mammalian systems. Prerequisite: graduate standing or permission of instructor. This is cross-listed in the Department of Genetics. Credit: 3 units.

**L41 (BIO) 5495 COMPUTATIONAL MOLECULAR BIOLOGY**
Instructor: Michael R. Brent, PhD, 935-6621
This course focuses on genome sequence analysis, emphasizing computational and algorithmic issues. Topics covered include: the essential biology, the essential probability theory, base calling and quality clipping, predicting protein-coding genes (including Hidden Markov Models and comparative genomics approaches), sequence aligning, RNA folding, protein domain analysis, and an introduction to population biology. This includes both paper and pencil homework assignments and programming labs in "C." Prerequisite: CSE 241 or CSE 502N. Credit: 3 units. Same as E62 BME 537.

**L41 (BIO) 5496 SEMINAR IN COMPUTATIONAL MOLECULAR BIOLOGY**
Instructor: Jeremy Buhler, PhD, 935-6180, Gary D. Stormo, PhD, 747-5534
Students present current research papers and the appropriate background material in the field of computational biology. Same as E81 CSE 7801. Credit: 1 unit.

**L41 (BIO) 550 MEDICAL GENETICS**
Instructor: Alison J. Whelan, MD, 362-8050
Topics covered include population and quantitative genetics, clinical cytogenetics, biochemical genetics and metabolic defects. Lectures, clinics and small group discussions. Prerequisite: an introductory genetics course and permission of the instructor. This is cross-listed in the Department of Genetics as M30 511 Medical Genetics. Credit: 2 units.

**L41 (BIO) 5501 THE BIOLOGY AND PATHOLOGY OF THE VISUAL SYSTEM**
Instructors: Alan Shiels, PhD, 362-1637, Vladimir Kefalov, PhD, 362-4376
The purpose of the course is to provide a fascinating view of vertebrate eye development, anatomy, physiology and pathology. Topics to be covered include the molecules that control eye formation, ocular stem cells, the physiology of transparency, hereditary ocular diseases, phototransduction, the neurobiology of the retina and central visual pathways, age-related eye diseases, and many others. The course is open to all second-year graduate students and above. Ophthalmology residents and postdocs with an interest in vision are strongly encouraged to attend. Credit 3 units.

**L41 (BIO) 5504 ALGORITHMS FOR BIOSEQUENCE COMPARISON**
Instructor: Jeremy Buhler, PhD, 935-6180
This course surveys fundamental algorithms for comparing and organizing biological sequences. Emphasis is placed on techniques that are useful for implementing biosequence databases and comparing long sequences, such as entire genomes. Many of these techniques are also of interest for more general string processing and for building and mining of textual databases. Algorithms will be presented rigorously, including proofs of correctness and running time where feasible. Topics include classical string matching, suffix trees, exclusion methods, multiple alignments and the design of BLAST and related biosequence comparison tools. Students will complete written assignments and will
implement advanced comparison algorithms to address problems in bioinformatics. This course does not require a biology background. Prerequisites: CSE 241, graduate standing, or permission of instructor. Credit: 3 units. Same as home course E81 CSE 584A.

**L41 (BIO) 554 NEURAL SCIENCES**  
For full description, see the Department of Anatomy and Neurobiology, M35 554 Neural Sciences.

**L41 (BIO) 5565 ORAL PRESENTATION OF SCIENTIFIC DATA**  
Instructor: Staff, Anatomy and Neurobiology, 362-3363  
Practical course on how to prepare and present scientific data to an audience. Prerequisite: first-year neuroscience program courses. Meets once a week for 90 minutes. Credit: 1 unit.

**L41 (BIO) 5571 CELLULAR NEUROBIOLOGY**  
Instructor:  
This course will present a fully integrated overview of nerve cell structure, function and development at the molecular and cellular level. Broad topics to be covered include gene structure and regulation in the nervous system, quantitative analysis of voltage- and chemically-gated ion channels, presynaptic and postsynaptic mechanisms of chemical neurotransmission, sensory transduction, neurogenesis and migration, axon guidance and synapse formation. Two lectures plus one hour of discussion per week for 14 weeks. There will be three exams, as well as homework problems and summaries of discussion papers. Prerequisite: graduate standing or permission of the instructor. Credit: 4 units.

**L41 (BIO) 5577 SYNAPSES JOURNAL CLUB**  
Instructor: Steven Mennerick, PhD, 747-2988  
The synapse is fundamental to our understanding of information transfer in the nervous system. Malleability of the synapse is considered key to our understanding of organisms' ability to learn and remember and key to understanding nervous system dysfunction in many disease states. This is an advanced seminar in the development, structure and function of the synapse in health and disease. It is a natural extension of topics covered in Bio 5571 and may be primarily of interest to students in the Neurosciences Program. It may also be of interest to students in MCB, Development, Biochemistry, Computational Biology and Molecular Biophysics. Generally a topic for the semester helps focus the group; past topics have included Synapses and Disease, Neurotransmitter Transporters, Glutamate Receptors, Dendrites, GABA receptors. Participants (students, postdocs and faculty) alternate responsibility for choosing a paper from the primary literature to present for the club. Critical discussion of the paper ensues. Active participation offers the opportunity for students to hone their critical thinking and presentation skills. Students enrolling for credit will be expected to attend each week and will be expected to lead discussion once per semester. Prerequisites: Graduate standing in DBBS; BIO 5571 preferred.

**L41 (BIO) 560A SPECIAL TOPICS IN NUCLEAR CHEMISTRY: RADIOCHEMISTRY FOR THE LIFE SCIENCES**  
Instructors: Carolyn Anderson, PhD, 362-8427, Suzanne Lapi, PhD, 362-4696  
This course will provide an introduction to nuclear science (e.g., radioactive decay, nuclear stability, interactions of radiation with matter) and followed by an overview of how radiochemistry is used in the life sciences. Lectures on radiolabeling chemistry with radionuclides used in medical imaging (single photon emission computed tomography (SPECT) and positron emission tomography (PET) and their applications will be presented. In addition, lectures on radiochemistry with tritium (H-3) and C-14 will also be included. Additional applications include environmental radiochemistry as applied to nuclear waste disposal and biofuels. Credit 3 units. Same as home course L07 Chem 536.

**L41 (BIO) 5619 ADVANCED COGNITIVE, COMPUTATIONAL AND SYSTEMS NEUROSCIENCE**  
Instructor: Todd Braver, PhD, 935-5143  
This course will develop critical thinking and analysis skills with regard to topics in Cognitive, Computational and Systems Neuroscience. Course format will be a series of modules composed of intensive, faculty-led case studies on interdisciplinary topics at the intersection of psychology, computation and neuroscience. The goal will be to highlight the benefits of integrative, interdisciplinary approaches, by delving into a small set of topics from a variety of perspectives, rather than providing a survey-level introduction to a broader set of topic areas. Modules will involve a combination of lectures and student-led discussion groups, with students further expected to complete a multidisciplinary
integrative final review paper. Case-study topics will vary somewhat from year to year, but are likely to include some of the following: temporal coding as a mechanism for information processing, coordinate transformations in sensory-motor integration, mechanisms of cognitive control, motor control strategies including application to neural prosthetics, and memory systems in health and disease. Credit: 3 units. Same as L33 Psych 519.

L41 (BIO) 5622 COGNITIVE, COMPUTATIONAL AND SYSTEMS NEUROSCIENCE PROJECT BUILDING
Instructor: Deanne M. Barch, PhD, 935-8729
The goal of this course is to help students in the CCSN Pathway develop the critical thinking skills necessary to develop and implement high-quality, interdisciplinary research projects. Throughout the course of the semester, students will develop a research plan in their chosen area of interest. The plan will be developed in consultation with at least two faculty members (from at least two different subdisciplines within the pathway) as well as the other students and faculty participating in the course. The culminating of this course will be for each student to produce an NIH-style grant proposal on the research project of their choosing. For most students, this will serve either as their thesis proposal or a solid precursor to the thesis proposal. The course will be designed to help facilitate the development of such a research plan through didactic work, class presentations, class discussion, and constructive feedback on written work. The course will begin with a review of written examples of outstanding research proposals, primarily in the form of grant submissions similar to those that the students are expected to develop (i.e., NRSA style proposals, R03 proposals). Review of these proposals will serve as a stimulus to promote discussion about the critical elements of good research proposals and designs in different areas. Each student will be expected to give three presentations throughout the semester that will provide opportunities to receive constructive feedback on the development and implementation of research aims. The first presentation (toward the beginning of the semester) will involve presentation of the student's general topic of interest and preliminary formulation of research questions. Feedback will emphasize ways to focus and develop the research hypotheses into well-formulated questions and experiments. The second presentation will involve a more detailed presentation of specific research questions (along the lines of NIH-style Specific Aims) and an initial outline of research methods. The final presentation will involve a fuller presentation of research questions and proposed methods. Feedback, didactic work and group discussion throughout the semester will include guidance on critical components of the development of a research plan, including how to perform literature searches, formulate testable hypotheses, write critical literature summaries and design experiments and analyses. The course will meet once a week, with faculty members from different tracks within the pathway present at each meeting. This will allow students to receive feedback from several perspectives. Prerequisite: Member of CCSN Pathway, permission of instructor. Credit: 3 units. Same as L33 Psych 5191.

L41 (BIO) 5651 NEURAL SYSTEMS
Instructor: David Dickman, PhD, 747-7221
The course will consist of lectures and discussions of the sensory, motor and integrative systems of the brain and spinal cord, together with a weekly lab. The lectures will present aspects of most neural systems and will be given by faculty members who have specific expertise on each topic. The discussions will include faculty-led group discussions and papers presented and discussed by students. The labs will include human brain dissections, examination of histological slides, physiological recordings, behavioral methods, computational modeling and functional neural imaging. Credit: 6 units.

L41 (BIO) 5657 BIOLOGICAL NEURAL COMPUTATION
Instructor: Kurt A. Thoroughman, PhD, 935-9094
This course will consider the computations performed by biological nervous systems. Readings and discussions will investigate the biophysical and physiological bases of computations made by ion channels, synapses, dendrites, neurons and neuronal networks. Computer laboratories and a semester-long independent project will determine how simple mathematical models succeed or fail to represent observed biological function and organismal behavior. Readings will include classic and current primary research papers. (Note: Graduate students in psychology or neuroscience who are in the Cognitive, Computational and Systems Neuroscience curriculum pathway may register for one credit. These students will attend all course meetings and complete the homework assignments, but will not participate in the semester-long independent project. Registration may be Pass/Fail. All BME students should register for three credits). Prerequisites for 3-credit option: calculus, some experience with differential equations and cell or systems biology. Junior and senior undergraduates need permission of
instructor. Prerequisites for 1-credit option: permission of instructor, calculus II and introductory biology. Credit: 3 units. Same as E62 BME 572.

L41 (BIO) 5663 NEUROBIOLOGY OF DISEASE
Instructors: Conrad Weihl, MD, PhD, 362-6981, Bradley Schlaggar, MD, PhD, 362-8871
This is an advanced graduate course on the pathology of nervous system disorders. This course is primarily intended to acquaint Neuroscience graduate students with a spectrum of neurological diseases and to consider how advanced neuroscientific approaches may be applied to promoting recovery in the brain. The class will meet for two hours each week. Each session will be led by a faculty guest with expertise in a specific neurological or psychiatric disease. In the first hour, the speaker will discuss clinical manifestations and pathophysiology. Where possible, the clinical presentation will be supplemented with a patient demonstration or videotape. The second hour will follow a journal club format. Two or three students will review current papers assigned by the speaker or course director. This course is offered in alternate years. Credit: 2 units.

L41 (BIO) 572 SEMINAR IN PLANT BIOLOGY
Instructor: Tuan-Hue Ho, PhD, 935-4632
A weekly discussion of modern research in plant biology including topics in molecular genetics, development, biochemistry, physiology, population dynamics and plant-pathogen interactions. Research seminars by local and outside speakers will be intermixed with journal club presentations in alternating weeks. Credit will be contingent on one journal club presentation per semester, regular attendance and active participation in group discussions. Credit: 1 unit.

L41 (BIO) 580 SEMINAR IN POPULATION BIOLOGY
Instructor: Ellen Damschen, PhD, 935-9106
This weekly seminar, covering different topics each semester, should be taken by graduate students in the program. Prerequisite: graduate standing or permission of the instructors. Credit: variable; 2 or 3 units.

L41 (BIO) 582 ETHNOBIOLOGY JOURNAL CLUB
Instructors: Jan Salick, PhD, 577-5165; Gayle Fritz, PhD, 935-8588
Students in this journal club will meet weekly with ethnobotanists, ethnozoologists and ecologists from various St. Louis institutions (including Washington University, University of Missouri-St. Louis, Saint Louis University and the Missouri Botanical Garden) to discuss recent publications and ongoing research. Enrolled students will attend the journal club every week, and once per semester will choose a paper and lead the discussion. Credit: 1 unit. Same as home course L48 Anthro 560.

L41 (BIO) 584 CLIMATE CHANGE READING GROUP
Instructor: Jan Salick, PhD, 577-5165
The Climate Change Reading Group is made up of multidisciplinary faculty and students from multiple institutions in St. Louis: Washington University, University of Missouri—St. Louis, Saint Louis University, Missouri Botanical Garden, Danforth Plant Science Center and more. Many of us in different labs, departments and institutions around St. Louis are actively investigating aspects and effects of climate change; this reading group provides a venue for interacting with others in the community. Subject matter within the context of climate change will be chosen each week by a different presenter. Students can join this reading group for 1 credit if they agree to read all papers, actively participate in discussions, find and present one high-quality scientific paper on climate change in the field of their choice and moderate the discussion of this paper. The students will be evaluated on their participation, their understanding of the issues and their presentation. Prereqs: Contact the course coordinator. Credit 1 unit.

L41 (BIO) 585 SEMINAR IN FLORISTIC TAXONOMY
Instructor: P. Mick Richardson, PhD, 577-5176
A survey of angiosperm families, their morphology, cytology, anatomy, palynology, chemistry and evolution. Prerequisite: L41 (Bio) 4132 or equivalent. Credit: 1 unit.

L41 (BIO) 590 RESEARCH
Instructors: Staff, Division of Biology and Biomedical Sciences, 362-3365
Credit to be arranged. Research is listed as 900-level course in each department.
**L41 (BIO) 5911 SEMINAR IN BIOLOGY AND BIOMEDICAL SCIENCES**

Instructors: Staff, Division of Biology and Biomedical Sciences, 362-3365
These seminars cover the recent literature in various areas not included in other courses, or in more depth than other courses. Credit to be arranged.

**L41 (BIO) 5915 TEACHING PRACTICE IN BIOLOGY AND BIOMEDICAL SCIENCES**

Instructor: John H. Russell, PhD, 362-2558
Students serve as teaching assistants for undergraduate and graduate-level courses. Faculty-supervised activities include lecture preparation and presentation, leading discussion and problem-solving sessions and laboratory instruction. Prerequisite: restricted to graduate students in the Division of Biology and Biomedical Sciences. Credit: 1 unit.

**L41 (BIO) 5922 ENTERING MENTORING**

Instructor: Kathryn Miller, PhD, 935-7305
This course is a series of facilitated discussions aimed at developing and improving mentoring skills for those involved in supervising undergraduate research experiences. It is designed for post-docs and graduate students who are or will be "bench mentors" for undergraduates doing Bio 500 and/or Summer Research. Participants will receive "Entering Mentoring" materials, including articles and worksheets to facilitate mentoring interactions with their mentee, plus several resource books relevant to mentoring. They will develop a mentoring philosophy statement, work on specific assignments designed to improve their relationship with their mentee and share their present and past experiences as mentors and mentees. Bench mentors will be eligible for a travel award to help defray expenses for attending a meeting with their mentee, if that student wins one of the HHMI SURF travel awards (4-5 awarded annually) or is otherwise being supported to present at a scientific meeting. Grad students and postdocs do NOT need to be mentoring a student at the time of the course; it is open to all with an interest in mentoring now or in the future. Note: interested postdocs can register through University College. Credit: 1 unit. Same as U29 Bio 492.

**L41 (BIO) 5999 INDEPENDENT WORK**

Instructors: Staff, Division of Biology and Biomedical Sciences, 362-3365
This course is designed for individual students wishing to explore in-depth specialized areas of literature or technology with one or more faculty members. Credit will vary with the amount of work and discussion, but cannot be more than 3 units. Credit: Variable, maximum 3 units.

Note — The number preceding the course title indicates that the course carries credit in the Graduate School of Arts & Sciences.

**Link to Website**

http://dbbs.wustl.edu

**Biomedical Engineering**

Biomedical engineering is the integration of engineering methods with biological science and medical practice. It strives to provide increased quantitative and analytical understanding of complex living organisms. Through this increased understanding, biomedical engineers can contribute to advances in biomedical research and to improvements in health care.

In many areas of medicine and biology, advances are being driven by technology. For example, modern computer technology is fundamental to the new fields of computational molecular biology, genome analysis and computational neuroanatomy. Systems approaches are increasingly important to advancing knowledge of many biological processes. Other facets of biomedical engineering will lead to improved diagnostic and therapeutic agents, improved prostheses, and new approaches to tissue and organ repair including the use of bio-resorbable materials, reconstituted tissue and regenerated cells. With the increased understanding that comes from scientific research and the tools of biomedical engineering, a bountiful era of increased understanding of disease, health care informatics, new biomaterials and revolutionary medical devices can be realized.
Biomedical engineering has been a focus of activity for almost 40 years in both the School of Engineering & Applied Science and the School of Medicine at Washington University in St. Louis. Contributions of the university include advances in imaging technologies for biology and medicine; positron emission tomography, confocal optical microscopy, advanced ultrasound imaging, magnetic resonance imaging and X-ray tomography. The university has played a leading role in applying high-speed communications systems to transmit scientific and medical information. Furthermore, the university is recognized worldwide for its work in mapping and sequencing the human genome, in computational molecular biology, in mapping of the human brain, and in cardiovascular engineering.

Biomedical engineering is an extremely diverse field encompassing the activities of faculty at Washington University in departments at the medical school as well as the engineering school. Recognizing the strength and diversity of existing programs, the Department of Biomedical Engineering was established on July 1, 1997. Together with the newly established Institute of Biomedical and Medical Engineering, involving faculty from the School of Engineering & Applied Science, the School of Medicine and also from the College of Arts & Sciences, this network facilitates and promotes the graduate educational training of biomedical engineers at Washington University. The Executive Council of the Institute, with broad representation from both the School of Engineering & Applied Science and the School of Medicine, has the responsibility to facilitate and coordinate student access to these various research opportunities. A graduate committee composed of members of the full-time faculty and the Institute determines the guidelines for graduate students in biomedical engineering.

The goals of graduate education in biomedical engineering at Washington University are to continue the university’s innovative and nationally recognized research programs and to train a new generation of leaders who apply engineering science throughout biology and medicine in government, industry and academia. This is a broad vision of biomedical engineering as a field and defines a role for which Washington University is ideally suited.

Courses

BME 471 BIOELECTRIC PHENOMENA
BME 501 GRADUATE SEMINAR
BME 502 CARDIOVASCULAR MRI
BME 503A CELL AND ORGAN SYSTEMS
BME 504 OPTICAL BIOELECTRIC IMAGING
BME 511 BIOTECHNOLOGY TECHNIQUES FOR ENGINEERS
BME 521 KINETICS OF RECEPTOR-MEDIATED PROCESSES
BME 523 BIOMATERIALS SCIENCE
BME 524 TISSUE ENGINEERING
BME 525 ENGINEERING ASPECTS OF BIOTECHNOLOGY
BME 527 DESIGN OF ARTIFICIAL ORGANS
BME 530A MOLECULAR CELL BIOLOGY FOR ENGINEERS
BME 533 BIOMEDICAL SIGNAL PROCESSING
BME 556 EXPERIMENTAL METHODS IN BIOMECHANICS
BME 557 CELL AND SUBCELLULAR BIOMECHANICS
BME 558 BIOLOGICAL TRANSPORT
BME 559 INTERMEDIATE BIOMECHANICS
BME 5610 PRINCIPLES OF PROTEIN STRUCTURE
BME 562 MECHANICS OF GROWTH AND DEVELOPMENT
BME 563 ORTHOPEDIC BIOMECHANICS — BONES AND JOINTS
BME 564 ORTHOPEDIC BIOMECHANICS — CARTILAGE/TENDON
BME 567 CARDIAC MECHANICS
BME 568 CARDIOVASCULAR DYNAMICS
BME 572 BIOLOGICAL NEURAL COMPUTATION
BME 573 APPLIED BIOELECTRICITY
BME 574 QUANTITATIVE BIOELECTRICITY AND CARDIAC EXCITATION
BME 575 MOLECULAR BASIS OF BIOELECTRICAL EXCITATION
BME 589 BIOLOGICAL IMAGING TECHNOLOGY
BME 5903 PHYSICAL METHODS FOR BIOMEDICAL SCIENTISTS
BME 5905 NEURAL COMPUTATION AND MOTOR BEHAVIOR
BME 5906 BRAIN NETWORKS
BME 5907 ADVANCED CONCEPTS IN IMAGE SCIENCE
BME 5909 PHYSIOLOGY OF THE HEART
BME 5907 ADVANCED CONCEPTS IN IMAGE SCIENCE
BME 591 BIOMEDICAL OPTICS I: PRINCIPLES
BME 5911 CARDIOVASCULAR BIOPHYSICS JOURNAL CLUB
BME 592 BIOMEDICAL OPTICS II: IMAGING
BME 594 INTEGRATIVE CARDIAC ELECTROPHYSIOLOGY

For additional related courses, see the courses of the School of Engineering & Applied Science at http://engineering.wustl.edu/courseinformation.aspx

Faculty

For more information, go to www.bme.wustl.edu

Professor and Chairman of Department

Frank Chi-Pong Yin, PhD, MD
University of California, San Diego, 1970; MD, 1973

Professors Emeriti

Salvatore P. Sutera, PhD
California Institute of Technology, 1960

Full-time Professors

Mark Anastasio, PhD
The University of Chicago, 2001
Jianmin Cui, PhD
State University of New York Stony Brook, 1992

Igor R. Efimov, PhD
Moscow Institute of Science and Technology, 1992

Rohit V. Pappu, PhD
Tufts University, 1996

Yoram Rudy, PhD
Case Western Reserve University, 1978

Shelly E. Sakiyama-Elbert, PhD
California Institute of Technology, 2000

Larry A. Taber, PhD
Stanford University, 1979

Lihong Wang, PhD
Rice University, 1992

Full-time Associate Professors

Dennis L. Barbour, MD, PhD
The Johns Hopkins University, 2003

Donald L. Elbert, PhD
University of Texas at Austin, 1997

Daniel W. Moran, PhD
Arizona State University, 1994

Jin-Yu Shao, PhD
Duke University, 1997

Kurt A. Thoroughman, PhD
The Johns Hopkins University, 1999

Full-time Assistant Professors

Jan Bieschke, PhD
Max-Planck-Institute for Biophysical Chemistry, 2000

John Cunningham, PhD
Stanford University, 2009

Vitaly Klyachko, PhD
University of Wisconsin, 2002

Kristen Naegle, PhD
Massachusetts Institute of Technology, 2009

Baranidharan Raman, PhD
Texas A & M University, 2005

Jon Silva, PhD
Washington University in St. Louis, 2008

Graduate Group

Samuel Achilefu, PhD
University of Nancy, France, 1991

Beau Ances, MD, PhD
University of Pennsylvania, 2001

Philip V. Bayly, PhD
Duke University, 1993

Michael R. Brent, PhD
Massachusetts Institute of Technology, 1991

Paul C. Bridgman, PhD
Purdue University, 1980

Andreas H. Burkhalter, PhD
University of Zurich, 1977

Joseph Culver, PhD
University of Pennsylvania, 1987

Gautam Dantas, PhD
University of Washington, 2005

Anthony French, MD, PhD
University of Illinois, Urbana-Champaign, 1995; MD, 1996

James Havranek, PhD
Stanford University, 2003

Katherine Henzler-Wildman, PhD
University of Michigan, 2003

Tim Holy, PhD
Princeton University, 1997

James Huettner, PhD
Harvard University, 1987

Sándor J. Kovács, PhD, MD
California Institute of Technology, 1977; MD, University of Miami, 1979

Gregory M. Lanza, PhD
University of Georgia, 1981

Jin-Moo Lee, MD, PhD
Cornell University Medical College, 1993

Eric Leuthardt, MD
University of Pennsylvania, 1999

H. Harold Li, PhD
Friedrich-Alexander-Universität Erlangen-Nurnberg, 2001
Christopher Lingle, PhD
University of Oregon, 1979

Timothy Lohman, PhD
University of Wisconsin, Madison, 1977

Garland R. Marshall, PhD
Rockefeller University, 1966

Josh Maurer, PhD
California Institute of Technology

Robert P. Mecham, PhD
Boston University, 1976

James G. Miller, PhD
Washington University, 1969

Robi Mitra, PhD
Massachusetts Institute of Technology, 2000

Jeanne Nerbonne, PhD
Georgetown University, 1978

Colin G. Nichols, PhD
Leeds University, 1985

Joseph A. O’Sullivan, PhD
University of Notre Dame, 1986

Camillo Padoa-Schioppa, PhD
Massachusetts Institute of Technology, 2002

Parag J. Parikh, MD
Washington University, 2001

Steven E. Petersen, PhD
California Institute of Technology, 1982

Jay W. Ponder, PhD
Harvard University, 1984

Marcus E. Raichle, MD
University of Washington, 1964

Linda Sandell, PhD
Northwestern University, 1980

Matthew J. Silva, PhD
Massachusetts Institute of Technology, 1996

Lawrence H. Snyder, MD, PhD
University of Rochester, 1992

Joseph H. Steinbach, PhD
University of California, San Diego, 1973

Gary D. Stormo, PhD
University of Colorado, 1981
S. Joshua Swamidass, MD/PhD
University of California, Irvine, 2009

Yuan-Chuan Tai, PhD
University of California, Los Angeles, 1998

Stavros Thomopoulos, PhD
University of Michigan, 2001

David C. Van Essen, PhD
Harvard University, 1971

Xiaowei Wang, PhD
Tufts University Medical School, 2000

Samuel A. Wickline, MD
University of Hawaii, 1980

Robert S. Wilkinson, PhD
University of Texas at Austin

Pamela Woodard, MD
Duke University School of Medicine, 1990

Affiliated Faculty

R. Martin Arthur, PhD
University of Pennsylvania, 1968

John P. Boineau, MD
Duke University, 1959

Thomas Conturo, MD, PhD
Vanderbilt University, 1989

Elliot L. Elson, PhD
Stanford University, 1966

William A. Franzier III, PhD
Washington University, 1973

Eric Galburt, PhD
University of Washington

Robert J. Gropler, MD
University of Cincinnati, 1981

Dennis Hallahan, MD
Rush University, 1984

Stephen M. Highstein, MD
University of Maryland, 1965; PhD, University of Tokyo, 1976

Enrique Izaguirre, PhD
Drexel University, 1997
Biostatistics

Masters of Science in Biostatistics (MSIBS)
This 18-month program offers excellent training in biostatistics and statistical genetics for students who earned undergraduate or higher degrees with majors in mathematics, statistics, computer science, biomedical engineering or other related major. It prepares graduates for rewarding employment in academia and industry and for further graduate studies.

Prospective Students
Admission to MSIBS generally requires at least an undergraduate major in a quantitative field (ideally mathematics, statistics, biostatistics, computer science or biomedical engineering). Students at different points in their careers may wish to apply to the MSIBS degree program (including those with some graduate school experience in a related field with sufficient mathematics/statistics background). The following individuals may be interested in applying to the MSIBS program:

- Recent recipients of at least an undergraduate or higher degree in mathematics, statistics, biostatistics, computer science or biomedical engineering from an accredited institution
- Individuals with degrees in other (related) disciplines with an excellent background in mathematics/statistics who seek to gain expertise in biostatistics.

Other Prerequisites
Students entering the program with background only in quantitative sciences will benefit from a basic human biology and/or a basic genetics course. All prospective students must provide evidence of basic skills in computer programming through course work or documented experience.

Location
The MSIBS program is in the Division of Biostatistics, on the third floor of Shriners Building (706 S. Euclid Ave. at Clayton Road), Rooms 3301-3312.

Further Information
See our web site, https://biostatistics.wustl.edu, contact the program manager at (314) 362-1384, send email to msibs@wubios.wustl.edu or write to:

The MSIBS Program
Division of Biostatistics
Registration Instructions
All students will register with the program manager in Biostatistics, msibs@wubios.wustl.edu. Before registering, current Washington University students must obtain appropriate consent from their division or department. Students outside the MSIBS program wishing to enroll in individual courses must have permission of the course master.

Academic Calendar
The MSIBS program begins approximately July 1 each year with preparatory workshops, followed by intensive summer semester courses. For the fall and spring courses, the MSIBS program follows the calendar of the College of Arts & Sciences. See the current MSIBS calendar at https://biostatistics.wustl.edu.

Courses

M21 501 SELECTED TOPICS IN MODERN BIOSTATISTICS
Department: Division of Biostatistics
Course master: C. Charles Gu
Credit hours: 3 units
Frequency: Summers of 2011 and 2012

An intensive six-week summer course, designed as a survey course that gives broad exposure to the basic concepts, methodology and application of select topics in modern biostatistics, with a concentration in genetic epidemiology and bioinformatics. Current topics will be discussed in six major areas organized by week: principles of modern biostatistics, basics of epidemiology and clinical trials, longitudinal and survival data analysis, fundamentals of genetic epidemiology, introduction to bioinformatics and a primer of pharmacogenetics. Students will hear from expert biostatisticians in their fields about challenging, real-world questions, then focus on selected important concepts and methods, analyze case studies and participate in guided reading and group discussions of publications in biostatistics and bioinformatics research. Prerequisites: Math 3200 Elementary to Intermediate Statistics and Data Analysis at Washington University or the equivalent. Open only to students admitted to the SIBS program sponsored by NHLBI and NRCC.

Contact the SIBS program administrator for details, to register or to obtain the required permission of the course master: sibs@wubios.wustl.edu or (314) 362-3950.

M21 502 SUMMER PRACTICUM IN BIOSTATISTICS
Department: Division of Biostatistics
Course master: C. Charles Gu
Credit hours: 3-6 units
Frequency: Summers of 2011 and 2012

Companion course of M21 501 Selected Topics in Modern Biostatistics. All activities are designed around the six weekly topics of the didactic course: principles of modern biostatistics, basics of epidemiology and clinical trials, longitudinal and survival data analysis, fundamentals of genetic epidemiology, introduction to bioinformatics, and primer of pharmacogenetics. This practicum reinforces the concepts and methods to which the students are exposed in M21 501, by solving real-life problems using actual datasets. Students will gain authentic experiences of a career biostatistician through a series of practical activities, including computer labs using real datasets, discussion groups for guided reading of publications, student projects and presentations and summer seminars. Qualified students with advanced experience and strong interest in pursuing a career in biostatistics research will be considered for internship opportunities and a possible second-year 6-unit booster including additional training in teaching.
assistantship and real-world research experiences. Prerequisites: Same as for M21 501 Selected Topics in Modern Biostatistics. Open only to students admitted to the SIBS program sponsored by NHLBI and NRCC.

Contact the SIBS program administrator for details, to register or to obtain the required permission of the course master: sibs@wubios.wustl.edu or (314) 362-3950.

**M21 503 STATISTICAL COMPUTING WITH SAS®**  
Department: Division of Biostatistics  
Course masters: Karen Schwander  
Credit hours: 2 units  
Frequency: Every summer (Section 1 – early July, Section 2 – late August)

Intensive hands-on summer training in SAS® during nine full weekdays. Students will learn how to use the SAS® system for handling, managing and analyzing data. Instruction is provided in the use of the SAS® programming language, procedures, macros and SAS® SQL. The course will include exercises using existing programs written by SAS® experts. Instruction manual and computer lab will be provided. This course meets the prerequisite for M21 560 Biostatistics I offered in fall. The registration/grade option of "Audit" is not available.

Participants are required to participate in the Computing/Unix Workshop and are strongly encouraged to take the Math/Statistics Workshop offered free of charge immediately prior to this course in early July. For details, to register and to obtain the required permission of the course master, contact the MSIBS program manager: msibs@wubios.wustl.edu or (314) 362-1384.

**M21 515 FUNDAMENTALS OF GENETIC EPIDEMIOLOGY**  
Department: Division of Biostatistics  
Course masters: Treva Rice and Yun Ju Sung  
Credit hours: 3 units  
Frequency: Every summer

Intensive two-week summer course. Lectures cover causes of phenotypic variation, familial resemblance and heritability, Hardy-Weinberg Equilibrium, ascertainment, study designs and basic concepts in genetic segregation, linkage and association. The computer laboratory portion is designed as hands-on practice of fundamental concepts. Students will gain practical experience with various genetics computer programs (e.g., SOLAR, MERLIN, QTDT and PLINK). Auditors will not have access to the computer lab sessions.

Participants are strongly encouraged to participate in the computing/UNIX Workshop offered free of charge prior to this course in early July. For details, to register and to obtain the required permission of the course master, contact the MSIBS program manager at msibs@wubios.wustl.edu or (314) 362-1384.

**M21 550 INTRODUCTION TO BIOINFORMATICS**  
Department: Division of Biostatistics  
Course master: Jingqin (Rosy) Luo, Co-Coursemaster: C. Charles Gu  
Credit hours: 3 units  
Frequency: Every summer

Intensive two-week summer course designed to provide broad exposure to the basic concepts, methodology and application of bioinformatics to solve biomedical problems. Specifically, students will learn the basics of online genomic databases and database mining tools and will acquire understanding of mathematical algorithms in genome sequence analysis (alignment analysis, gene finding/predicting), gene expression microarray (genechip) analysis, and the impact of recent developments such as protein microarrays or whole-genome DNA chips for genome-wide association studies. Students will also take computer labs and learn basics of bioinformatics tools and databases (BLAST/WUBLAST, Prospector, etc.), practice basics of R/Bioconductor programming, and apply specialized R packages to solve
bioinformatics problems pertinent to real medical research of human diseases. Auditors will not have access to the computer lab sessions.

Participants are strongly encouraged to participate in the computing/UNIX Workshop offered free of charge prior to this course in early July.

For details, to register and to obtain the required permission of the course master, contact the MSIBS program manager at msibs@wubios.wustl.edu or (314) 362-1384.

**M21 5483 HUMAN LINKAGE AND ASSOCIATION ANALYSIS**
Department: Department of Genetics  
Course master: John Rice  
Credit hours: 3 units  
Frequency: Every fall

Basic genetic concepts: meiosis, inheritance, Hardy-Weinberg Equilibrium, linkage, segregation analysis; Linkage analysis: definition, crossing over, map functions, phase, LOD scores, penetrance, phenocopies, liability classes, multipoint analysis, non-parametric analysis (sibpairs and pedigrees), quantitative trait analysis, determination of power for Mendelian and complex trait analysis; linkage disequilibrium analyses: allelic association (case control designs and family bases studies), QQ and Manhattan plots, whole genome association analysis; population stratification; quantitative trait analysis; measured genotypes and variance components. Hands-on computer lab experience doing parametric linkage analysis with the program LINKAGE, model free linkage analyses with Genehunter and Merlin, power computations with SLINK, quantitative trait analyses with SOLAR, LD computations with Haploview and WGAViewer, and family-based and case-control association analyses with PLINK and SAS. The methods and exercises are coordinated with the lectures, and students are expected to understand underlying assumptions and limitations and the basic calculations performed by these computer programs. Auditors will not have access to the computer lab sessions. Prerequisite: M21 515 Fundamentals of Genetic Epidemiology. Cross-listed as L41 5483.

For details, to register and to obtain the required permission of the course master, contact the MSIBS program manager at msibs@wubios.wustl.edu or (314) 362-1384.

**M21 560 BIOSTATISTICS I**
Department: Division of Biostatistics  
Course masters: Kenneth Schechtman and Kathryn Trinkaus  
Frequency: Every fall (ending mid-October)

This course is designed for students who want to develop a working knowledge of basic methods in biostatistics. The course is focused on biostatistical and epidemiological concepts and on practical hints and hands-on approaches to data analysis rather than on details of the theoretical methods. We will cover basic concepts in hypothesis testing, will introduce students to several of the most widely used probability distributions, and will discuss classical statistical methods that include t-tests, chi-square tests, regression analysis and analysis of variance. Both in-class examples and homework assignments will involve extensive use of SAS. Prerequisite: M21 503, Statistical Computing with SAS®, or student must have good practical experience with SAS®.

For details, to register and/or to obtain the required permission of the course master, contact the program manager: msibs@wubios.wustl.edu or (314) 362-1384.

**M21 570 BIOSTATISTICS II**
Department: Division of Biostatistics  
Course masters: Kenneth Schechtman and Kathryn Trinkaus  
Credit hours: 3 units  
Frequency: Every fall (from mid-October to mid-December)
This course is designed for students who have taken Biostatistics I or the equivalent and who want to extend their knowledge of biostatistical applications to more modern and more advanced methods. Biostatistical methods to be discussed include logistic and Poisson regression, survival analysis, Cox regression analysis, and several methods for analyzing longitudinal data. Students will be introduced to modern topics that include statistical genetics and bioinformatics. The course will also discuss clinical trial design, the practicalities of sample size and power computation and meta analysis, and will ask students to read journal articles with a view toward encouraging a critical reading of the medical literature. Both in-class examples and homework assignments will involve extensive use of SAS. Prerequisite: M21 560, Biostatistics I or its equivalent as judged by the course masters.

For details, to register, and/or to obtain the required permission of the course master, contact the program manager: msibs@wubios.wustl.edu or (314) 362-1384.

**M21 617 STUDY DESIGN AND CLINICAL TRIALS**
Department: Division of Biostatistics  
Course masters: Jingxia (Esther) Liu  
Credit hours: 3 units  
Frequency: Every spring

The course will focus on statistical and epidemiological concepts of study design and clinical trials. Topics include: different phases of clinical trials, various types of medical studies (observational studies, retrospective studies, adaptive designs and comparative effectiveness research), and power analysis. Study management and ethical issues are also addressed. Students will be expected to do homework and to practice power analysis during lab sessions. Prerequisite: M21 560 Biostatistics I and M21 570 Biostatistics II. Permission of the course master required.

Contact the MSIBS program manager for details and for the required permission of the course master at MSIBS@wubios.wustl.edu or (314) 362-1384.

**M21 618 SURVIVAL ANALYSIS**
Department: Division of Biostatistics  
Course masters: Gina Marie D'Angelo  
Credit hours: 3 units  
Frequency: Every spring

This course will cover the basic applied and theoretical aspects of models to analyze time-to-event data. Basic concepts will be introduced including the hazard function, survival function, right censoring, and the Cox-proportional hazards (PH) model with fixed and time dependent covariates. Additional topics will include regression diagnostics for survival models, the stratified PH model, additive hazards regression models and multivariate survival models. Prerequisite: Calculus I and II, M21 560 Biostatistics I and M21 570 Biostatistics II. Permission of the course master required.

Contact the MSIBS program manager for details and for the required permission of the course master at MSIBS@wubios.wustl.edu or (314) 362-1384.

**M21 621 COMPUTATIONAL STATISTICAL GENETICS**
Department: Division of Biostatistics  
Course masters: Michael Province and Aldi Kraja  
Credit hours: 3 units  
Frequency: Every spring

This course covers the theory and application of both classical and advanced algorithms for estimating parameters and testing genomic hypotheses connecting genotype to phenotype. Students learn the key methods by writing their own program to do (simplified) linkage analysis in pedigrees in SAS for a simulated dataset provided by the course master. Topics covered in the course include Maximum Likelihood theory for pedigrees and unrelated individuals, maximization routines such as

M21 580 ADVANCED TOPICS IN BIOSTATISTICS
Department: Division of Biostatistics
Course master: Chengjie Xiong
Credit hours: 3 units
Frequency: Every spring

The primary objective of this course is to provide students with a solid foundation of the most-used statistical methods in biology and medicine. The focus will be on likelihood-based approaches for general linear models, random effect models, general and generalized linear mixed models, longitudinal data analysis, meta-analysis, categorical data analyses, multivariate analysis, as well as Bayesian approaches for some of these models. The emphasis will be on linear statistical models, including both the methodology (the interpretation of the models and parameters, point and confidence interval estimation, hypothesis tests) and their biomedical applications as well as the computer implementation. SAS® will be extensively used for computation, both in homework assignments and term projects. Auditors will not have access to the computer lab sessions. Prerequisites: M21 560 Biostatistics I and M21 570 Biostatistics II. Permission of the course master required.

M21 618 RESEARCH METHODS FOR GENOMIC STUDIES OF HUMAN DISEASE
Department: Division of Biostatistics
Course master: C. Charles Gu
Credit hours: 3 units
Frequency: Every spring

The course provides in-depth coverage of quantitative aspects of biomedical studies employing contemporary ‘-omics’ technologies and a global approach to uncovering disease biology. Students will acquire understanding of research design and methods including statistical theory and concepts, computational algorithms, and popular programming tools for conducting such studies. We will cover seasonally selected set of topics concerning the study of human diseases from among genomic analysis of variations, transcriptomic study of regulatory mechanisms, metagenomic analysis of human diseases, and research methods for epigenomics, proteomics, and interactomics and pathway analysis. As part of this course, students will perform critical appraisal of case studies employing these research methods and take part in classroom discussions of their appraisals. It is expected that by taking this course, students will gain a solid grasp of how contemporary ‘-omics’ technologies are used in studying human diseases, what are important design and analytical issues involved, where to find related resources, and how to deal with practical difficulties in real disease studies. Prerequisites: M21 550: Intro to Bioinformatics and permission of the course master.

M21 630 INTERNSHIP
Department: Division of Biostatistics
Course masters: D.C. Rao and J. Philip Miller
Credit hours: 6 units
Frequency: Every summer beginning in 2012

The primary goal of the Internship program is for all students to acquire critical professional experience so that they will be well prepared to enter the job market upon graduation. This provides an opportunity for students to test-drive the job market, develop contacts, build marketable skills and perceive likes and
dislikes in the chosen field. Students are required to spend a total of 440 hours in the laboratories of their chosen mentors. One of two types of projects may be pursued as part of the Internship experience. A student may elect to pursue a "Data Analysis Project" involving data management and extensive analyses of data which may lead to a publication-quality manuscript (possibly earning co-authorship for the student). Alternatively, a student may choose a highly focused research-oriented project and carry out "Mentored Research" by working closely with the mentor. In this case, the student will assist the mentor by preparing a publication-quality manuscript as part of the Internship. In either case, as part of the Internship requirements, each student will submit a one-page abstract of the work performed as part of the internship and will give a 5-minute presentation of the Internship experience. Internship presentations will be scheduled in late summer. The grade for each student will be determined in consultation with the mentor. Internships will be facilitated and coordinated by an Internship Committee consisting of professors J. Philip Miller & D.C. Rao (Co-Chairs), Ken Schechtman and Chengjie Xiong. Available to Master of Science in Biostatistics (MSIBS) students only.

M21 640 BIOSTATISTICS CONSULTING LAB
Department: Division of Biostatistics
Course masters: Karen Steger-May and Kenneth Schechtman
Credit hours: 1 unit
Frequency: Every fall beginning in 2012

All M.S. in Biostatistics students are required to take this course with the primary goal to train the students to develop competency for collaborating with and providing biostatistics consultation services to clinical and applied scientists. Students will be trained to develop the art and skill necessary to be good collaborators. Students will work on real time consultation projects and will have opportunities to interact with the Principal Investigators on the projects under close supervision from experienced faculty and staff. This is an invaluable opportunity for students to develop contacts with potential employers upon graduation. Prerequisites: M21 560 Biostatistics I and M21 570 Biostatistics II. Required of Master of Science in Biostatistics (MSIBS) students and to pre-selected others who have the prerequisites and the specific permission of the course master.

M21 650 THESIS
Department: Division of Biostatistics
Course masters: Gina D'Angelo and Chengjie Xiong
Credit hours: 6 units
Frequency: Every fall beginning in 2012

The master's thesis may involve conducting and reporting a comprehensive data analysis or conducting research and reporting on the focused methodological problem. The latter may include a computer simulation approach to solve a problem, an in-depth review of available methods in a certain topical area, or developing new methods. Each student will work closely with a mentor who has expertise in biostatistics or a related quantitative field. Three bound copies and an electronic copy of the thesis must be submitted to the program manager by the deadline determined by the university for December graduation. A thesis committee consisting of Drs. Gina D'Angelo and Chengjie Xiong (co-chairs), Feng Gao, and Rosy Luo will examine all theses submitted and determine the grade in consultation with the mentors. Available to Master of Science in Biostatistics (MSIBS) students by invitation only.

Faculty

Link to Website
http://www.biostat.wustl.edu/msibs/
Clinical Investigation

Master of Science in Clinical Investigation (MSCI) Program

The Master of Science in Clinical Investigation (MSCI) program provides high-quality, multidisciplinary training in clinical research to promote the successful career development of clinical investigators. The MSCI is available to postdoctoral scholars, junior faculty and predoctoral students enrolled in established clinical research training programs. The program is also available to other Washington University affiliated postdoctoral health sciences scholars. Postdoctoral scholars and junior faculty must be within the medicine and allied health professions, conducting clinical research at Washington University or with an affiliated program. Predoctoral students in medicine, psychology, the Division of Biology and Biomedical Sciences, social work, audiology, physical therapy, occupational therapy and related disciplines in the Graduate School of Arts & Sciences who have completed or are enrolled in the intensive Predoctoral Interdisciplinary Clinical Research Training Program are also eligible. For further information, email Angela Wilson at abwilson@dom.wustl.edu or visit http://crtc.wustl.edu.

Program Requirements

The MSCI requires the following core curriculum in clinical investigation:

- **M17 513 DESIGNING OUTCOMES AND CLINICAL RESEARCH**
  3 credits, Fall Semester, Wednesdays 3:30–5:45 p.m., Brian Gage, MD, MSc, course master
  This course includes lectures from faculty of Medicine, Surgery, Otolaryngology and Pediatrics. DOC Research covers how to select a clinical research question, write a research protocol and execute a clinical study. Topics include subject selection, observational and experimental study design, sample size estimation, clinical measurements, questionnaires and data management. The course is designed for clinicians and health-care professionals who wish to conduct outcomes and patient-oriented clinical research. Students receive ongoing feedback as they incorporate research design concepts into their own research proposals. At the end of the course, students are required to submit a research protocol or a draft of a manuscript describing their research and pass the final exam. The course consists of lectures. Each student gives an oral presentation and presents a written paper or grant protocol for discussion and critique by faculty and other students.

- **M17 522 INTRODUCTION TO STATISTICS FOR CLINICAL INVESTIGATION**
  3 credits, Fall Semester, Thursdays 4:30–7 p.m., Dorina Kallogjeri, MD, MPH, course master
  This is a basic course in statistics with particular focus on the health sciences. It is taught in a user-friendly manner with emphasis on use of SPSS, statistical analysis software commonly used in clinical research. The course will teach basic statistical methods in which clinical researchers should have facility to execute their own analyses.

- **M17 524 INTERMEDIATE STATISTICS FOR THE HEALTH SCIENCES**
  3 credits, Spring Semester, Thursdays 4-6:30 p.m., Dorina Kallogjeri, MD, MPH, course master
  This 15-week course is designed to build on skills developed in Introduction to Statistics for the Health Sciences and to foster basic expertise required to independently use common multivariate biostatistical methods to analyze clinical research data for peer-review presentation and publication.

- **M17 510 ETHICAL AND LEGAL ISSUES IN CLINICAL RESEARCH**
  2 credits, Fall and Spring Semesters, Mondays 4-6 p.m., Stephanie Solomon, PhD, course master
  This course prepares clinical researchers to critically evaluate ethical and regulatory issues in clinical research. The principal goal of this course is to prepare clinical researchers to identify ethical issues in clinical research and the situational factors that give rise to them, to identify ethics and compliance resources and to foster ethical problem-solving skills.

- **M17 588 EPIDEMIOLOGY FOR CLINICAL RESEARCH**
  3 credits, Spring Semester, Wednesdays 4:30-7 p.m., Anjali Deshpande, PhD, course master
  This course introduces principles of epidemiology as they apply to clinical research. The course provides basic tools used in descriptive and analytical epidemiology, which are crucial for making informed decisions in the care of patients. Critical thinking and scientific/analytic competencies are emphasized throughout the course.

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• **M17 528 GRANTSMANSHIP**  
3 credits, Fall Semester, Tuesdays 4:15–6:15 p.m., Jay Piccirillo, MD, Karen Dodson, course masters  
Scholars create a focused research plan that incorporates well-formulated hypotheses, rationales, specific objectives and long-range research goals; organize and present a sound research plan that accurately reflects the ideas and directions of the proposed research activities; develop and justify a budget for the proposed research activities; avoid many common grant-writing mistakes; discuss the peer-review process in grant evaluation and formulate a grant proposal that is maximally compatible with that process.

OR

• **M17 529 SCIENTIFIC WRITING AND PUBLISHING**  
2 credits, Spring Semester, Tuesdays 4:15-6:15 p.m., Jay Piccirillo, MD, and Karen Dodson, course masters  
The objective of this course is to teach the proper techniques of writing and publishing a biomedical manuscript. Writing a working title and structured abstract as well as hand drawing of figures and tables is covered. Publishing strategies are also discussed.

Scholars also:
• Conduct independent research under the tutelage of a mentorship committee (7 credits)  
• Participate in an ongoing seminar series to present and discuss research as a work-in-progress (1 credit each semester, minimum of 4 semesters)  
• Take elective course work related to their research interests (minimum 6 credits)  
• Submit a final thesis consisting of a submitted manuscript

Advanced placement credit can be earned for past equivalent course work as determined on an individual basis. The MSCI is a 33-credit degree and typically takes two to three years to complete.

**Tuition**  
Tuition is $1,000 per credit hour. Training grant or departmental funds are typically used to cover tuition costs. However, some costs of the degree may be the responsibility of the scholar. Trainees currently enrolled in other medicine and allied health programs should contact the program director or program coordinator to discuss entry into the MSCI program.

**Location**  
Most courses and seminars are taught during late afternoon or early evening hours in the CRTC, located on the second floor of Wohl Hospital Building.

**Further Information**  
Please visit our website at http://crtc.wustl.edu.

**Contacts:**  
Angela Wilson, curriculum and evaluation coordinator  
(314) 454-8936  
abwilson@dom.wustl.edu

Sarah Zalud-Cerrato, program manager — curriculum and evaluation  
(314) 362-0916  
szalud@dom.wustl.edu

Washington University in St. Louis  
School of Medicine  
Master of Science in Clinical Investigation Program  
Campus Box 8051  
660 S. Euclid Ave.  
St. Louis, MO 63110

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Faculty

Program Directors

David K. Warren, MD, MPH
Associate Professor of Medicine
Director, Master of Science in Clinical Investigation Program
Co-Director, Postdoctoral Program
Division of Infectious Diseases, Department of Medicine, Washington University School of Medicine

Bradley A. Evanoff, MD, MPH
Richard A. and Elizabeth Henby Sutter Professor of Occupational, Industrial and Environmental Medicine
Chief, Division of General Medical Sciences, Department of Medicine
Co-Director, Clinical Research Training Center
Division of General Medical Sciences, Department of Medicine, Washington University School of Medicine

Victoria J. Fraser, MD
Interim Chair, Department of Medicine
J. William Campbell Professor of Medicine
Co-Director, Division of Infectious Diseases
Director, Clinical Research Training Center, Career Development Award Program and KM1 Program
Division of Infectious Diseases, Department of Medicine, Washington University School of Medicine

Jane M. Garbutt, MBChB, MHSc
Research Associate Professor of Medicine and of Pediatrics
Medical Director of Washington University Pediatric and Adolescent Ambulatory Research Consortium (WU PAARC)
Director, Postdoctoral Program
Co-Director, Career Development Award Program
Division of General Medical Sciences, Department of Medicine, Washington University School of Medicine

Jay F. Piccirillo, MD
Professor, Department of Otolaryngology
Director, Clinical Outcomes Research Office
Director, Predoctoral Interdisciplinary Clinical Research Training Program, Doris Duke Clinical Research Fellowship and ASPIRE Program
Department of Otolaryngology, Washington University School of Medicine

Jeffrey F. Peipert, MD, MPH, MHA
Robert J. Terry Professor of Obstetrics and Gynecology
Vice Chair of Clinical Research
Obstetrics and Gynecology Residency Program Director
Co-Director, Predoctoral Interdisciplinary Clinical Research Training Program
Associate Director, Postdoctoral Program
Department of Obstetrics and Gynecology, Washington University School of Medicine

Mario Castro, MD, MPH
Professor of Medicine
Co-Director, Doris Duke Clinical Research Fellowship
Department of Medicine, Washington University School of Medicine

Susan L. Stark, PhD, OTR/L
Assistant Professor of Occupational Therapy and of Neurology
Co-Director, Predoctoral Interdisciplinary Clinical Research Training Program
Program in Occupational Therapy, Washington University School of Medicine
Allyson R. Zazulia, MD
Associate Professor of Neurology and of Radiology
Associate Director, Postdoctoral Program
Department of Neurology, Washington University School of Medicine

Course Masters

Dorina Kallogjeri, MD, MPH (Introduction to Statistics for Clinical Investigation, Intermediate Statistics for the Health Sciences)
Research Statistician, Department of Otolaryngology, Washington University School of Medicine

Anjali D. Deshpande, PhD, MPH (Epidemiology for Clinical Research)
Research Assistant Professor PEFA, Division of Health Behavior Research, Department of Medicine, Washington University School of Medicine

Karen L. Dodson (Scientific Writing, Grantsmanship)
Adjunct Instructor, Department of Medicine; Director of Faculty Development and Academic Publishing Services, Office of Faculty Affairs, Washington University School of Medicine

Brian F. Gage, MD, MSc (Designing Outcomes and Clinical Research)
Associate Professor of Medicine, Division of General Medical Sciences, Department of Medicine, Washington University School of Medicine

Jefferson M. Gill, PhD (Multilevel Models in Quantitative Research)
Professor of Political Science, Department of Political Science, Washington University School of Arts & Sciences

Steven M. Kymes, PhD, MHA (Decision Analysis for Clinical Investigation and Economic Evaluation)
Research Associate Professor of Ophthalmology and Visual Sciences, Department of Ophthalmology and Visual Sciences, Washington University School of Medicine

Rakesh Nagarajan, PhD (Introduction to Biomedical Informatics)
Associate Professor of Pathology and Immunology, Division of Laboratory and Genomic Medicine, Department of Pathology and Immunology, Washington University School of Medicine

Jay F. Piccirillo, MD (Scientific Writing, Grantsmanship)
Professor, Department of Otolaryngology
Director, Predoctoral Interdisciplinary Clinical Research Training Program
Department of Otolaryngology, Washington University School of Medicine

Rachel M. Presti, MD, PhD (Bench Fundamentals of Translational Research)
Assistant Professor of Medicine, Division of Infectious Diseases, Department of Medicine, Washington University School of Medicine

Instructors and Guest Lecturers

Thomas C. Bailey, MD
Professor of Medicine, Division of Infectious Diseases, Department of Medicine
Washington University School of Medicine

Laura J. Bierut, MD
Professor of Psychiatry, Department of Psychiatry, Washington University School of Medicine

Bijoy George
Biomedical Informatics Program Manager, Department of Laboratory and Genomic Medicine, Washington
University School of Medicine

**Graham A. Colditz, MD, DrPH**  
Niess-Gain Professor in the School of Medicine  
Chief, Division of Public Health Sciences, Department of Surgery, Washington University School of Medicine  
Associate Director, Prevention and Control, Siteman Cancer Center  
Adjunct Professor, Community Health, Division of Epidemiology, Saint Louis University School of Public Health

**Anjali D. Deshpande, PhD, MPH**  
Research Assistant Professor PEFA, Division of Health Behavior Research, Department of Medicine, Washington University School of Medicine

**Bettina F. Drake, PhD, MPH**  
Assistant Professor of Surgery, Division of Public Health Sciences, Department of Surgery, Washington University School of Medicine

**Rebecca Dresser, JD**  
Daniel Noyes Kirby Professor of Law and Professor of Ethics in Medicine, Washington University School of Law

**Jim Dubois, PhD, DSc**  
Hubert Mader Endowed Chair and Director, Bander Center for Medical Business Ethics, Social Science Research Group and Center for Research Ethics and Integrity, Albert Gnaegi Center for Health Care Ethics, Saint Louis University

**Bradley A. Evanoff, MD, MPH**  
Richard A. and Elizabeth Henby Sutter Professor of Occupational, Industrial and Environmental Medicine  
Director, Institute of Clinical and Translational Sciences  
Division of General Medical Sciences, Department of Medicine, Washington University School of Medicine

**Jane M. Garbutt, MB, ChB**  
Associate Professor of Medicine and of Pediatrics  
Medical Director of Washington University Pediatric and Adolescent Ambulatory Research Consortium (WU PAARC)  
Director, Postdoctoral Program  
Division of General Medical Sciences, Department of Medicine, Washington University School of Medicine

**Jonathan M. Green, MD**  
Associate Dean for Human Studies and Executive Chair of the Institutional Review Board (IRB), Washington University School of Medicine

**Snehil Gupta**  
Bioinformaticist, Division of Laboratory and Genomic Medicine, Department of Pathology and Immunology, Washington University School of Medicine

**Christine M. Hoehner, PhD**  
Assistant Professor, Department of Surgery, Washington University School of Medicine

**Dorina Kallogjeri, MD, MPH**  
Research Statistician, Department of Otolaryngology, Washington University School of Medicine

**Marin H. Kollef, MD**  
Golman Professor of Medicine, Division of Pulmonary and Critical Care Medicine, Department of Medicine, Washington University School of Medicine; Director, Medical Intensive Care Unit and Director, Respiratory Care Services, Barnes-Jewish Hospital

**Laura B. Langton, PhD**
Research Development Manager, Office of the Vice Chancellor for Research, Washington University School of Medicine

**Judith E. Lieu, MD**
Assistant Professor, Department of Otolaryngology, Washington University School of Medicine

**Mark J. Manary, MD**
Professor of Pediatrics, Division of Emergency Medicine, Department of Pediatrics, Washington University School of Medicine

**Timothy McBride, PhD**
Professor and Associate Dean for Public Health, George Warren Brown School of Social Work, Washington University

**Jay R. McDonald, MD**
Assistant Professor of Medicine, Division of Infectious Diseases, Department of Medicine, Washington University School of Medicine

**Leslie D. McIntosh, PhD**
Research Instructor, Department of Pathology and Immunology, Washington University School of Medicine

**J. Phillip Miller**
Professor of Biostatistics, Division of Biostatistics, Washington University School of Medicine

**David A. Mulvihill**
Project Manager IS, Division of Laboratory and Genomic Medicine, Department of Pathology and Immunology, Washington University School of Medicine

**Peter Nagele, MD**
Assistant Professor of Anesthesiology, Department of Anesthesiology, Division of Clinical Research, Washington University School of Medicine

**Anthony O. Odibo, MD, MSCE**
Associate Professor of Obstetrics and Gynecology, Division of Maternal-Fetal Medicine and Ultrasound, Department of Obstetrics and Gynecology, Washington University School of Medicine

**Chijioke G. Ogbuka, MDiv, MA**
Pre-doctoral Fellow, Center for Clinical Research Ethics, Albert Gnaegi Center for Health Care Ethics, Saint Louis University

**Margaret A. Olsen, PhD, MPH**
Research Associate Professor of Medicine, Division of Infectious Diseases, Department of Medicine, Washington University School of Medicine

**Diana L. Owyoung**
Research Administrator, Department of Cell Biology and Physiology, Washington University School of Medicine

**Jay F. Piccirillo, MD**
Professor, Department of Otolaryngology
Director, Clinical Outcomes Research Office
Director, Predoctoral Interdisciplinary Clinical Research Training Program, Doris Duke Clinical Research Fellowship and ASPIRE program
Department of Otolaryngology, Washington University School of Medicine

**Fred W. Prior, PhD**
Lab Director, Electronic Radiology Lab
Research Associate Professor, Department of Radiology, Washington University School of Medicine
Further Information

Please visit our website at http://crtc.wustl.edu; contact Angela Wilson, curriculum and evaluation coordinator, (314) 454-8936 or Sarah Zalud-Cerrato, program manager — Curriculum and Evaluation, (314) 362-0916, szalud@dom.wustl.edu; or write to:

Washington University in St. Louis
School of Medicine
Master of Science in Clinical Investigation Program
Campus Box 8051
660 S. Euclid Ave.
St. Louis, MO 63110

Link to Website

http://crtc.wustl.edu

Genetic Epidemiology

Certificate in Genetic Epidemiology

The Certificate in Genetic Epidemiology training program provides a multidisciplinary educational opportunity for people who want to work at the dynamic nexus of genetics and medicine. There are growing needs for scientists with this training both in academia and industry. With the wealth of data from the Human Genome Project and the availability of powerful new computational approaches,
abundant opportunities are now available to explore and characterize the interplay between genes and the environment that affect the biological processes that underlie disease.

The GEMS Certificate program is sponsored by the Division of Biostatistics and includes world-renowned scientific leaders in their respective areas. D.C. Rao, PhD, director of the Division of Biostatistics and the program director, is one of the founding fathers of the field. The 17-credit-hour program is designed to prepare students to work at the interface of genetics, biostatistics, epidemiology and computing. See https://biostatistics.wustl.edu/training/msibs/pages for details.

The Certificate in Genetic Epidemiology is earned after successful completion (with a minimum of a “B” average) of five core courses plus labs (17 credit hours) that are normally offered to master’s candidates in Biostatistics. To earn the certificate, these courses may be taken over one or two years:

**M21 503 statistical computing with SAS** (summer)
**M21 515 fundamentals of genetic epidemiology** (summer)
**M21 550 introduction to bioinformatics** (summer)
**M21 560 biostatistics I** (fall)
**M21 570 biostatistics II** (fall)
**M21 5483 human linkage and association** (fall)

**Prospective Students**
Since genetic epidemiology is a multidisciplinary field, we expect applicants to come from a variety of backgrounds, but primarily those who have earned a terminal degree such as physician scientists and other clinical investigators, particularly postdoctoral fellows and people with terminal degrees in other (related) disciplines who seek to gain expertise in genetic epidemiology. All prospective students must provide evidence of basic skills in computer programming through course work, documented experience or by passing a proficiency exam. Promising candidates who do not meet all the prerequisites will work with the program director to take the appropriate courses or training to rectify weaknesses.

**Location**
The program is located in the Division of Biostatistics, on the third floor of Shriners Building (706 S. Euclid Ave. at Clayton Road), Rooms 3301-3312.

**Further Information**
See our website, https://biostatistics.wustl.edu/training/msibs, contact the program manager at (314) 362-1052, send email to msibs@wubios.wustl.edu or write to:
The MSIBS Program
Division of Biostatistics
Campus Box 8067
660 S. Euclid Ave.
St. Louis, MO 63110-1093
Telephone: (314) 362-1384
Fax: (314) 362-2693

**Registration Instructions**
All students will register with the program manager at msibs@wubios.wustl.edu. Before registering, current Washington University students must obtain appropriate consent from their division or department. Students outside of the program wishing to enroll in individual courses must have permission of the course master.

**Academic Calendar**
The certificate program begins approximately July 1 each year with preparatory workshops, followed by intensive summer semester courses. For the fall courses, the certificate program follows the calendar of the College of Arts & Sciences. See the current calendar at https://biostatistics.wustl.edu/training/msibs/currentstudents/Pages/Calendars.aspx.
Courses

Required Courses for Certificate in Genetic Epidemiology

M21 503 STATISTICAL COMPUTING WITH SAS®
Department: Division of Biostatistics
Course master: Karen Schwander
Credit hours: 2 units
Frequency: Every summer (Section 1 – early July, Section 2 – late August)

Intensive hands-on summer training in SAS® during nine full weekdays. Students will learn how to use the SAS® system for handling, managing and analyzing data. Instruction is provided in the use of the SAS® programming language, procedures, macros and SAS® SQL. The course will include exercises using existing programs written by SAS® experts. Instruction manual and computer lab will be provided. This course meets the prerequisite for M21 560 Biostatistics I offered in fall. The registration/grade option of "Audit" is not available.

Participants are required to participate in the Computing/Unix Workshop and are strongly encouraged to take the Math/Statistics Workshop offered free of charge immediately prior to this course in early July.

For details, to register and to obtain the required permission of the course master, contact the MSIBS program manager: msibs@wubios.wustl.edu or (314) 362-1384.

M21 515 FUNDAMENTALS OF GENETIC EPIDEMIOLOGY
Department: Division of Biostatistics
Course masters: Treva Rice and Yun Ju Sung
Credit hours: 3 units
Frequency: Every summer

Intensive two-week summer course. Lectures cover causes of phenotypic variation, familial resemblance and heritability, Hardy-Weinberg Equilibrium, ascertainment, study designs and basic concepts in genetic segregation, linkage and association. The computer laboratory portion is designed as hands-on practice of fundamental concepts. Students will gain practical experience with various genetics computer programs (e.g., SOLAR, MERLIN, QTDT and PLINK). Auditors will not have access to the computer lab sessions.

Participants are strongly encouraged to participate in the computing/UNIX Workshop offered free of charge prior to this course in early July. For details, to register and to obtain the required permission of the course master, contact the MSIBS program manager at msibs@wubios.wustl.edu or (314) 362-1384.

M21 550 INTRODUCTION TO BIOINFORMATICS
Department: Division of Biostatistics
Course master: Jingqin (Rosy) Luo, Co-Coursemaster: C. Charles Gu
Credit hours: 3 units
Frequency: Every summer

Intensive two-week summer course designed to provide broad exposure to the basic concepts, methodology and application of bioinformatics to solve biomedical problems. Specifically, students will learn the basics of online genomic databases and database mining tools and will acquire understanding of mathematical algorithms in genome sequence analysis (alignment analysis, gene finding/predicting), gene expression microarray (genechip) analysis, and the impact of recent developments such as protein microarrays or whole-genome DNA chips for genome-wide association studies. Students will also take computer labs and learn basics of bioinformatics tools and databases (BLAST/WUBLAST, Prospector, etc.), practice basics of R/Bioconductor programming, and apply specialized R packages to solve bioinformatics problems pertinent to real medical research of human diseases. Auditors will not have
access to the computer lab sessions.

Participants are strongly encouraged to participate in the computing/UNIX Workshop offered free of charge prior to this course in early July.

For details, to register and to obtain the required permission of the course master, contact the MSIBS program manager at msibs@wubios.wustl.edu or (314) 362-1384.

**M21 5483 HUMAN LINKAGE AND ASSOCIATION ANALYSIS**
Department: Department of Genetics
Course master: John Rice
Credit hours: 3 units
Frequency: Every fall

Basic genetic concepts: meiosis, inheritance, Hardy-Weinberg Equilibrium, linkage, segregation analysis; linkage analysis: definition, crossing over, map functions, phase, LOD scores, penetrance, phenocopies, liability classes, multipoint analysis, non-parametric analysis (sibpairs and pedigrees), quantitative trait analysis, determination of power for Mendelian and complex trait analysis; linkage disequilibrium analyses: allelic association (case control designs and family bases studies), QQ and Manhattan plots, whole-genome association analysis; population stratification; quantitative trait analysis; measured genotypes and variance components. Hands-on computer lab experience doing parametric linkage analysis with the program LINKAGE, model-free linkage analyses with Genehunter and Merlin, power computations with SLINK, quantitative trait analyses with SOLAR, LD computations with Haploview and WGAViewer, and family-based and case-control association analyses with PLINK and SAS. The methods and exercises are coordinated with the lectures, and students are expected to understand underlying assumptions and limitations and the basic calculations performed by these computer programs. Auditors will not have access to the computer lab sessions. Prerequisite: M21 515 Fundamentals of Genetic Epidemiology. Cross-listed as L41 5483.

For details, to register and to obtain the required permission of the course master, contact the MSIBS program manager at msibs@wubios.wustl.edu or (314) 362-1384.

**M21 560 BIOSTATISTICS I**
Department: Division of Biostatistics
Course masters: Kenneth Schechtman and Kathryn Trinkaus
Frequency: Every fall (ending mid-October)

This course is designed for students who want to develop a working knowledge of basic methods in biostatistics. The course is focused on biostatistical and epidemiological concepts and on practical hints and hands-on approaches to data analysis rather than on details of the theoretical methods. We will cover basic concepts in hypothesis testing, will introduce students to several of the most widely used probability distributions, and will discuss classical statistical methods that include t-tests, chi-square tests, regression analysis and analysis of variance. Both in-class examples and homework assignments will involve extensive use of SAS. Prerequisite: M21 503, Statistical Computing with SAS®, or student must have good practical experience with SAS®.

For details, to register and/or to obtain the required permission of the course master, contact the program manager at msibs@wubios.wustl.edu or (314) 362-1384.

**M21 570 BIOSTATISTICS II**
Department: Division of Biostatistics
Course masters: Kenneth Schechtman and Kathryn Trinkaus
Credit hours: 3 units
Frequency: Every fall (from mid-October to mid-December)

This course is designed for students who have taken Biostatistics I or the equivalent and who want to
extend their knowledge of biostatistical applications to more modern and more advanced methods. Biostatistical methods to be discussed include logistic and Poisson regression, survival analysis, Cox regression analysis and several methods for analyzing longitudinal data. Students will be introduced to modern topics that include statistical genetics and bioinformatics. The course will also discuss clinical trial design, the practicalities of sample size and power computation and meta analysis, and will ask students to read journal articles with a view towards encouraging a critical reading of the medical literature. Both in-class examples and homework assignments will involve extensive use of SAS. Prerequisite: M21 560, Biostatistics I or its equivalent as judged by the course masters.

For details, to register, and/or to obtain the required permission of the course master, contact the program manager at msibs@wubios.wustl.edu or (314) 362-1384.

Faculty

Link to Website

http://www.biostat.wustl.edu/gems

Occupational Therapy

The Program in Occupational Therapy prepares students for professional practice and through its research generates knowledge to address the issues facing individuals with disabilities, chronic diseases and developmental disabilities. Students are prepared as generalists but, in addition, can concentrate their studies for work in pediatrics, aging, rehabilitation, work and industry or social participation. The curriculum focuses on the dynamic interaction of the biological and psychological, environmental and occupational factors that enable persons to fulfill roles, and lead meaningful and productive lives. Students interact with leading physicians and scientists whose practice and science is contributing to better methods of treatment of persons with disabilities. In addition, students are linked with community agencies and leaders that are providing services to individuals with disabling conditions. Undergraduate students in pre-medical, psychology, biology or anthropology will find that the program offers a means of applying their knowledge in a professional field. Applicants must hold a bachelor’s degree or be a participant in an approved three-two program and have completed prerequisite courses from an accredited college or university. The Program in Occupational Therapy is accredited by the Accreditation Council for Occupational Therapy Education of the American Occupational Therapy Association. Graduates of the program will be eligible to sit for the national certification examination administered by the NBCOT. (Note: A felony conviction may affect a graduate’s ability to sit for NBCOT certification examination or attain state licensure.)

Master of Science in Occupational Therapy Degree Program

The professional Master of Science in Occupational Therapy degree requires courses that develop the knowledge and skills necessary to practice occupational therapy. Each candidate for a Master of Science in Occupational Therapy degree must complete a minimum of 70 hours of course work, usually accomplished in five semesters of study (two academic years and the intervening summer.) Six months of supervised clinical fieldwork (12 credits) is required to be completed within 12 months of completion of course work.

Doctor of Occupational Therapy Degree Program

The Doctor of Occupational Therapy (OTD) is a degree providing students the opportunity to focus their occupational therapy studies in one of five areas of concentration: Productive Aging, Social Participation and the Environment, Rehabilitation, Work and Industry, and Pediatrics. The OTD requires seven semesters of study and three clinical placements for students entering professional practice.
Postprofessional students enrolled in the OTD have varying program lengths based on prior degree and experience.

A full description of degrees in Occupational Therapy is available from the office of the Program in Occupational Therapy, or at the web site www.ot.wustl.edu.

Tuition and fieldwork fees (MSOT, full time) per semester: $13,412 for first five semesters, $6,706 per semester for last two semesters while on fieldwork.

Tuition and fieldwork fees (OTD, full-time): $13,412 per semester first five semesters, $13,865 per semester last two academic semesters, and $6,706 for each semester student is on clinical fieldwork or apprenticeship.

Part-time tuition: $1,070 per credit

Courses

M01 5022 THEORY AND FOUNDATIONS FOR OCCUPATIONAL THERAPY PRACTICE
Instructor: Carolyn Baum
Students explore the knowledge, skills and attitudes of the professional occupational therapist through the study of occupation, one of the core concepts of the profession. The course acquaints students with the profession's history and current health issues as well as occupational therapy's theoretical base and practice models. Students explore the relationship between occupation, development, culture and health through participation in a variety of community experiences.

M01 5092 MANAGEMENT IN A CHANGING PRACTICE ENVIRONMENT
Instructor: Pat Nellis
This course applies management and organizational principles to occupational therapy services in current and potential practice environments and entrepreneurial opportunities. Through discussions with business professionals and case studies, this course highlights organizational, managerial, marketing, financial, regulatory and funding influences on the development, delivery and evaluation of OT practice. Business plans are developed through case studies. Field trips and interactions with managers and corporate leaders allow students the opportunity for experiential learning.

M01 5162 ENVIRONMENTS THAT IMPACT PARTICIPATION IN DAILY LIFE
This course provides an in-depth understanding of the psychological, social, political, physical and cultural elements of the environment that influence participation, well-being and quality of life. Disability, as the consequence of environmental barriers and the relationship between the person and environments as both change across the life span will be discussed. Assessment and intervention strategies that maximize participation in daily activities will be examined in home, school, workplace and other community settings.

M01 5191 NEUROLOGY: FOUNDATIONS FOR NEURO-REHABILITATION PRACTICE
Instructor: Erin Foster
This course provides an overview of selected neurological disorders that affect occupational performance across the lifespan. Through lectures given by physician faculty of the Department of Neurology, students will acquire basic knowledge of the etiology, pathology, clinical course, prognosis and medical management of these diseases or conditions. Lab activities will incorporate lecture material into an occupational performance framework to enhance students’ appreciation of the role of occupational therapy for individuals with neurologic conditions.

M01 5223 HEALTH CONDITIONS
Instructor: Claudia Hilton
Provides an overview of selected chronic diseases and conditions that affect individuals across the lifespan and impact occupational performance. Etiology, pathology, clinical course, prognosis and medical management of these conditions will be understood in order to promote health.

M01 5250 DISABILITY AND SOCIAL POLICY

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Instructor: Steve Taff
The emergence of disability as a minority group with significant public health and social welfare concerns has implications for many aspects of society. This course allows the student to explore disability issues with an emphasis on the more personal aspects of living with a disability and policy issues that influence their lives including: community integration, housing, assistive technology, transportation, employment, self-care, recreation, communication and health care. Conceptual frameworks will be reviewed that are used to define, classify and provide services for people who have impairments, which can result in the lack of their participation in major life activities. Each student will examine one category of impairments to discover the etiology, prevalence, incidence, characteristic expressions of abilities and environmental barriers to their participation in life activities. Students will be exposed to policies, legislation and programs that have an influence on the lives of people with disabilities.

M01 5264 COMMUNITY HEALTH AND OCCUPATIONAL THERAPY
Instructor: Christine Berg
This course examines community health, wellness and education practices through occupational therapy for groups, communities and population. Practice models are explored for promoting health, occupational performance and public health across the lifespan. Students are prepared with community OT practice skills, including needs assessment and program planning and evaluation in conjunction with an actual community site or agency.

M01 528B APPLIED SKILLS FOR DAILY LIVING: OT PRACTICE I
Instructor: Claudia Hilton
This laboratory course provides experiences designed to integrate information from the concurrent theory and practice course. Students explore intervention strategies and methods surrounding participation and continuity of care across ages and environments related to motor learning, cognition, physiological and psycho-social issues. Documentation skills are emphasized. Skills training focuses on caring for self and others.

M01 528C APPLIED SKILLS FOR DAILY LIVING: OT PRACTICE II
Instructor: Monica Perlmutter
Separated into four modules, students receive experiential laboratory activities designed to integrate information from the occupational therapy theory and practice course. Students explore intervention strategies and methods surrounding continuity of care across ages and environments related to pediatric, productive aging, work and industry, and community mental health. The focus is on skills training and strategies for client participation in community-based practice.

M01 5280 OCCUPATIONAL THERAPY TO SUPPORT PHYSIOLOGICAL HEALTH
Instructor: Tim Shurtleff
Students will learn how to design occupational therapy interventions to improve the function of the musculoskeletal, cardiopulmonary, circulatory and sensory systems to promote occupational performance and participation. The physiological basis and evidence supporting these interventions will be explored. Emphasis on the mind-body connection to decrease the effects of stress and promote fitness will be presented by experts in rehabilitation and medicine. Treatment planning and documentation skills are emphasized. Laboratory experiences will reinforce integration of theoretical material through case study analysis with a focus on occupation and participation.

M01 5291 INTERVENTION MODELS IN OCCUPATIONAL THERAPY PRACTICE
Instructor: Claudia Hilton
Divided into content modules, students explore core concepts of OT practice related to motor learning, cognition, physiological and psycho-social issues. Models of assessment and intervention are explored and applied to cases. Students have opportunities to consider practice issues associated with the management of a variety of disabilities, with an emphasis on occupation and environmental context, treatment, continuity of care, documentation and policy issues.

M01 5301 PROBLEM-BASED LEARNING TUTORIAL: CLINICAL REASONING
Instructor: Monica Perlmutter
Students are engaged in a problem-based learning process that includes self-directed learning, problem solving, clinical reasoning and group process skills. Students explore practice problems and apply specific occupational therapy evaluations and intervention techniques for persons of all ages and disability
categories. The focus is on direct clinical treatment interventions. This is a small seminar class with 8-9 students and a faculty mentor.

**M01 5331 INNOVATIVE PRACTICE MODELS IN HOME, WORK, SCHOOL AND COMMUNITY**
Instructor: Monica Perlmutter
Taught in four modules of pediatrics, work and industry, community mental health and productive aging, this course focuses on community-based practice, program planning and participation. Students have opportunities to consider issues associated with the management of a variety of disabilities, with an emphasis on occupation and environmental context, treatment and participation across a continuum of care that reflects different documentation needs and policy issues.

**M01 5451 RESEARCH AND OT: PREPARING FOR EVIDENCE-BASED PRACTICE**
Instructor: Jack Engsberg
Through critical reading and analysis of professional scientific literature, students build a foundation for life-long learning and evidence-based clinical practice. Analysis of research design, statistics and threats to validity are emphasized with both qualitative and quantitative research studies. Students design a research study and practice statistical analysis of an occupational therapy research data set.

**M01 5491 INNOVATIONS OF ASSISTIVE TECHNOLOGY TO SUPPORT PARTICIPATION**
Instructor: Kerri Morgan
This course introduces Assistive Technology (AT) equipment to improve lives by compensating for limitations that prohibit participation. Assessment to match available AT to the client/consumer to meet personal goals within desired environmental context(s) is taught. Lectures and labs focus on the selection and fitting of AT, including: computer access and output devices, manual and powered wheelchairs and mobility devices, seating, augmentative communication systems, environmental control units, orthotics and prosthetics, functional electrical stimulation, adapted driving vehicles and recreational equipment. Ethical, legislative, funding, functional assessment and psychosocial issues are reviewed.

**M01 561E FIELDWORK AND PROFESSIONAL COMPETENCE I**
Instructor: Jeanenne Dallas
This is the first in a four-semester series that emphasizes the growth of the student as a professional. Students will develop an electronic professional portfolio and participate in self-directed learning experiences to enhance personal growth and professional competence. An intensive one-week, 40-hour, supervised fieldwork experience in a clinical or community setting allows the student to practice the skills learned in the classroom. Students will be introduced to various OT practice areas and given the opportunity to observe OT in various practice settings.

**M01 561F FIELDWORK AND PROFESSIONAL COMPETENCE II**
Instructor: Jeanenne Dallas
This is the second in a four-semester series that emphasizes the growth of the student as a professional. Students will continue to build an electronic professional portfolio and participate in self-directed learning experiences to enhance personal growth and professional competence. An intensive 40-hour fieldwork experience in a clinical or community setting will allow the student to practice skills learned in the classroom.

**M01 561G FIELDWORK AND PROFESSIONAL COMPETENCE III**
Instructor: Jeanenne Dallas
This is the third in a four-semester series that emphasizes the growth of the student as a professional. Students continue to build an electronic professional portfolio and participate in self-directed learning experiences to enhance personal growth and professional competence. An intensive, 40-hour fieldwork experience in a clinical or community setting allows the student to practice the skills learned in the classroom.

**M01 561H FIELDWORK AND PROFESSIONAL COMPETENCE PREPARING FOR PRACTICE**
Instructor: Jeanenne Dallas
The final course in this series emphasizes the growth of the student as a professional. Topics include the national and state requirements for credentialing, standards of practice, ethical behaviors and continuing competence. Students will prepare a personal marketing package, practice interviewing skills and
participate in self-directed learning experiences. An intensive, 40-hour fieldwork experience in a clinical or community setting allows the student to practice the skills learned in the classroom.

M01 5682 EVALUATION: TOOLS AND PROCESS FOR MEASURING OCCUPATIONAL PERFORMANCE
Instructor: Christine Berg
Evaluation is a process grounded in the collaborative relationship between the occupational therapist and the client. Therapeutic communication is essential to establish and maintain this relationship, while evaluation is essential to guide intervention and measure its effect. Therapeutic communication sets the stage for evaluation, the systematic collection of information about the client, the client's environment and his or her occupational performance. In concert, the course presents test and measurement principle and surveys selected standardized evaluations and other assessment processes that are used in occupational therapy. Students develop skills in selection, administration and interpretation of assessment processes through case studies, laboratory experiences and fieldwork experiences.

M01 572 APPLIED CLINICAL RESEARCH I
Instructor: Varied
This begins the first in a three-semester sequence that is designed to allow the student to participate in a research experience under the supervision of a faculty mentor. This semester, the students will begin to critically read and analyze the literature in one of the four concentration areas of aging, pediatrics, participation or work. The student will be mentored in an applied clinical laboratory experience and will begin to develop a research question to pursue. A literature review is completed and forms the basis for the MSOT and OTD research project.

M01 573 APPLIED CLINICAL RESEARCH II
Instructor: Varied
This is the second of a three-part course sequence. The student will be trained in specific research methodologies, gain skills in the use of standardized measurement tools, conduct behavioral analysis and enter data in an established database. The data will be collected in clinical or community settings. The student will be mentored in the research process. Students will review the literature related to their research question and will articulate the methodology they will use in their research design. Students may choose from productive aging, pediatrics, work and industry, or participation concentrations.

M01 574 APPLIED CLINICAL RESEARCH III
Instructor: Varied
This is the third course in the clinical research series. Students continue to learn specific research methodologies, gain skills in the use of standardized measurement tools, conduct behavioral analysis, enter data in an established database and conduct statistical analysis. The student learns the research process in a mentored seminar format. At the end of this course, students present their research findings to a community of students, faculty, area clinicians and other members of the general public who attend this day-long conference of student presentations. Students may choose to study in faculty research laboratories related to productive aging, pediatrics, work and industry, or participation.

M01 5761 BODY STRUCTURES SUPPORTING DAILY FUNCTION
Instructor: Vicki Kaskutas
Students engage in study of the contribution of the structure, function and development of body systems that support daily activity. This semester emphasizes anatomical systems and neuromusculoskeletal substrates for activity, joint integrity, strength and cardiopulmonary function. Principles of kinesiology, the study of movement, and fitness are applied to daily performance.

M01 577C APPLICATION OF BODY STRUCTURE AND FUNCTION TO OT PRACTICE
Instructor: Tim Shurtleff
Taken concurrently with OT 5761, students apply the anatomical and kinesiological principles to performance through task analysis. Students demonstrate competency by evaluating the movement-related functions and motor skills that support daily activity. Cadaver dissection laboratory experiences are integrated with the clinical laboratory experiences to enhance student learning. Students design interventions to promote fitness and to remediate physical performance deficits. Students fabricate positioning devices to promote musculoskeletal alignment.
M01 577D APPLICATION OF NEUROSCIENCE PRINCIPLES TO OT  
Instructor: Monica Perlmutter  
Taken concurrently with OT 478, students learn how to identify sensory, cognitive, perceptual, physiological and emotional performance capacities of individuals by examining these through observation, assessment and activity analysis. This laboratory course is taught through a lifespan perspective within the context of everyday life.

M01 5781 BIOLOGICAL BASIS OF DAILY PERFORMANCE: NEUROSCIENCE  
Instructor: Lisa Connor  
Students learn how the brain and nervous system support the sensory, perceptual, cognitive, emotional and physiological capacity of individuals as they engage in the activities of daily life. Emphasis is placed on sensory processing, motor processing, cognitive performance, learning and memory, and communication.

M01 5833 COMMUNICATION SKILLS FOR OT MENTAL HEALTH PRACTICE  
Instructor: Jeanenne Dallas  
The ability to communicate with a client who has a mental illness or is experiencing psychosocial impairment due to a physical condition is a core skill for practitioners. Occupational therapists work with clients who experience psychiatric and physical disabilities to empower the client to participate fully in their life goals. Effective practitioners employ therapeutic use of self and communication skills to facilitate growth and goal achievement with individuals and within groups. This course will foster the students’ ability to communicate and work with individuals who are experiencing psychosocial issues. The students will learn evidence-based individual communication skills and group leadership skills to effectively work with these populations. Students entering this course will have a basic understanding of psychiatric disorders from prerequisite course work in psychology.

M01 593A FIELDWORK II  
Instructor: Jeanenne Dallas  
Provides fieldwork experiences under the supervision of an occupational therapist. Students’ participation includes in-depth experience in delivering occupational therapy services to clients including evaluation, treatment and intervention. Students have the opportunity to practice in a variety of clinical or community-based settings. During the fieldwork process, students are expected to assume increasing responsibilities related to patient or client care. The fieldwork experience is designed to promote clinical reasoning, professionalism and competency. Duration is 12 weeks.

M01 593B FIELDWORK II  
Instructor: Jeanenne Dallas  
Provides a second fieldwork experience under the supervision of an occupational therapist. Students’ participation includes in-depth experience in delivering occupational therapy services to clients including evaluation, treatment and intervention. Students have the opportunity to practice in a variety of clinical or community-based settings. Because this is the second of two fieldwork experiences, students are expected to build on their first fieldwork and assume increasing responsibilities related to patient or client care. The fieldwork experience is designed to progressively build competencies in clinical reasoning, professionalism and entry level skills. Duration is 12 weeks.

M01 595 INDEPENDENT STUDY  
Instructor: Varied  
Active participation in research activities with program faculty. A written plan of study agreed upon by faculty and student.

OTD Only Courses

M01 630 SEMINAR IN PROPOSAL DEVELOPMENT AND APPLIED CLINICAL RESEARCH  
Instructor: Jack Engsberg  
This course is designed to prepare the OTD student to write a research proposal supporting the identified direction of their clinical doctorate work under the supervision of their graduate faculty mentor. Using a seminar format, students will support each other in this endeavor. After a systematic review of
interventions, proposals are developed that may lead to policy work that supports clinical services, development or piloting of clinical interventions, developing a program evaluation proposal, writing a business plan to support funding of research, or writing a grant. In all cases the student will refine a problem statement and will have a clear understanding of the research design and methods that will develop into the research proposal.

**M01 750 DIRECTED PRACTICE RESEARCH I**
Instructor: Varied
This is the first course in a series of three courses designed as an applied clinical experience or clinical research project under the guidance of a graduate faculty mentor. The focus of the project will be in productive aging. The project, over the course of three semesters, will result in a scholarly paper. Students enter this course after they have completed OT630, the Proposal Seminar course.

**M01 751 DIRECTED PRACTICE/RESEARCH II**
Instructor: Varied
Student will engage in applied clinical research under the guidance of a graduate faculty member. Topics will be in the area of specialization chosen by the student in consultation with the faculty member.

**M01 752 DIRECTED PRACTICE/RESEARCH III**
Instructor: Varied
Student will engage in applied clinical research under the guidance of a graduate faculty member. Topics will be in the area of specialization chosen by the student in consultation with the faculty member.

**M01 760A OT PRACTICE SEMINAR I**
Instructor: Carolyn Baum
The seminar will focus on the World Health Organization's International Classification of Function, Health, and Disability. This class focuses on the relationship of person factors to occupation. Students engage in critical readings and discussion as they construct a model that will support their area of practice.

**M01 760B OT PRACTICE SEMINAR II**
Instructor: Carolyn Baum
The seminar will focus on World Health Organization's International Classification of Function, Health, and Disability. This class focuses on the relationship of environment to occupation. Students engage in critical readings and discussion as they construct a model that will support their area of practice.

**M01 762 SEMINAR IN EDUCATION STRATEGIES**
Instructor: Christine Berg
This seminar offers an opportunity for students to reflect on and examine concurrent occupational therapy teaching assistantship (TA) experiences. Attention is given to teaching and learning theories underlying practice, teaching tools and strategies, and situated and distributed learning. Activities will include critical reading, journaling, Washington University Teaching Center Workshops and shared critical incident reflection.

**M01 793C FIELDWORK III — APPRENTICESHIP**
Instructor: Varied
Provides a customized fieldwork experience specific to the doctoral pursuit of the student. Students may participate in research, policy, clinical practice, advocacy, teaching, etc. Students are expected to achieve specific goals established by the student and their doctoral chair. Duration is 12 weeks.

**Faculty**

Parul Bakhshi  Research Assistant Professor of Occupational Therapy (Pending Executive Faculty Approval)
Peggy Barco, MED  Instructor in Occupational Therapy
M. Carolyn Baum, MA, PHD  Elias Michael Executive Director of the Program in Occupational Therapy
Pharmacy Student Research Training Program

A key academic institution in our biomedical and clinical health center environment is the St. Louis College of Pharmacy. It is one of the premier institutions in the country for the teaching and training of pharmacists. The College’s extensive pharmaceutical sciences curriculum has generated interest by a number of their students in laboratory biomedical research. Students beyond their fourth year at St. Louis College of Pharmacy who demonstrate interest in science and research, and are recommended by the College faculty, will have an opportunity to complete 10- to 14-week fellowships in any of the laboratories at the School of Medicine. Students can, with consent of their advisors at the College of Pharmacy and the laboratory principal investigator, extend their stay. This joint research collaboration should encourage those students in the program to pursue graduate degrees in the Division of Biomedical Sciences at the School of Medicine.

Physical Therapy

Physical therapy is the science of human movement applied to rehabilitation, injury, fitness, injury prevention and overall health. Practicing in a variety of settings, physical therapists diagnose and treat movement dysfunction in patients with skill, competence and compassion. The Program in Physical Therapy is committed to providing students with excellent scientific and clinical education in an environment that strives to continually lead the industry in practice, research, innovation and advocacy of movement health.

The Program in Physical Therapy at the School of Medicine offers three formal curricula that collectively foster opportunities for lifelong learning and comprehensive career development.

The Professional Doctor of Physical Therapy

The professional curriculum is an intensive three-year experience leading to the degree of Doctor of Physical Therapy. The principle focus of this professional training is to develop scientific and clinical expertise in the diagnosis and treatment of movement-related conditions. By integrating biomedical and physical sciences and clinical education with behavioral and social sciences, this curriculum provides students with the scientific expertise, critical thinking skills and interpersonal communication necessary for effective clinical practice, comprehensive treatment design, patient advocacy, patient education and health promotion. Applicants for admission must have completed 1) a bachelor’s degree at an accredited institution, and 2) prerequisite courses in biology, chemistry, physics, mathematics, anatomy, physiology, English, psychology, social sciences and humanities, 3) have a minimum math/science, core prerequisites and science GPA of 3.0 and 4) the Graduate Record Examination.

The Postprofessional Doctor of Physical Therapy

The postprofessional clinical doctorate curriculum offers practicing physical therapists an opportunity to enhance their roles as diagnosticians, evidence-based practitioners and educators for an advanced model of practice. Designed to refine the practicing physical therapist’s scientific and clinical expertise, the postprofessional program also leads to a Doctor of Physical Therapy. Applicants for admission must 1) have graduated from an accredited professional physical therapy program, 2) have attained acceptable grade-point averages in previous academic endeavors, 3) have achieved acceptable scores on the Graduate Record Examination and 4) be licensed to practice in the United States.

Doctor of Philosophy in Movement Science

The focus of the interdisciplinary doctoral program in movement science is to prepare future researchers and faculty members who can enhance the profession of physical therapy. Admission to this curriculum
requires acceptable scores on the Graduate Record Examination, excellence in previous academic work and demonstrated beginning abilities in posing questions of importance to the study of movement.

The faculty members of the Program in Physical Therapy are committed to being leaders in discovering and transmitting new knowledge related to movement dysfunction, preparing clinicians to assume multiple roles in a complex health-care environment and fulfilling the service mission to society through active participation in humanistic, scientifically-based patient care. Students in all curricula are expected to participate actively in an environment that values integrity, initiative, creativity and the strong belief that physical therapy intervention promotes health. In these ways, all individuals associated with the Program in Physical Therapy may achieve their highest professional and personal potential.

**Tuition:**
- Professional curriculum: $16,556 per semester
- Post-professional curriculum: $320 per credit
- Doctoral curriculum: $21,250 per semester

Further information may be obtained by direct correspondence with the Program in Physical Therapy, Campus Box 8502, 4444 Forest Park Avenue, St. Louis, MO 63108-2212.

Phone: (314) 286-1400
Fax: (314) 286-1410
Email: ptprog@wustl.edu
Web site: http://pt.wustl.edu

**Courses – Doctor of Physical Therapy Degree**

*Semester 1*

**M02 601 DIAGNOSIS AND EVIDENCE ANALYSIS IN PT I**
Department: Program in Physical Therapy
Course Master: Nancy Bloom, PT, DPT, MSOT
Credit Hours: 2
Semester: 1

Includes processes required for effective clinical decision-making such as the use of models for classifying patient problems, decision trees, diagnostic classification systems, patient interviewing, health histories and outcome measures. Patient cases will be used to practice clinical decision-making skills. An introduction to basic research methods and systematic review of the literature.

**M02 602 PROFESSIONAL ISSUES AND SKILL DEVELOPMENT I**
Department: Program in Physical Therapy
Course Masters: Jennifer Stith, PT, PhD, LCSW, and Suzanne Cornbleet, PT, DPT
Credit Hours: 3
Semester: 1

An introduction to the profession of physical therapy, the APTA, professional behavior and clinical activities such as documentation and quality improvement. Includes ethics, legal issues and policies that guide professional behavior. Interpersonal skills and issues related to human diversity will be addressed. Students will complete a personal and family health history. Students will learn and practice using principles of patient teaching, negotiation and team building. Students will spend 80 hours at clinical sites.

**M02 603 ESSENTIAL SKILLS IN PHYSICAL THERAPY I**
Department: Program in Physical Therapy
Course Master: Susan Strecker, PT, DPT
Credit Hours: 4
Beginning skills for patient management include using systems screening and reliable assessment of impairments including visual appraisal, vital signs, sensation, reflexes, pain, range of motion, muscle strength, infection control. Skill and safety in positioning, draping and managing wheelchairs and other equipment during patient-care activities such as walking and transfers will be developed.

**M02 604 CELLS, SYSTEMS AND DISEASE I**
Department: Program in Physical Therapy  
Course Master: Ruth Clark, PT, PhD  
Credit Hours: 4  
Semester: 1

The first of a two-semester course, this course focuses on a comprehensive review of normal physiology of the organ systems: musculoskeletal, cardiovascular, respiratory, renal, gastrointestinal, endocrine, immune and digestive. Regulatory mechanisms to maintain homeostasis will be emphasized throughout the course. Students will be introduced to pharmacology and to the relevance of clinical laboratory values. Patient case studies will be used to integrate information. Introduction to the medical management will be provided for some diseases.

**M02 605 NEUROSCIENCE**
Department: Program in Physical Therapy  
Course Master: Gammon Earhart, PT, PhD  
Credit Hours: 3  
Semester: 1

Focuses on the study of structures, organization and function of the nervous and muscular systems. Emphasis is on the sensory and motor systems involved in motor control and on basic knowledge required for clinical practice.

**M02 606 KINESIOLOGY I**
Department: Program in Physical Therapy  
Course Master: Marcie Harris Hayes, PT, DPT, MSCI, OCS  
Credit Hours: 3  
Semester: 1

An introduction to the analysis of normal human movement activities through the application of mechanical concepts including displacement, velocity, acceleration, force and torque. Emphasizes kinematic and kinetic concepts relevant to human movement and study of the structures involved in movement.

**Semester 2**

**M02 610 CELLS, SYSTEMS AND DISEASE II**
Department: Program in Physical Therapy  
Course Master: Ruth Clark, PT, PhD  
Credit Hours: 4  
Semester: 2

A continuation of the first semester. Physicians will discuss medical management of selected diseases including the etiology, diagnosis, medical management and prognosis of medical diseases frequently encountered in the practice of physical therapy. Three areas of clinical competency will be emphasized through assigned readings and case studies: 1) screening for medical referral including emergent medical referral; 2) clinical decision skills pertaining to pathological implications of underlying disease.
processes and their relevance to guiding physical therapy intervention; 3) clinical decision skills pertaining to implications of medical management and their relevance to guiding physical therapy activity and exercise prescription.

**M02 611 HUMAN ANATOMY**
Department: Program in Physical Therapy  
Course Master: Stacy Tylka, PT, DPT, WCS, CLT  
Credit Hours: 5  
Semester: 2

Emphasis is on 1) musculoskeletal, neural and vascular systems of the extremities, head, neck and trunk, and 2) anatomical features relevant to current physical therapy practice. Lectures are complemented by student-performed dissection of human cadavers, instructor-prepared prosections and computer-assisted instruction.

**M02 612 DIAGNOSIS AND EVIDENCE ANALYSIS IN PT II**
Department: Program in Physical Therapy  
Course Master: Barbara Norton, PT, PhD, FAPTA  
Credit Hours: 2  
Semester: 2

Continuation of research methods from the first semester. Includes descriptive, experimental and quasi-experimental research designs and statistics, hypothesis testing, continuation of measurement issues, hierarchy of credibility for rating research articles.

**M02 613 KINESIOLOGY II**
Department: Program in Physical Therapy  
Course Master: Renee Ivens, PT, DPT  
Credit Hours: 5  
Semester: 2

Emphasizes principles of maturation and motor learning relative to the application of biomechanical principles to the analysis of human movement. Topics include developmental, anatomical, electromyographical and physiological elements of kinesiology with regard to individual joints and common functional activities such as gait and transitional movements.

**M02 614 DIAGNOSIS AND MANAGEMENT OF MUSCULOSKELETAL CONDITIONS IN PT I**
Department: Program in Physical Therapy  
Course Masters: Suzanne Cornbleet, PT, DPT, and Gregory Holtzman, PT, DPT  
Credit Hours: 3  
Semester: 2

Students will learn postural assessment and application of Movement Systems Balance. Analysis of functional activities, the essential components and compensatory strategies will prepare the student to begin to plan interventions for individuals with musculoskeletal problems. Skill in providing interventions of manual exercise, fitness training and functional mobility training will be developed. Cases will provide use of diagnostic systems relevant to musculoskeletal conditions.

**M02 615 PROFESSIONAL ISSUES AND SKILL DEVELOPMENT II**
Department: Program in Physical Therapy  
Course Master: Gregory Holtzman, PT, DPT  
Credit Hours: 0.5  
Semester: 2
Students will be assigned to part-time clinical experiences for 40 hours to allow practice of acquired skills in patient care, documentation and communication. Additional class time allows students to role play a clinical situation involving a patient examination and supervision by a clinical instructor.

**M02 691 CLINICAL EXPERIENCE I (8 WEEKS)**
Department: Program in Physical Therapy  
Course Master: Tamara Burlis, PT, DPT, CCS  
Credit Hours: 4  
Semester: 2

An eight-week, full-time clinical experience supervised by clinical faculty. Allows the student to practice evaluation and treatment skills acquired in the classroom and laboratory. Also emphasizes development of professional behaviors.

*Semester 3*

**M02 621 EXERCISE PHYSIOLOGY**
Department: Program in Physical Therapy  
Course Masters: Susan Racette, PhD, and David Sinacore, PT, PhD, FAPTA  
Credit Hours: 3  
Semester: 3

A study of the responses of various physiological systems to exercise. Includes application and integration of these systems to various diseases and to human performance. Content will be coordinated with Diagnosis and Management of Cardiopulmonary Conditions in PT.

**M02 622 DIAGNOSIS AND MANAGEMENT OF CARDIOPULMONARY CONDITIONS IN PT**
Department: Program in Physical Therapy  
Course Masters: Tamara Burlis, PT, DPT, CCS, and Ethel Frese, PT, DPT  
Credit Hours: 3  
Semester: 3

Students will learn to assess, diagnose and treat movement-related cardiopulmonary conditions. Treatment techniques will include exercise and conditioning, breathing techniques, postural drainage and percussion. Interpretation of laboratory tests and pharmacology will prepare students to work with patients safely. Case studies will prepare students for general practice.

**M02 623 ORTHOPEDIC MEDICINE**
Department: Program in Physical Therapy  
Course Master: Renee Ivens, PT, DPT  
Credit Hours: 2  
Semester: 3

Physician lectures will provide students with information on surgical and nonsurgical procedures and post-operative management of patients with orthopedic conditions. Physicians will discuss medical diagnosis, clinical signs and symptoms, and management of selected conditions to prepare the student to use this information in Diagnosis and Management of Musculoskeletal Conditions in PT II - III.

**M02 624 DIAGNOSIS AND MANAGEMENT OF MUSCULOSKELETAL CONDITIONS IN PT II**
Department: Program in Physical Therapy  
Course Masters: Mary Kate McDonnell, PT, DPT, OCS and Stacy Tylka, PT, DPT, WCS, CLT  
Credit Hours: 3  
Semester: 3
Students will acquire the skills needed to manage and prevent movement-related musculoskeletal problems of the spine, hip, knee and shoulder. Acute and post-acute care will be addressed. Integration of information from previous and concurrent courses will be stressed with emphasis on screening, examination, analysis of findings, diagnosis, design and implementation of intervention programs for patients with increasingly complex problems. Functional activities across the life span also will be addressed.

**M02 625 NEUROLOGY MEDICINE**  
Department: Program in Physical Therapy  
Course Masters: Brendan Tanner, PT, DPT, and Erin Foster, OTD, OTR/L  
Credit Hours: 2  
Semester: 3

Physician lectures will provide students with information on the medical management of patients with neurological conditions. Physicians will discuss medical diagnosis, clinical signs and symptoms and their natural progression, and management of selected conditions to prepare the student to use this information in Diagnosis and Management of Neuromuscular Conditions in PT. Students attend class with occupational therapy students and work independently to meet the objectives of the course.

**M02 626 MODERATORS OF HEALTH, WELLNESS AND REHABILITATION**  
Department: Program in Physical Therapy  
Course Master: Jennifer Stith, PT, PhD, LCSW  
Credit Hours: 3  
Semester: 3

Designed to explore individual attitudes toward health, illness, disability and death. Emphasizes the effect of these attitudes on individual goals, motivation, expectations, interpersonal relationships and exercise adherence. Investigates individual health attitudes, personal values, family interaction, stress management and concepts of wellness. Age-related issues will be addressed.

**M02 627 ESSENTIAL CLINICAL SKILLS IN PT II**  
Department: Program in Physical Therapy  
Course Masters: Tracy Spitznagle, PT, DPT, WCS and Gregory Holtzman, PT, DPT  
Credit Hours: 3  
Semester: 3

Skill in providing interventions including massage and mobilization and the application of thermal, mechanical, hydro and electrotherapeutic modalities will be developed. Students will learn the basic indications for and prescription of adaptive equipment and wheelchairs.

**M02 628 CASE INTEGRATION LAB I**  
Department: Program in Physical Therapy  
Course Masters: Cheryl Caldwell, PT, DPT, CHT and Patricia McGee, PT, DPT, PCS  
Credit Hours: 1  
Semester: 3

Paper, video and live patient cases provided by faculty and students will be completed to provide practice in managing patients with varying movement-related diagnoses. Students participate in faculty-facilitated small groups to discuss their own patient cases and to develop skill in asking clinical questions, using the literature to support, practice and write a modified case report.

**M02 604 CLINICAL EXPERIENCE II (8 WEEKS)**  
Department: Program in Physical Therapy  
Course Master: Tamara Burlis, PT, DPT, CCS
An eight-week, full-time clinical experience supervised by clinical faculty. Allows the student to practice evaluation and treatment skills acquired in the classroom and laboratory. Also emphasizes development of professional behaviors.

**Semester 4**

**M02 635 PROFESSIONAL ISSUES AND SKILL DEVELOPMENT III**  
Department: Program in Physical Therapy  
Course Master: Jennifer Stith, PT, PhD, LCSW  
Credit Hours: 3  
Semester: 4

Focuses on clinical application of compliance and motivation principles. Peer teaching, communication, consultation skills, leadership skills, lobbying legislation, documentation and negotiation in the clinic will be practiced. Students will practice decision making, supervision and delegation. Students will prepare résumés and begin career planning.

**M02 636 DIAGNOSIS AND MANAGEMENT OF GENERAL MEDICAL CONDITIONS IN PT**  
Department: Program in Physical Therapy  
Course Master: Tamara Burlis, PT, DPT, CCS  
Credit Hours: 3  
Semester: 4

Students will acquire the skills needed to manage movement-related problems in patients with diabetes, burns, arthritis, wounds, amputation, obesity, oncological problems, incontinence, pregnancy, pain, genetic conditions and orthotic needs. Students will become familiar with care in both the neonatology unit and emergency room. Integration of information from previous and concurrent courses will be stressed with emphasis on screening, examination, analysis of findings, diagnosis, design and implementation of intervention programs for patients with increasingly complex problems. Functional activities across the life span will be addressed.

**M02 637 ESSENTIAL CLINICAL SKILLS III**  
Department: Program in Physical Therapy  
Course Master: Susan Strecker, PT, DPT  
Credit Hours: 2  
Semester: 4

The focus of the course is on use of equipment and technology in practice. Students will practice fabricating simple orthoses and splints, taping and casting. Continued skill with prescription of adaptive equipment and wheelchairs will be included. Students will learn to use computerized exercise equipment and formatted documentation systems. Demonstrations of equipment that is used for advanced vestibular and gait training are provided. Pediatric and adult management are addressed.

**M02 638 DIAGNOSIS AND MANAGEMENT OF MUSCULOSKELETAL CONDITIONS IN PT III**  
Department: Program in Physical Therapy  
Course Master: Gregory Holtzman, PT, DPT  
Credit Hours: 3  
Semester: 4

Students will acquire the skills needed to manage and prevent movement-related musculoskeletal problems of the spine, neck, elbow, wrist and hand, ankle and foot. Integration of information from
previous and concurrent courses will be stressed with emphasis on screening, examination, analysis of findings, diagnosis, design and implementation of intervention programs for acute and post-acute patients with increasingly complex problems. Functional activities across the life span will be addressed.

M02 639 DIAGNOSIS AND MANAGEMENT OF NEUROMUSCULAR CONDITIONS IN PT
Department: Program in Physical Therapy
Course Masters: Beth Crown, PT, DPT, NCS, MPPA, and Susan Strecker, PT, DPT
Credit Hours: 4
Semester: 4

Students will acquire the skills needed to manage movement-related neuromuscular problems. Integration of information from previous and concurrent courses will be stressed with emphasis on screening, examination, analysis of findings, diagnosis, design and implementation of intervention programs for patients with increasingly complex problems. Functional activities across the life span will be addressed.

M02 641 MOTOR CONTROL AND MOTOR LEARNING
Department: Program in Physical Therapy
Course Master: Catherine Lang, PT, PhD
Credit Hours: 1
Semester: 4

Combines knowledge of physiological characteristics of movement with the neurophysiological mechanisms that produce movement. Emphasizes motor programming, motor learning principles, central pattern generators, postural control, plasticity, and the role of various motor centers in regulation of movement. Limited lab experience will be included. The scientific basis of educational principles of teaching motor skills will be provided.

M02 642 CASE INTEGRATION II
Department: Program in Physical Therapy
Course Masters: Nancy Bloom, PT, DPT, and Jennifer Stith, PT, PhD, LCSW
Credit Hours: 1
Semester: 4

Students will be updated on the use of movement-related diagnostic systems and hear a practice case from a faculty member. Using data on a patient studied during CE II, students will work in small groups with a faculty mentor to 1) orally present the case in five minutes using a rounds fashion; 2) develop a clinical question; 3) search the literature for 6-8 articles that will address the clinical question, summarizing the articles and completing a systematic review using matrix method; and 4) complete a modified case report.

M02 693 CLINICAL EXPERIENCE III (10 WEEKS)
Department: Program in Physical Therapy
Course Master: Tamara Burlis, PT, DPT, CCS
Credit Hours: 5
Semester: Summer

A full-time clinical experience supervised by clinical faculty. Allows the student to practice evaluation and treatment skills acquired in the classroom and laboratory. Also emphasizes development of professional behaviors.

M02 694 CLINICAL EXPERIENCE IV (12 WEEKS)
Department: Program in Physical Therapy
Course Master: Tamara Burlis, PT, DPT, CCS
Credit Hours: 6
Semester: Fall

A full-time clinical experience supervised by clinical faculty. Allows the student to practice evaluation and treatment skills acquired in the classroom and laboratory. Also emphasizes development of professional behaviors.

**M02 650 DIAGNOSIS AND EVIDENCE ANALYSIS IN PT III**
Department: Program in Physical Therapy
Course Masters: Nancy Bloom, PT, DPT, MSOT, and Tracy Spitznagle, PT, DPT, WCS
Credit Hours: 3
Semester: 5

Students will prepare written case reports based on patients seen during their clinical experiences. Students will defend the use of diagnostic classifications and integrate the literature to support their case. Students will practice selecting appropriate outcome measures, designing clinical research questions, and using data to make decisions about individual and group treatment. Students will apply concepts of reliability and validity to assess their measurements.

**M02 651 ORGANIZATIONAL AND MANAGEMENT ISSUES**
Department: Program in Physical Therapy
Course Master: Beth Crowner, PT, DPT, NCS, MPPA
Credit Hours: 3
Semester: 5

Dynamics of organizations and department will be discussed using case examples. Focuses on the knowledge and skills needed by physical therapists early in their careers. Principles of administration and management that enable the physical therapist to supervise supportive personnel, to understand fiscal issues including reimbursement and to recommend staffing schedules and patterns will be addressed. Students will learn marketing and public relations strategies.

**M02 652 ALTERNATIVE SKILLS AND PRACTICE ENVIRONMENTS**
Department: Program in Physical Therapy
Course Master: Lynette Khoo-Summers, PT, DPT
Credit Hours: 3
Semester: 5

Physical therapy practice in work and community settings will be addressed. Special PT tests and the interpretation of other tests will be integrated into cases. Students also will be introduced to care in the ER, issues related to genetics and genomics and the importance of changes in medical care to PT. A unit on ergonomics is included. Alternative medicine and alternative PT practice (using an evidence-based practice approach) will be studied. PT topics may include craniosacral therapy, pilates, tai-chi, functional stabilization, therapeutic horsemanship, muscle energy, magnets and others. Student will learn about chiropractic, acupuncture, functional capacity evaluation and focus more on chronic pain. Students will also explore recreational options for disabled populations.

**M02 653 HEALTH, FITNESS AND PREVENTION**
Department: Program in Physical Therapy
Course Master: W. Todd Cade, PT, PhD
Credit Hours: 3
Semester: 5

Emphasis will be on critiquing and designing fitness and wellness programs for well and special populations. Programs will focus on those for employee fitness, diabetes, arthritis, obesity and the elderly. Students will participate in and evaluate group treatments and recreational exercise. Use of
exercise equipment will be addressed.

**M02 654 CASE INTEGRATION LAB III**
Department: Program in Physical Therapy  
Course Masters: Mary Kate McDonnell, PT, DPT, OCS, and Suzanne Cornbleet, PT, DPT  
Credit Hours: 3  
Semester: 5

A variety of teaching methods, including rounds format, assessment centers and student presentations will enable students to integrate information from across the curriculum to complete complex case studies. Emphasis will be on pharmacology, other tests, moderators, establishing time frames and setting priorities for care. Age-related issues will be addressed.

**M02 655 PROFESSIONAL ISSUES AND SKILL DEVELOPMENT IV**
Department: Program in Physical Therapy  
Course Master: Tamara Burlis, PT, DPT, CCS  
Credit Hours: 4  
Semester: 5

Focus will be on the professional skills students need to function in entry-level practice in a variety of settings. Students will study licensure, participate in lobbying and a mock House of Delegates. Skills in serving as an expert witness, a leader, peer instructor and clinical instruction will be developed. Students will be expected to participate in a service project and activities of the APTA. Cultural and race issues will be actively explored.

**Courses – Post-Professional Doctor of Physical Therapy Degree**

**M22 600 MUSCLE STRUCTURE, FUNCTION AND MUTABILITY**
Department: Physical Therapy  
Course Master: W. Todd Cade, PT, DPT  
Credits: 3  
Semester: Spring 2013

The purpose of this course is to emphasize the importance of using information about muscle structure, function and mutability as a basis for understanding, explaining and predicting clinical phenomena. The course consists of a series of lecture/discussion sessions and written assignments. Each student will be required to complete two written examinations and to prepare an 8-10 page written paper.

**M22 601 DEVELOPMENT, CONTROL AND ANALYSIS OF HUMAN MOVEMENT**
Department: Physical Therapy  
Course Master: Gammon Earhart, PT, PhD  
Credits: 3  
Semester: Spring 2012

The purpose of this course is to expand the student's understanding of changes in movement patterns across the life span, the mechanisms underlying the control of human movement, the effects of neuropathological processes on the production and control of human movement, and some of the techniques and instrumentation used to analyze human movement. The course consists of a series of lecture/discussion sessions, student presentations and written assignments.

**M22 620 CLINICAL IMPLICATIONS OF TISSUE MECHANICS**
Department: Physical Therapy
The focus of this course is on the presentation of a theoretical model based on tissue adaptation to physical stress that can be used to guide physical therapy practice and research. Other current theories and approaches will be presented and related to the "Physical Stress Theory." Students will be required to write a paper and present a case history, with emphasis on how their physical therapy evaluation and treatment relate to the theoretical model. Class format will be lecture, discussion and student presentations.

**M22 640 DYNAMICS OF THE HEALTH-CARE SYSTEM**
Department: Physical Therapy
Course Master: Susan Deusinger, PT, PhD, FAPTA
Credits: 3
Semester: Fall 2011

The purpose of this course is to focus on the issues of organizational dynamics and culture, negotiation and conflict resolution within the health-care environment, blending the cultures of the clinical and academic environments, and establishing partnerships among patients and providers. Format is lecture, discussion, student presentation.

**M22 710 ISSUES IN SCREENING AND MANAGEMENT FOR GENERAL MEDICAL CONDITIONS**
Department: Physical Therapy
Course Master: Tammy Burlis, PT, DPT, CCS
Credits: 3
Semester: Fall 2011

The emphases of this course are on screening by physical therapists for the potential presence of medical conditions, examining the relationship between medical conditions, pharmacologic agents and diagnostic categories used to guide intervention by physical therapists and modeling collegial interactions between physicians and physical therapists. Format is lecture, discussion, student presentation.

**M22 730 DIAGNOSIS AND MANAGEMENT FOR MUSCULOSKELETAL CONDITIONS: LOWER QUARTER**
Department: Physical Therapy
Course Master: Shirley Sahrmann, PT, PhD, FAPTA
Credits: 3
Spring 2013

The focus of this course is on the acquisition of knowledge and skill in a) making discipline-specific diagnoses related to the lower extremity as well as lumbar spine, and b) selecting diagnosis-specific treatment. As appropriate, region-specific screening concerns, diagnostic imaging and critical analysis of relevant research literature will be incorporated. Format is lecture, discussion, demonstration and lab. Students will be required to present patient case reports.

**M22 740 DIAGNOSIS AND MANAGEMENT FOR MUSCULOSKELETAL CONDITIONS: UPPER QUARTER**
Department: Physical Therapy
Course Master: Shirley Sahrmann, PT, PhD, FAPTA
Credits: 3
Semester: Spring 2012

The focus of this course is on the acquisition of knowledge and skill in a) making discipline-specific diagnoses related to the upper extremity, as well as cervical and thoracic spine, and b) selecting
diagnosis-specific treatment. As appropriate, region-specific screening concerns, diagnostic imaging and critical analysis of relevant research literature will be incorporated. Format is lecture, discussion, demonstration and lab. Students will be required to present patient case reports.

**M22 800 EVIDENCE ANALYSIS AND SYNTHESIS SEMINAR**  
Department: Physical Therapy  
Course Master: Barb Norton, PT, PhD, FAPTA  
Credits: 3  
Semester: Fall

The purpose of this course is to promote the use of clinically-relevant evidence in everyday clinical practice. Emphasis will be placed on finding relevant research reports, critically assessing the credibility of each report, and summarizing the evidence across reports. Format is lecture, discussion, student presentation.

**M22 810 CASE STUDY SEMINAR**  
Department: Physical Therapy  
Course Master: Shirley Sahrmann, PT, PhD, FAPTA  
Credits: 3  
Semester: Fall 2012

The primary purposes of this course are to a) provide students the opportunity to interact with faculty and classmates about patient cases, b) prepare students to conduct the type of comprehensive case study that is required for the Capstone Project and c) prepare students to report case studies in the format prescribed by Physical Therapy, Journal of the American Physical Therapy Association (PTJ). The course will include a) a series of class sessions devoted to examination, diagnosis and treatment of patients with various movement system diagnoses, b) class sessions focused on measurement of patient adherence (compliance) and outcomes, and c) a class session on the format for written case reports. Each student will be required to a) present and discuss patient cases informally during weekly patient discussion sessions, b) prepare a written case report of a patient and c) present an oral summary of their case report.

**M22 820 CAPSTONE PROJECT**  
Department: Physical Therapy  
Course Master: Faculty  
Credits: 3-6  
Semester: Fall and Spring

The capstone project offers students the opportunity to demonstrate attainment of the knowledge and skills addressed throughout the curriculum by developing a case-related, evidence-based treatise on a specific aspect of clinical practice under the supervision and guidance of a specific faculty member. Requirements include both a written report and an oral presentation. Students may not register for the capstone project until all other required course work has been completed successfully.

**M22 900 TEACHING PRACTICUM**  
Department: Physical Therapy  
Course Master: Ruth Clark, PT, PhD  
Credits: 3  
Semester: Fall and Spring

The teaching practicum provides an opportunity for the post-professional student to engage in a focused and supervised classroom teaching experience. The student’s teaching should be in a content area relevant to the student’s area of interest. Students are expected to provide at least 6 hours of formal classroom instruction to include a minimum of 4 hours of lecture presentation to an appropriate educational audience within the profession of physical therapy.
M22 910 CLINICAL PRACTICUM
Department: Physical Therapy
Course Master: Faculty
Credits: 3-6
Semester: Fall and Spring

The clinical practicum offers students the opportunity to pursue a topic of special clinical interest under the supervision and guidance of a specific faculty member. Students may register for 1-6 credits of Clinical Practicum in a semester. A maximum of 6 units of Clinical Practicum may be credited toward the DPT degree. Each unit of credit for Clinical Practicum should reflect approximately 45 hours of work by the student.

M22 920 CLINICAL RESEARCH PRACTICUM
Department: Physical Therapy
Course Master: Faculty
Credits: 3-6
Semester: Fall and Spring

The clinical research practicum offers students the opportunity to develop and implement a clinical research project under the supervision and guidance of a specific faculty member. Students may register for 1-6 credits of Clinical Research Practicum in a semester. A maximum of 6 units of Clinical Research Practicum may be credited toward the DPT degree. Each unit of credit for Clinical Research Practicum should reflect approximately 45 hours of work by the student.

M22 500 INDEPENDENT STUDY
Department: Physical Therapy
Course Master: Faculty
Credits: 3-6
Semester: Fall and Spring

Independent study offers students the opportunity to pursue a topic of special interest under the supervision and guidance of a specific faculty member. Students may register for 1-6 credits of Independent Study in a semester. A maximum of 6 units of Independent Study may be credited toward the DPT degree. Each unit of credit for Independent Study should reflect approximately 45 hours of work by the student.

M22 510 READINGS
Department: Physical Therapy
Course Master: Faculty
Credits: 3-6
Semester: Fall and Spring

The Readings course offers students the opportunity to pursue a topic of special interest under the supervision and guidance of a specific faculty member. Students may register for 1-6 credits of Readings in a semester. A maximum of 6 units of Readings may be credited toward the DPT degree. Each unit of credit for Readings should reflect approximately 45 hours of work by the student.

Courses – PhD in Movement Science
Movement Science Program

L63 5110 INSTRUMENTATION THEORY AND APPLICATION I
Department: Movement Science
Course Master: Joe Klaesner, PhD
This course is designed for the student to have a greater understanding of computer hardware, software and the interaction between these two which makes the use of the computer so useful in research. Basic computer architecture and operating systems will be discussed in this class. The student will gain a basic understanding of software programming logic and structures. The student will use “C” to write several programs for the class. The students will also be exposed to software packages that may include LabView, Matlab, Visual-3D and Excel. The class is organized in a lecture/lab structure.

L63 5115 INSTRUMENTATION THEORY AND APPLICATION II
Department: Movement Science
Course Master: Joe Klaesner, PhD
Credit Hours: 3
Semester: Spring 2012

The main goal of this class is to make students comfortable in the identification of data acquisition equipment that is appropriate for their chosen research area. Instrumentation II is an introduction to electrical components and circuits and their role in the function of laboratory instrumentation. The student will be exposed to basic electronic design of filters, amplifiers and A/D sampling. Also included is exposure to selected pieces of laboratory instrumentation. The class is organized in a lecture/lab structure.

L63 5210 TEACHING PRACTICUM I
Department: Movement Science
Course Master: Ruth Clark, PT, PhD
Credit Hours: 2
Semester: Fall and Spring

The teaching practicum provides an opportunity for the doctoral student to engage in a focused and supervised classroom teaching experience. The student’s teaching should be in a content area relevant to the student’s area of interest. Students are expected to provide at least 6 hours of formal classroom instruction; to include a minimum of 4 hours of lecture presentation to an appropriate educational audience.

L63 5220 LAB PRACTICUM I
Department: Movement Science
Course Master: Faculty
Credit Hours: 1-2
Semester: Fall and Spring

Supervised and focused laboratory research experience. Development of a specific portion of ongoing research by generating a project proposal and pilot data. Culminates with the production of a written report on the project.

L63 5230 LAB PRACTICUM II
Department: Movement Science
Course Master: Faculty
Credit Hours: 1-2
Semester: Fall and Spring

Supervised and focused laboratory research experience. Development of a specific portion of ongoing research by generating a project proposal and pilot data. Culminates with the production of a written report on the project.
**L63 5410 MOVEMENT SCIENCE I: BIOENERGETICS**
Department: Movement Science  
Course Master: W. Todd Cade, PT, PhD  
Credit Hours: 3  
Semester: Spring 2013

This didactic course is designed to provide a comprehensive examination of skeletal muscle bioenergetics: structure, function, physiologic regulation of substrate utilization and physiological/pathological adaptation (mutability) to external and internal stimuli. The course is designed to provide the student with a solid basis in muscle structure, function and physiology needed for high-level clinical care. Course content will include skeletal muscle histology, function of intracellular and extracellular muscle proteins, mechanisms of contraction, myogenesis, utilization of fuel substrates including hormonal control and the effects of exercise, mechanical properties of muscle and the response of muscle to training, disuse and selected pathologies.

**L63 5510 MOVEMENT SCIENCE II: BIOMECHANICS**
Department: Movement Science  
Course Master: Dequan Zou, DSc  
Credit Hours: 3  
Semester: Fall 2012

The focus of this course will be upon understanding mechanical principles as they relate to the study of human movement. The course will use an integration of quantitative principles and published literature to explore methods to study biomechanics and also to learn how the human body responds to mechanical stimuli in healthy and selected disease conditions.

**L63 5610 MOVEMENT SCIENCE III: BIOCONTROL**
Department: Movement Science  
Course Master: Catherine Lang, PT, PhD  
Credit Hours: 3  
Semester: Fall 2012

This goal of this course is to understand how the nervous system controls movement and how human movement is affected after pathology to the nervous system. Each class session will consist of an introductory lecture followed by student-led discussions of selected papers. During the course, we will gain insight into how the enormous repertoire of human movements (e.g., gait, posture, voluntary hand movements) is controlled by a distributed motor system (e.g., spinal cord, basal ganglia, motor cortex), how pathology to the system alters movements and how various structures in the system may or may not be able to compensate for each other.

**L63 5710 INDEPENDENT STUDY IN MOVEMENT SCIENCE**
Department: Movement Science  
Course Master: Faculty  
Credit Hours: 1-6  
Semester: Fall and Spring

Opportunity to pursue individual projects under supervision of a Movement Science faculty member.

**L63 5720 RESEARCH IN MOVEMENT SCIENCE**
Department: Movement Science  
Course Master: Faculty  
Credit Hours: 1-6  
Semester: Fall and Spring
Opportunity to pursue non-dissertation research on an individual basis under the supervision and direction of a Movement Science faculty member.

**L63 5730 READINGS IN MOVEMENT SCIENCE**  
Department: Movement Science  
Course Master: Faculty  
Credits 1-6  
Semester: Fall and Spring  

Opportunity to pursue individual work under the supervision and direction of an IPMS faculty member.

**L63 5850 PROGRAM SEMINAR**  
Department: Movement Science  
Course Master: Michael Mueller, PT, PhD, FAPTA  
Credit Hours: 1  
Semester: Fall and Spring  

Departmental seminar focused on review of current literature, scholarly presentation and the development of skills in developing and presenting grant proposals. Required for each of the first four semesters of enrollment in the Movement Science program.

**M17 522 INTRODUCTION TO STATISTICS FOR THE HEALTH SCIENCES**  
Department: Clinical Investigation  
Course Master: Sarah Boslaugh, PhD  
Credit Hours: 3  
Semester: Every Fall  

This is a basic course in statistics with particular focus on the health sciences. It is taught in a user-friendly manner with emphasis on use of SPSS, statistical analysis software commonly used in clinical research. The course will teach basic statistical methods in which clinical researchers should have facility to execute their own analyses.

**M17 524 INTERMEDIATE STATISTICS FOR THE HEALTH SCIENCES**  
Department: CRTC  
Course Master: Sarah Boslaugh, PhD  
Credit Hours: 3  
Semester: Every Spring  

This 15-week course is designed to build on skills developed in Introduction to Statistics for the Health Sciences and to foster basic expertise required to independently use common multivariate biostatistical methods to analyze clinical research data for peer-review presentation and publication.

**M17 588 EPIDEMIOLOGY FOR CLINICAL RESEARCH**  
Department: CRTC  
Course Master: Mario Schootman, PhD  
Credit Hours: 3  
Semester: Every Spring  

This course introduces principles of epidemiology as they apply to clinical research. The course provides basic tools used in descriptive and analytical epidemiology, which are crucial for making informed decisions in the care of patients. Critical thinking and scientific/analytic competencies are emphasized throughout the course.
BIO 5011 ETHICS AND MEDICAL RESEARCH
Department: Division of Biology and Biomedical Sciences
Course Master: Robert Mercer, PhD
Credit Hours: 1
Semester: Spring

This course uses discussion and student presentations to make the student aware of ethical situations one may experience in a research and academic career.

Faculty

Amy J Bastian, PHD Adjunct Assistant Professor of Physical Therapy
Rebecca L Birkenmeier, MS Research Assistant Professor of Physical Therapy
Marghuretta Dakota Bland, DPT, MS Instructor in Physical Therapy
Marybeth Brown, MA, PHD Adjunct Associate Professor of Physical Therapy
Tamara Lavon Burlis, DPT, MHS Assistant Professor of Physical Therapy
Tamara Lavon Burlis, DPT, MHS Associate Director for Clinical Education in Physical Therapy
William Todd Cade, MS, PHD Assistant Professor of Physical Therapy
Cheryl Ann Caldwell, DPT, MHS Assistant Professor of Physical Therapy
Billie Ruth Clark, PHD Associate Professor of Physical Therapy
Suzanne Marie Cornbleet, DPT, MA Assistant Professor of Physical Therapy
Beth Elaine Crowner, BS PT, DPT, M PP, MS Assistant Professor of Physical Therapy
Beth Elaine Crowner, BS PT, DPT, M PP, MS Division Director of Clinical Practice in Physical Therapy
Sylvia Lin Czuppon, MS Assistant Professor of Physical Therapy
Robert H Deusinger, MS, PHD Associate Professor of Physical Therapy
Susan S. Deusinger, MA, PHD Executive Director of the Program in Physical Therapy
Susan S. Deusinger, MA, PHD Professor of Physical Therapy
Krikor T Dikranian, MD, PHD Associate Professor of Physical Therapy
Alexander W Dromerick, MD Adjunct Associate Professor of Physical Therapy
Gammon Marie Earhart, MS, PHD Associate Professor of Physical Therapy
Julaine Marie Florence, DPT, MS Research Professor of Physical Therapy
Judith Rebecca Gelber, DPT Instructor in Physical Therapy
Mary Kent Hastings, DPT, MS Assistant Professor of Physical Therapy
Marcie Harris Hayes, DPT, MS Assistant Professor of Physical Therapy
Gregory William Holtzman, DPT, MS Assistant Professor of Physical Therapy
Helen Hornfeck Host Research Assistant Professor of Physical Therapy
Renee A. Ivens, DPT, MHS Assistant Professor of Physical Therapy
Lynnette C Khoo-Summers, DPT, MS Assistant Professor of Physical Therapy
Joseph W. Klaesner, MS, PHD Research Associate Professor of Physical Therapy
Catherine Eckels Lang, MS, PHD Associate Professor of Physical Therapy
Matthew J Matava, MD Professor of Physical Therapy

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Debra Ann McDonnell, AS, DPT, MS Assistant Professor of Physical Therapy
Mary Kate McDonnell, DPT, MHS Assistant Professor of Physical Therapy
Mary Kate McDonnell, DPT, MHS Associate Director of Residencies and Fellowships in Physical Therapy
Patricia Navarro McGee Instructor in Physical Therapy
John Carl Morris, MD Professor of Physical Therapy
Michael Jeffrey Mueller, MHS, PHD Associate Director for Movement Science Curriculum in Physical Therapy
Michael Jeffrey Mueller, MHS, PHD Division Director of Research in Physical Therapy
Michael Jeffrey Mueller, MHS, PHD Professor of Physical Therapy
Barbara Jean Norton, MHS, PHD Associate Director for Postprofessional Education in Physical Therapy
Barbara Jean Norton, MHS, PHD Professor of Physical Therapy
Joel S Perlmutter, MD Professor of Physical Therapy
Susan B. Racette, PHD Research Associate Professor of Physical Therapy
Shirley Ann Sahrmann, MA, PHD Professor Emeritus of Physical Therapy
David R Sinacore, MHS, PHD Associate Director of Postdoctoral Fellowships in Physical Therapy
David R Sinacore, MHS, PHD Professor of Physical Therapy
Nancy Bloom Smith, DPT, MS Assistant Professor of Physical Therapy
Theresa M Spitznagle, DPT, MHS Assistant Professor of Physical Therapy
Jennifer S Stith, MS, MSW, PHD Associate Director of Professional Curriculum
Jennifer S Stith, MS, MSW, PHD Associate Professor of Physical Therapy
Jennifer S Stith, MS, MSW, PHD Division Director for Education in Physical Therapy
Susan Kay Strecker, DPT, MA Assistant Professor of Physical Therapy
Stacy Lynne Tylka, DPT, MS Instructor in Physical Therapy
Linda R Van Dillen, MS, PHD Associate Professor of Physical Therapy
Pamela M. Wendl, DPT, MS Assistant Professor of Physical Therapy
Kevin E Yarasheski, MA, PHD Professor of Physical Therapy
Dequan Zou, D SC, ME, MS Research Associate Professor of Physical Therapy

Link to Website

http://pt.wustl.edu

Population Health Sciences

The Master of Population Health Sciences (MPHS), offered by the School of Medicine, is designed as a 10-month, full-time degree program for clinicians, clinical doctorates and medical students seeking training in clinical research methods. Part-time study is also available. Its quantitative curriculum emphasizes the role of epidemiology and biostatistics in approaching clinical effectiveness and outcomes research. The MPHS does not require a research thesis/capstone. Instead, the program uses applied coursework to focus on the long-term application of skills. Using topics relevant to their careers and interests, the applied course work allows MPH students to practice the art of developing research study protocols, performing systematic reviews, designing epidemiologic studies and much more. MPHS students deepen their learning by choosing one of four concentrations: Clinical Epidemiology, Health Services, Quantitative Methods or Psychiatric and Behavioral Health Sciences.
Prospective Students
Applicants should have completed a clinical training program at the doctoral level or be in the process of completing such a degree. The program is designed for students who have clinical training or expertise in health care or a health-related field. The pace of course work assumes students have familiarity with clinical medicine.

Program Format
The MPHS program is a full-time, 10-month format. A minimum of 12 credit hours is required for full-time student status, and the maximum course load is 18 credit hours per semester. Part-time study options are available.

Core MPHS Courses
Introduction to SAS (M21 503)
Ethical and legal issues in clinical research (M17 510)
Biostatistics 1
Biostatistics 2
Introduction to Epidemiology
Intermediate Epidemiology
Applied Epidemiology

Information on elective courses is available at http://www.mphs.wustl.edu.

MD/MPHS Program
The MD/MPHS provides medical students with an opportunity to supplement their clinical training and course work with a quantitative approach to population health science research. Students develop core skills in epidemiology and biostatistics, which can be applied to research in any clinical field, from primary to specialty care. The program is intended for medical students who plan to incorporate population health research into their clinical careers. The program is not restricted to Washington University medical students; students from other medical schools are encouraged to apply. The program combines the traditional medical school curriculum with one additional year of full-time study for the MPHS degree. This added year is typically taken after the second or third year of medical school.

Application Deadlines
For 2013-14 academic year: January 4, 2013
Notification of students of admission decision: February 1, 2013
Commitment deadline: April 5, 2013

Further Information
The director of the MPHS program is Graham Colditz, MD, DrPH. Additional information can be obtained at http://www.mphs.wustl.edu or by emailing mphs@wustl.edu.

Faculty
Jenifer Allsworth, PhD
Assistant Professor, Department of Obstetrics and Gynecology

Ken Carson, MD
Instructor, Department of Medicine

Graham Colditz, MD, DrPH
Niess-Gain Professor, Department of Surgery

Bettina Drake, PhD, MPH
Assistant Professor, Department of Surgery
Sarah Gehlert, PhD
E. Desmond Lee Professor, George Warren Brown School of Social Work

Anne Glowinski, MD, MPE
Associate Professor, Department of Psychiatry

Richard Griffey, MD, MPH
Assistant Professor, Department of Internal Medicine

Aimee James, MD, MPH
Assistant Professor, Department of Surgery

Kim Kaphingst, ScD
Assistant Professor, Department of Surgery

Steve Kymes, PhD
Assistant Professor, Department of Ophthalmology and Visual Sciences

Esther Liu, PhD
Faculty, Institute of Clinical and Translational Sciences

Michael Lynskey, PhD
Professor, Department of Psychiatry

Margaret Olsen, PhD, MPH
Associate Professor, Department of Internal Medicine

Pamela Owens, PhD
Research Assistant Professor, Division of Infectious Diseases

Jeffery Peipert, MD, MPH, MHA
Robert J. Terry Professor, Department of Obstetrics and Gynecology

Mary Politi, PhD
Assistant Professor, Department of Surgery

Rumi Price, PhD, MPE
Professor, Department of Psychiatry

D.C. Rao, PhD
Director, Division of Biostatistics

David Stamillio, MD
Associate Professor, Department of Obstetrics and Gynecology

Seth Strope, MD, MPH
Assistant Professor, Division of Urologic Surgery

Esteban Varela, MD, MPH
Associate Professor, Department of Surgery

Jean Wang, MD, PhD
Assistant Professor, Department of Medicine

Kathleen Wolin, ScD
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**Link to Website**
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Assistant Vice Chancellor for Veterinary Affairs and Director of the Division of Comparative Medicine

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Alison J. Whelan, MD
Senior Associate Dean for Education

Koong-Nah Chung, PhD
Associate Dean for Medical Student Research and Assistant Dean for Admissions and Student Affairs

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Jonathan M. Green, MD
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Jennifer K. Lodge, PhD
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Rebecca P. McAlister, MD
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Kathryn M. Diemer, MD
Assistant Dean for Career Counseling

Stephen S. Lefrak, MD
Assistant Dean and Director for the Program for the Humanities in Medicine

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Director of the Student and Employee Health Services — Medical Campus

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Carol L. Kwasny  
Assistant Registrar

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Register of Students

Register of Students

Alphabetical List of Students

Note: This may not be a complete listing. Some students may have elected to withhold directory information.

Musa Raed Abdelaziz  Sunrise, FL, BS, Washington University '09, Program: MSTP, Elective Year
Torgom Abraamyany  Glendale, CA, Program: Doctor of Medicine, First Year Medical Student
Damien Abreu  Bethesda, MD, Program: MSTP, First Year Medical Student
Temidayo Modupe Adebiyi  Dolton, IL, BS, University Of Illinois - Chicago '09, Program: MSTP, Second Year Research
Christopher James Adkins  Melbourne, FL, BA, Vanderbilt University '09, Program: Doctor of Medicine, Elective Year
Rashmi Agarwal  Mclean, VA, BA, Dartmouth College '09, Program: Doctor of Medicine, Elective Year
Aouod Quang Agenor  Montreal, Canada, Program: Doctor of Medicine, First Year Medical Student
Gerald Kwesi Aggrey  Wanaque, NJ, Program: Doctor of Medicine, Second Year Medical Student
Ji Won Ahn  Williamstown, MA, Program: Doctor of Medicine, First Year Medical Student
Syed Hassan Abbas Akbari  Eureka, MO, BA, Washington University '08, Program: Doctor of Medicine, 2012 Graduate, Neurological Surgery, Barnes-Jewish Hospital, St. Louis, MO
Ehiole Ogboma Akhirome  Decatur, GA, Program: MSTP, First Year Medical Student
Usman Akhtar  Woodstock, CT, BA, New York University '09, Program: Doctor of Medicine, Clinical Clerkship Year
Brannon Joseph Altenhofen  Los Angeles, CA, Program: Doctor of Medicine, First Year Medical Student
Benedict Joseph Alter  Dayton, OH, BS, Washington University '03, Program: MSTP, 2012 Graduate, Anesthesiology, University of California, San Francisco, San Francisco, CA
Adam Benjamin Althaus  Sioux City, IA, BS, University of Iowa '08, Program: Doctor of Medicine, 2012 Graduate, Urology, Brigham & Women's Hospital, Boston, MA
Rachel Elizabeth Amthor  Hoover, AL, BA, Washington University '08, Program: Doctor of Medicine, Elective Year
Britt Juul Andersen  Baltimore, MD, Program: MSTP, First Year Medical Student
Lauren Ann Anderson  Bolingbrook, IL, BS, Northwestern University '04, Program: Doctor of Medicine (5 Year), 2012 Graduate
Samuel Michal Anderson  Phoenix, AZ, BS, Arizona State University '05, Program: Doctor of Medicine (5 Year), Clinical Clerkship Year
Afuwa Helen Annor  Lahaina, HI, BS, Yale University '09, Program: Doctor of Medicine, Clinical Clerkship Year
Tonya Wei An  Encinitas, CA, BS, Washington University In St. Louis '11, Program: Doctor of Medicine, Second Year Medical Student
Amrita Aranake  Monmouth Junction, NJ, BA, Rutgers University '08, Program: MSCI/MD, Elective Year
Bhooma Rajagopalan Aravamuthan  Kalamazoo, MI, BS, Michigan State University '05, Program: MSTP, 2012 Graduate, Pediatrics-Preliminary, St. Louis Children's Hospital, St. Louis, MO, Neurology, Children's Hospital, Boston, MA
Guillermo Javier Ares  Carolina, PR, BS, Washington University '09, Program: Doctor of Medicine, Elective Year
Adam Brody Aronson  Los Angeles, CA, BS, University Of Southern California '09, Program: Doctor of Medicine, Second Year Medical Student
Mackenzie Capshaw Asel  Columbia, MO, BS, Yale University '08, Program: Doctor of Medicine, Elective Year
Elisabeth Thames Boehme Askin  Waco, TX, BA, University Of Texas - Austin '06, Program: Doctor of Medicine, Clinical
Clerkship Year

Elyse Aufman Cranberry Township, PA, BH, University Of Pittsburgh '09, Program: Doctor of Medicine, Second Year Medical Student

Tanya Denise Auzenne Opelousas, LA, BS, Louisiana State University-Baton Rouge '06, Program: Doctor of Medicine, 2012 Graduate, Pathology/Laboratory Medicine, George Washington University, Washington, DC

Marina Avetisyan Staten Island, NY, BA, Johns Hopkins University '09, Program: MSTP, Second Year Research

Ramy A Badie Baltimore, MD, Program: Doctor of Medicine, First Year Medical Student

Alexandra Hathaway Baker East Falmouth, MA, BS, Cornell University '08, Program: Doctor of Medicine, Clinical Clerkship Year

Wajeeh R Bakhsh Glendale Heights, IL, BA, Northwestern University '11, Program: Doctor of Medicine, Second Year Medical Student

Moises Baltazar Garcia Pahokee, FL, Program: Doctor of Medicine, First Year Medical Student

Somalee Banerjee Houston, TX, BA, Washington University '08, Program: Doctor of Medicine, Elective Year

Anchal Bansal Madison, WI, Program: Doctor of Medicine, First Year Medical Student

Jennifer Sigrid Barklund Idaho Falls, ID, BA, College Of Saint Catherine '08, MS, California Institute Of Technology ‘10, Program: Doctor of Medicine, Second Year Medical Student

Christopher David Barrett Forest Lake, MN, BS, University Of Minnesota-D ’09, Program: Doctor of Medicine, 2012 Graduate, General Surgery, Beth Israel Deaconess Medical Center, Boston, MA

Jacob Martin Basak Hoffman Estates, IL, BS, University of Chicago '05, Program: MSTP, Clinical Clerkship Year

Laura Alycia Battle Los Altos, CA, BS, University Of California, Los Angeles '07, Program: Doctor of Medicine, Elective Year

Kevin Timothy Baumgartner Torrance, CA, BS, Stanford University '11, Program: Doctor of Medicine, Second Year Medical Student

Chelsea Ann Bayer Rogers, MN, BS, Gustavus Adolphus College ’11, Program: Doctor of Medicine, Second Year Medical Student

Gregory Bean Hollywood, FL, BS, Duke University ‘03, Program: MSTP, Fifth Year Research

Ignacio Becerra-Licha Tucker, GA, BS, Georgia Institute Of Technology '09, Program: Doctor of Medicine, Elective Year

Emily Michelle Beck Chesterfield, MO, BS, University Of Missouri - Columbia '09, Program: Doctor of Medicine, Elective Year

Bahaa Ahmad Bedair Dallas, TX, BS, Southern Methodist University '09, Program: Doctor of Medicine, Elective Year

Roger V Belizaire Midland, TX, MS, University of Texas Health Science Center '03, BA, Princeton University '00, Program: MSTP, 2012 Graduate, Pathology/Laboratory Medicine, Brigham & Women's Hospital, Boston, MA

Lawrence Nathaniel Philip Benjamin Salt Lake City, UT, Program: Doctor of Medicine, First Year Medical Student

Nicole Suzanne Benzoni Ames, IA, Program: Doctor of Medicine, First Year Medical Student

Ari Nachum Berlin Houston, TX, Program: Doctor of Medicine, First Year Medical Student

Michael David Bern Durham, NC, Program: MSTP, First Year Medical Student

Aaron Moens Berton Spokane, WA, BA, Carroll College '08, Program: Doctor of Medicine, 2012 Graduate, Anesthesiology, University of Washington, Seattle, WA

Amit Indra Bery Roswell, GA, BS, Emory University ‘10, Program: Doctor of Medicine, Clinical Clerkship Year

Francesca Betti Pacific Palisades, CA, BS, Stanford University ’10, Program: Doctor of Medicine, Clinical Clerkship Year

Alexander Barton Beyer Seattle, WA, BS, Washington University ’10, Program: Doctor of Medicine, Clinical Clerkship Year

Pavan Bhat Brentwood, TN, BA, Washington University '08, Program: Doctor of Medicine, 2012 Graduate, Internal Medicine, Barnes-Jewish Hospital, St. Louis, MO

Sandeep Ramesh Bhave Program: Doctor of Medicine, Clinical Clerkship Year

Sandeep Ramesh Bhave Coopersburg, PA, BS, Univ of Delaware '06, Program: MSTP, Clinical Clerkship Year

Miles Jordan Bichanich Stanley, WI, Program: Doctor of Medicine, First Year Medical Student

Agata Agnieszka Bielska Opelousas, LA, BS, Louisiana State University-Baton Rouge '09, Program: MSTP, Second Year Research

Michael Edward Billington Harrisonburg, VA, BA, Georgetown University '08, Program: Doctor of Medicine, 2012 Graduate,
Nyabosamba Gati Binagi Whitewater, WI, BA, Yale University ’11, Program: Doctor of Medicine, Second Year Medical Student
Katherine Corey Bishop Prompton, PA, BS, Bucknell University ’11, Program: Doctor of Medicine, Second Year Medical Student
John William Blackett New York, NY, BA, Johns Hopkins University ’10, Program: Doctor of Medicine, Second Year Medical Student
Ryan Eric Blalock Calhoun, GA, BS, University of Georgia ’08, Program: Doctor of Medicine, 2012 Graduate, Orthopaedic Surgery, University of Texas Medical School, Houston, TX
Gregory William Bligard Fort Dodge, IA, BS, University of Iowa ’10, Program: MSTP, First Year Research
Allison Marie Blonski Minneapolis, MN, Program: Doctor of Medicine, First Year Medical Student
Seth Michael Bloom Corvalis, MT, BA, Washington University ’03, Program: MSTP, 2012 Graduate, Internal Medicine, Barnes-Jewish Hospital, St. Louis, MO
Steven Louis Bokshan Brighton, MI, BS, University of Michigan-Ann Arbor ’11, Program: Doctor of Medicine, Second Year Medical Student
Lucy Bollinger Cleveland, OH, Program: Doctor of Medicine, First Year Medical Student
Nicholas Michael Bontumasi Clarkston, MI, BS, University of Michigan-Ann Arbor ’08, Program: Doctor of Medicine, Elective Year
Sean Logan Boone Geneva, IL, BS, Ohio State University ’11, Program: Doctor of Medicine, Second Year Medical Student
Marie Alana Kozel Bosch Kennesaw, GA, BS, Emory University ’02, Program: MSTP, Seventh Year Research
Brian Andrew Bouchard Davidson, NC, Program: Doctor of Medicine, First Year Medical Student
Daniel Saul Brenner Ann Arbor, MI, BS, University of Michigan -Ann Arbor ’06, Program: MSTP, Third Year Research
Jonathan Dean Breshears Fulton, MO, BS, Washington University ’07, Program: Master of Arts/ Doctor of Medicine, 2012 Graduate, Neurological Surgery, University of California, San Francisco, San Francisco, CA
Matthew Ryan Brier Allen, TX, BS, University of Texas - Dallas ’09, Program: MSTP, First Year Research
Natalia Brito Rivera San Juan, PR, Program: Doctor of Medicine, Second Year Medical Student
Brittanie Broersma Tucson, AZ, BH, University of Arizona ’08, Program: Doctor of Medicine, Clinical Clerkship Year
Justin Ryan Brooks Chesapeake, VA, BA, University of Maryland, Baltimore ’04, Program: MSTP, 2012 Graduate
Adrienne Michelle Brower-Lingsch Greenville, SC, BS, Duke University ’10, Program: Doctor of Medicine, Second Year Medical Student
Carl Thomas Bruce Saint Louis, MO, BA, George Washington University ’11, Program: Doctor of Medicine, Second Year Medical Student
Gregory Randal Bryant Scotch Plains, NJ, BS, University Of Maryland -College Park ’09, Program: Doctor of Medicine, Elective Year
Robert Thomas Buckley Edgewood, NM, BS, University of New Mexico ’07, Program: Doctor of Medicine, 2012 Graduate, Neurological Surgery, University of Washington, Seattle, WA
Catherine Rose Butler St. Paul, MN, BA, Tufts University ’08, Program: Doctor of Medicine, 2012 Graduate, Internal Medicine, University of Washington, Seattle, WA
Alice Cai Tucson, AZ, Program: Doctor of Medicine, First Year Medical Student
Stephanie Moore Canham Fredericksburg, VA, BS, Virginia Polytechnic Institute ’08, Program: Doctor of Medicine, 2012 Graduate, Internal Medicine, Barnes-Jewish Hospital, St. Louis, MO
Susan Priscilla Canny Hamden, CT, BS, Stanford University ’03, Program: MSTP, Fifth Year Research
Tracy Marsh Carlson Albuquerque, NM, BA, University of Tulsa ’03, Program: Doctor of Medicine, Elective Year
Ravi Varkki Chacko Short Hills, NJ, BS, Columbia University ’10, Program: MSTP, Second Year Medical Student
Varun Chalivendra Champaign, IL, BA, Washington University ’07, Program: Doctor of Medicine, Clinical Clerkship Year
Andrew Lee Chang Rockville, MD, BS, University Of Maryland -College Park ’11, Program: MSTP, Second Year Medical Student
Ellen Yulin Chang San Jose, CA, BS, University Of California - Los Angeles ’08, MS, Univ of California - Los Angeles ’09, Program:
Julietta Hona Chang  Seattle, WA, BA, Univ of Pennsylvania '08, Program: Doctor of Medicine, 2012 Graduate, General Surgery, Cleveland Clinic Foundation, Cleveland, OH

Ronald Chang  Houston, TX, BA, Washington University '09, Program: Doctor of Medicine, Elective Year

Stephanie Kae Charshafian  Palm Bay, FL, BS, University of Florida '09, Program: Doctor of Medicine, Clinical Clerkship Year

Anita Nandkumar Chary  Savoy, IL, BS, University Of Illinois- Champaign '08, Program: MSTP, Second Year Research

Nilika Chaudhary  Cincinnati, OH, BS, Massachusetts Institute of Technology '06, Program: Doctor of Medicine, Clinical Clerkship Year

Rittik Chaudhuri  Toledo, OH, BS, Duke University '04, PH, University of Cambridge '09, Program: MSTP, Clinical Clerkship Year

Athena Chen  Athens, OH, BS, Case Western Reserve University '09, Program: Doctor of Medicine, Clinical Clerkship Year

Carol Weichi Chen  Florence, SC, BS, Duke University '08, Program: Doctor of Medicine, 2012 Graduate, General Surgery, Hospital of the University of Pennsylvania, Philadelphia, PA

Christopher Tsung-jer Chen  Pasadena, CA, BA, Harvard University '10, Program: Doctor of Medicine, Clinical Clerkship Year

David Yuan-Sou Chen  Troy, MI, BS, University of Michigan, Ann Arbor '03, Program: MSTP, 2012 Graduate, Internal Medicine-Preliminary, Barnes-Jewish Hospital, St. Louis, MO, Dermatology, Barnes-Jewish Hospital, St. Louis, MO

Edwin Chen  Troy, MI, BS, Michigan State University '08, Program: MSTP, Third Year Research

Tiffany Lillian Cheng  Santa Clara, CA, Program: Doctor of Medicine, First Year Medical Student

Wayland Cheng  Vancouver, Canada, BS, Wheaton College '05, Program: MSTP, 2012 Graduate, Anesthesiology, Barnes-Jewish Hospital, St. Louis, MO

Ishita Chen  St. Louis, MO, Program: Doctor of Medicine, First Year Medical Student

Jacqueline Wenjia Chen  Plano, TX, BA, Washington University '10, Program: Doctor of Medicine, Clinical Clerkship Year

Lu Chen  Rockville, MD, BS, California Institute of Technology '10, Program: Doctor of Medicine, Clinical Clerkship Year

Raymond Edward Chen  Durham, NC, Program: Doctor of Medicine, First Year Medical Student

Sara Xu Chen  Frankfurt, Germany, BS, Vanderbilt University '10, Program: Doctor of Medicine, Clinical Clerkship Year

Simon Boyi Chen  Toronto, Canada, Program: Doctor of Medicine, First Year Medical Student

Tina H. Chen  Reston, VA, BA, Washington University '09, Program: Doctor of Medicine, Elective Year

Yee-Shiuan Chen  Toronto, Ontario, BS, University of Toronto '04, Program: MSTP, Sixth Year Research

Yulong Chen  San Francisco, CA, BA, University Of California - Berkeley '09, Program: Doctor of Medicine, Second Year Medical Student

Neena Rose Cherayil  Media, PA, BA, Swarthmore College '11, Program: Doctor of Medicine, Second Year Medical Student

Leslie ying Chiang  Berkeley, CA, BA, University of California - Berkeley '10, Program: Doctor of Medicine, Clinical Clerkship Year

Alicia E. Chionchio  Smithtown, NY, Program: Doctor of Medicine, First Year Medical Student

Stephen Wen-Yan Chi  Fairfax, VA, BS, College Of William and Mary '10, Program: Doctor of Medicine, Second Year Medical Student

Madeleine Blair Chollet  Woodbury, MN, BA, Rice University '06, PH, Johns Hopkins University '11, Program: Doctor of Medicine, Second Year Medical Student

Kevin Chialing Choong  Los Altos Hills, CA, BS, University Of California - Berkeley '08, Program: Doctor of Medicine, 2012 Graduate, General Surgery, Case Western Reserve/University Hospitals, Cleveland, OH

Chris Alison Chou  Medina, WA, Program: Doctor of Medicine, First Year Medical Student

John Spellman Chrisinger  Ames, IA, BA, Washington University '08, Program: Doctor of Medicine, 2012 Graduate, Pathology/Laboratory Medicine, Barnes-Jewish Hospital, St. Louis, MO

Cheryl Shuay-Ru Chu  Rowland Heights, CA, Program: Doctor of Medicine, First Year Medical Student

Jennifer Chu  Fresh Meadows, NY, BS, Massachusetts Institute of Technology '10, Program: Doctor of Medicine, Clinical Clerkship Year
Christopher Lim Chung Lafayette, CA, BS, University Of California - Berkeley '09, Program: Doctor of Medicine, Second Year Medical Student

Nicole K Cibulka Madison, WI, BS, University Of Wisconsin - Madison '09, Program: Doctor of Medicine, Elective Year

Sarah Nicole Cilvik Sweet Valley, PA, BS, Davidson College '05, Program: MSTP, Sixth Year Research

Hilary Gallin Cohen New York, NY, Program: Doctor of Medicine, First Year Medical Student

Christopher Browning Cole Duluth, MN, BS, Indiana University-Bloomington '08, Program: MSTP, Third Year Research

Miranda Denise Colletta Dallas, TX, BS, University of Texas, Austin '11, Program: Doctor of Medicine, Second Year Medical Student

Tamara Mildred Cooks Omaha, NE, BA, Washington University '08, Program: Doctor of Medicine, Second Year Medical Student

DePorres Cormier II Decatur, GA, BS, Emory University '07, Program: Doctor of Medicine, 2012 Graduate, Pediatrics, St. Louis Children's Hospital, St. Louis, MO

Sarah Renee Cortez Clarkston, MI, BS, University of Michigan-Ann Arbor '10, Program: Doctor of Medicine, Clinical Clerkship Year

David Graham Cotter Las Vegas, NV, BS, University of Nevada - Las Vegas '08, Program: MSTP, Second Year Research

Colleen Helen Cotton Vienna, VA, BS, University of Georgia '09, Program: Doctor of Medicine, Elective Year

Daniel Robert Cox Morgan, UT, BS, Weber State University '08, Program: Doctor of Medicine, 2012 Graduate, Otolaryngology, University of Utah, Salt Lake City, UT

Rebecca June Craig-Schapiro Edmond, OK, BS, Univ of Oklahoma - Norman '05, Program: MSTP, 2012 Graduate, General Surgery, Johns Hopkins Hospital, Baltimore, MD

Matthew James Crisp Pasadena, MD, BS, Washington College '06, Program: MSTP, Third Year Research

Lara Wiley Crock Evanston, IL, BA, Barnard College '01, Program: MSTP, Elective Year

Stephen Arthur Currie Glenview, IL, BS, University of Notre Dame '08, Program: Doctor of Medicine, 2012 Graduate, Transitional Year, Mercy Hospital, St. Louis, MO, Diagnostic Radiology, Barnes-Jewish Hospital, St. Louis, MO

Jason W Curtis Richfield, UT, BS, Brigham Young University '09, Program: Doctor of Medicine, Elective Year

Iunia Alexandra Dadarlat West Lafayette, IN, BS, Purdue University '08, Program: Doctor of Medicine, 2012 Graduate

David Yaw Amoah Dadey Accra, Ghana, BS, Morehouse College '10, Program: MSTP, First Year Research

Stacy Zhao Dai Gurnee, IL, BS, Brandeis University '09, Program: Doctor of Medicine, Elective Year

Na Le Dang Middletown, CT, Program: MSTP, First Year Medical Student

Kristen Marie Danley Germantown, MD, BS, Bucknell University '08, Program: Doctor of Medicine, Elective Year

Agnes Z Dardas Cambridge, MA, Program: Doctor of Medicine, First Year Medical Student

Sunil Kumar Das Rock Hill, SC, BA, Vanderbilt University '06, Program: Doctor of Medicine (5 Year), 2012 Graduate, Internal Medicine, University of California, San Diego Medical Center, San Diego, CA

Bethany Amber Davis Prescott, AZ, BS, University of California - San Diego '08, Program: Doctor of Medicine, Elective Year

Ryan Brent Day Springfield, LA, BS, Millsaps College '05, Program: MSTP, Fourth Year Research

Diana Souza DeAndrade Wildwood, MO, BA, Johns Hopkins University '10, Program: Doctor of Medicine, Clinical Clerkship Year

Douglas James Dearth, Jr Lancaster, OH, BS, Ohio University '09, Program: Doctor of Medicine, Elective Year

Francis Deng Cambridge, MA, Program: Doctor of Medicine, First Year Medical Student

George Olen Denny Fort Collins, CO, BS, Saint Louis University '11, Program: Doctor of Medicine, Second Year Medical Student

Salil Hemant Desai Tampa, FL, BA, Rice University '08, Program: Doctor of Medicine, 2012 Graduate, Internal Medicine, Barnes-Jewish Hospital, St. Louis, MO

Sanyukta Desai Sugar Land, TX, BS, Rice University '08, Program: Doctor of Medicine, 2012 Graduate, Pediatrics, Children's Hospital, Philadelphia, PA

Cori Lynn DesSanto Mexico, NY, BS, College of William and Mary '10, Program: Doctor of Medicine, Second Year Medical Student

Carl J. DeSelm Telluride, CO, BA, Dartmouth College '04, Program: MSTP, 2012 Graduate, Internal Medicine-Preliminary, Barnes-Jewish Hospital, St. Louis, MO, Radiation Oncology, Memorial Sloan-Kettering, New York, NY
Robert Warren DesPain  St. Louis, MO, Program: Doctor of Medicine, Second Year Medical Student

Jacob Theodore Diedesch  Spokane, WA, BS, Linfield College '08, Program: Doctor of Medicine, 2012 Graduate, Orthopaedic Surgery, UMDNJ-New Jersey Medical School Program, Newark, NJ

Jeffrey Nelson Dines  Seattle, WA, BS, University of Washington '08, Program: Doctor of Medicine, Elective Year

Sarah Elizabeth Jean Donaldson  Rolling Meadows, IL, BS, Wake Forest University '09, Program: Doctor of Medicine, Clinical Clerkship Year

Yanqun Dong  Stratford, CT, BS, University of Science & Technology of China '02, PhD, Yale University '05, Program: Doctor of Medicine, Elective Year

Colleen Elspeth Donovan  Wayne, PA, BA, Washington University '06, Program: Doctor of Medicine, 2012 Graduate, Psychiatry, Barnes-Jewish Hospital, St. Louis, MO

Jarrod August Dornfeld  Geneseo, IL, BS, University of Iowa '10, Program: Doctor of Medicine, Clinical Clerkship Year

Maia Dorsett  Hastings-on-Hudson, NY, BA, University of Chicago '01, Program: MSTP, 2012 Graduate, Emergency Medicine, Barnes-Jewish Hospital, St. Louis, MO

Scott M Douglas  Nicholasville, KY, BS, University Of Kentucky '09, Program: Doctor of Medicine, Second Year Medical Student

Erin Elizabeth Dowd  Holliston, MA, BA, Cornell University '03, Program: MSTP, Sixth Year Research

Amelia Glatha Drace  Portola Valley, CA, BS, Stanford University '07, MS, Stanford University '07, Program: MSCI/MD, Elective Year

Monica Rae Drylewicz  Orland Park, IL, BA, Northwestern University '04, Program: MSTP, 2012 Graduate, Internal Medicine-Preliminary, Barnes-Jewish Hospital, St. Louis, MO, Diagnostic Radiology, Barnes-Jewish Hospital, St. Louis, MO

Cassandra Rae Duffy  Holliston, MA, BA, Johns Hopkins University '04, Program: Doctor of Medicine, 2012 Graduate, Obstetrics and Gynecology, New York Presbyterian-Hospital-Columbia, New York, NY

Vivek Durai  Naperville, IL, BA, Northwestern University '11, Program: MSTP, Second Year Medical Student

Lucas Alexander Dvoracek  Wheeling, WV, BS, West Liberty State College '11, Program: Doctor of Medicine, Second Year Medical Student

Gregory Charles Ebersole  Strongsville, OH, BS, Ohio State University '09, MS, Ohio State University '11, Program: Doctor of Medicine, Second Year Medical Student

Adnan Moussa Elhammali  Atlanta, GA, BS, Georgia Institute of Technology '07, Program: MSTP, Third Year Research

Leisha Carol Elmore  Newport News, VA, BS, Duke University '08, Program: MD/MPHS, Elective Year

Roy L. Emanuel  Houston, TX, BS, University of Houston '09, Program: MSTP, Second Year Research

Jennifer Marie Enright  Toledo, OH, BS, University of Notre Dame '08, Program: MSTP, Third Year Research

Baris Can Ercal  Rolla, MO, BA, Harvard University '10, Program: MSTP, First Year Research

Krisztina Elise Escallier  Ventura, CA, BS, University of California - Santa Barbara '08, Program: Doctor of Medicine, Clinical Clerkship Year

Amirhossein Esmaeeli-Koosej  Isfahan, Iran, BS, Washington University in St. Louis '11, Program: Doctor of Medicine, Second Year Medical Student

James Matthew Essenberg  Grand Rapids, MI, BA, Washington University '08, Program: Doctor of Medicine, 2012 Graduate, Transitional Year, John Peter Smith Hospital, Fort Worth, TX, Diagnostic Radiology, Barnes-Jewish Hospital, St. Louis, MO

Kow Akaa Essuman  Philadelphia, PA, Program: Doctor of Medicine, First Year Medical Student

Kathryn Meredith Evans  Dwight, IL, BA, Illinois Wesleyan University '09, Program: Doctor of Medicine, Elective Year

William Harvey Everett  Morton, MS, BS, Millsaps College '11, Program: MSTP, Second Year Medical Student

Michelle Toni Feltes  Urbana, IL, BS, Washington University '05, Program: Doctor of Medicine, 2012 Graduate, Emergency Medicine, George Washington University, Washington, DC

Daniel Scott Feng  Detroit, MI, Program: Doctor of Medicine, Second Year Medical Student

Elizabeth Fenstermacher  Sandwich, MA, BA, Mount Holyoke College '04, Program: Doctor of Medicine, Clinical Clerkship Year

Estefania Fernandez  Bethesda, MD, Program: MSTP, First Year Medical Student

Caroline Rose Fischer  Cedar Rapids, IA, Program: Doctor of Medicine, First Year Medical Student
Heidi Elisabeth Fjeldstad  
Oslo, Norway, BA, Carleton College ’10, Program: Doctor of Medicine, Clinical Clerkship Year

Eric Ross Flagg  
Pocahontas, AR, BS, University Of Arkansas At ’08, Program: Doctor of Medicine, 2012 Graduate, Transitional Year, Flushing Hospital Medical Center, Flushing, NY, Diagnostic Radiology, New York University, New York, NY

Nicholas Christian Foeger  
Portola Valley, CA, BA, Brown University ’03, Program: MSTP, Elective Year

Leslie Abigail Fogel  
Overland Park, KS, BS, Rice University ’07, Program: MSTP, Fourth Year Research

Raymond Bamvi Fohtung  
Bamenda, North West Region, Cameroon, BS, University of Wisconsin - Whitewater ’10, Program: Doctor of Medicine, Clinical Clerkship Year

Lindsay Forbes  
Sheridan, WY, BS, Duke University ’10, Program: Doctor of Medicine, Second Year Medical Student

Ronald Joseph Fowle Grider  
Bloomington, IL, Program: MSTP, First Year Medical Student

Brianna Rachel Fram  
Philadelphia, CT, Program: Doctor of Medicine, First Year Medical Student

George Mark Freeman  
Hickory, NC, BS, Duke University ’03, Program: MSTP, Clinical Clerkship Year

Ann Catherine Frisse  
New York, NY, Program: Doctor of Medicine, First Year Medical Student

Bradley Alexander Fritz  
Independence, OH, BS, Case Western Reserve University ’10, Program: Doctor of Medicine, Clinical Clerkship Year

Antonina I. Frolova  
Galveston, TX, BS, University of Illinois at Urbana ’05, Program: MSTP, Elective Year

Ryan Kevin Funk  
Idaho Falls, ID, BS, Brigham Young University ’05, Program: Master of Arts/ Doctor of Medicine, 2012 Graduate, Transitional Year, Mercy Hospital, St. Louis, MO, Radiation Oncology, Mayo Clinic, Rochester, MN

Paul Gowdy Gamble  
Woodbridge, CT, Program: Doctor of Medicine, First Year Medical Student

Harrison Robert Gammon  
Springfield, MO, BA, Washington University ’09, Program: Doctor of Medicine, Clinical Clerkship Year

Akshay Ganju  
Brookline, MA, BA, Harvard University ’08, Program: Doctor of Medicine, Clinical Clerkship Year

Arun Ganti  
East Brunswick, NJ, BS, University Of California - San Diego ’08, Program: MD/MPHS, Clinical Clerkship Year

Charise Joy Garber  
Harrisonburg, VA, Program: MSTP, First Year Medical Student

Megan Stadum Gauthier  
Buffalo, MN, BA, Concordia College at Moorhead ’06, Program: Doctor of Medicine, 2012 Graduate, Pediatrics, St. Louis Children's Hospital, St. Louis, MO

Ashley Miranda Gefen  
Toronto, Canada, Program: Doctor of Medicine, First Year Medical Student

Paul Edward George  
Saint Charles, MO, BS, Tulane University ’07, Program: Doctor of Medicine, Second Year Medical Student

Josiah Kenneth Gerds  
Sun Prairie, WI, BS, University of Wisconsin-Madison ’06, Program: MSTP, Fourth Year Research

David Aaron Germain  
Potomac, MD, BS, Stanford University ’09, Program: MSTP, Second Year Research

Victoria Merrill Gershuni  
Palos Verdes Estates, CA, BS, University of Southern California ’08, MS, University of Southern California ’09, Program: Doctor of Medicine, Clinical Clerkship Year

Rahel Ghiorgis Ghienbot  
Germantown, MD, BH, University Of Minnesota-Twin Cities ’11, Program: Doctor of Medicine, Second Year Medical Student

Andrea Marie Giedinghagen  
Kansas City, MO, BA, Cornell University ’07, Program: Doctor of Medicine (5 Year), Elective Year

Jennifer Gibson Gill  
Knoxville, TN, BS, University Georgia ’03, Program: MSTP, 2012 Graduate, Internal Medicine-Preliminary, Presbyterian Hospital, Dallas, TX, Dermatology, University of Texas Southwestern Medical Center, Dallas, TX

Nathaniel Daum Ginder  
Ames, IA, BS, Iowa State University ’03, PH, Iowa State University ’08, Program: Doctor of Medicine, 2012 Graduate, Psychiatry, UCLA Semel Institute for Neuroscience, Los Angeles, CA

Charles Ginsberg  
Monsey, NY, BA, Yeshiva University ’08, Program: Doctor of Medicine, 2012 Graduate, Internal Medicine, Barnes-Jewish Hospital, St. Louis, MO

Matthew Frederick Glasser  
Atlanta, GA, BS, Emory University ’06, Program: MSTP, Third Year Research

Ian Clark Glenn  
Dallas, TX, BS, Universityof Texas - Austin ’08, Program: Doctor of Medicine, 2012 Graduate, Internal Medicine, Barnes-Jewish Hospital, St. Louis, MO

Jeffrey Alan Gluckstein  
Claremont, CA, Program: Doctor of Medicine, First Year Medical Student

Tracey Lynn Godbold  
Alliston, MA, Program: Doctor of Medicine, First Year Medical Student

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Colin Douglas Godwin Mercer Island, WA, BA, Amherst College '07, Program: Doctor of Medicine, 2012 Graduate, Internal Medicine, University of Washington, Seattle, WA

Reece Joseph Goiffon Shoreview, MN, BS, University of Wisconsin-Madison '07, Program: MSTP, Fourth Year Research

Ravi Gottumukkala Chicago, IL, BA, Northwestern University '10, Program: Doctor of Medicine, Clinical Clerkship Year

Stephen Charles Gradwohl I3 Lenexa, KS, BS, Washington University '09, Program: MSCI/MD, Clinical Clerkship Year

Cassandra Lynn Graham Minnetrista, MN, BS, University Of Minnesota-Twin Cities '11, Program: Doctor of Medicine, Second Year Medical Student

Gary E Grajales Reyes Bayamon, Puerto Rico, BS, University of Puerto Rico ’10, Program: MSTP, First Year Research

Jose Gabriel Grajales Toa Alta , Puerto Rico, Program: MSTP, First Year Medical Student

Kristen Suzanne Grant St. Louis, MO, BA, Dartmouth College ’06, Program: Doctor of Medicine, Elective Year

Adam M Greenbaum Houston, TX, BS, Washington University '05, Program: MSTP, Clinical Clerkship Year

Jacob Kalman Greenberg Scarsdale, NY, BA, Washington University '09, Program: Doctor of Medicine, Clinical Clerkship Year

Sarah Elizabeth Greene Bronx, NY, BA, Barnard College '05, Program: MSTP, Fourth Year Research

Daniel Seth Greenstein Waban, MA, Program: Doctor of Medicine, First Year Medical Student

Nicole Renee Grieselhuber Hamilton, OH, BS, Case Western Reserve University '03, Program: MSTP, 2012 Graduate, Internal Medicine, Ohio State University Medical Center, Columbus, OH

Jennifer Lynn Griffith Indianapolis, IN, BS, Indiana University, Bloomington ’04, BA, Indiana University, Bloomington ’04, Program: MSTP, 2012 Graduate, Pediatrics, St. Louis Children's Hospital, St. Louis, MO, Neurology, St. Louis Children's Hospital, St. Louis, MO

Whitney Rose Grither Saint Genevieve, MO, BA, Johns Hopkins University '09, Program: MSTP, First Year Research

Andrew Paul Groves Evanston, IL, Program: Doctor of Medicine, First Year Medical Student

Kara Jill Gulewicz Manalapan, NJ, BA, Cornell University '08, Program: Master of Arts/ Doctor of Medicine, Elective Year

LeMoyne Michael Habimana-Griffin Alexandria, IN, BS, Rose-Hulman Institute of Technology '11, Program: MSTP, Second Year Medical Student

Carl D Hacker Leawood, KS, BS, Case Western Reserve University '08, Program: MSTP, Third Year Research

Tarik Hadzic Storrs, CT, BS, University of Connecticut '05, BA, University of Connecticut '05, Program: MSTP, Clinical Clerkship Year

Gary Francis Hammen Fonda, IA, BS, University of Iowa '06, Program: MSTP, Fourth Year Research

Elizabeth Erica Hansen Asheville, NC, BA, Washington University '02, Program: MSTP, 2012 Graduate, Anesthesiology, University of Washington, Seattle, WA

Scott David Harring Oregon, WI, BA, Grinnell College '07, Program: Master of Arts/ Doctor of Medicine, 2012 Graduate, Transitional Year, Gundersen Lutheran Medical Foundation, La Crosse, WI, Diagnostic Radiology, Duke University Medical Center, Durham, NC

David Christopher Harris Vestavia Hills, AL, BH, Vanderbilt University ’10, Program: Doctor of Medicine, Clinical Clerkship Year

Georgina Elizabeth Hartzell Larkspur, CA, BS, University of California - Berkeley '09, Program: Doctor of Medicine, Clinical Clerkship Year

Wesley Haynes Chula Vista, CA, BS, University of California - San Diego '06, Program: Doctor of Medicine (5 Year), Clinical Clerkship Year

Emily Elaine Heffernen Des Moines, IA, Program: Doctor of Medicine, First Year Medical Student

Beth Ann Helmin Teutopolis, IL, BS, Illinois State University '04, Program: MSTP, 2012 Graduate, General Surgery, Vanderbilt University Medical Center, Nashville, TN

Miquia Sherree Henderson Sierra Vista, AZ, BS, University of Arizona '05, Program: MSTP, Third Year Research

Lauren Elizabeth Henke Detroit Lakes, MN, BA, Saint Olaf College ’10, Program: Doctor of Medicine, Clinical Clerkship Year

Yizheng He Carmel, IN, BS, Duke University ’10, Program: Doctor of Medicine, Second Year Medical Student

Stephanie Higgins Lake Oswego, OR, BA, Washington University in St. Louis ‘11, Program: Doctor of Medicine, Second Year Medical Student
Kelly Kathrene Hill  St. Louis, MO, Program: Doctor of Medicine, First Year Medical Student
Nicholas A Hoerter  Highland Park, IL, BS, Cornell University ’09, Program: Doctor of Medicine, Clinical Clerkship Year
Kurt Joseph Hoffmeister  St. Louis, MO, BA, Washington University ’05, Program: Doctor of Medicine, Elective Year
Carolyn Ann Hogan  Colden, NY, BS, Cornell University ’07, Program: MSTP, Fourth Year Research
Brandon Blake Holmes  League City, TX, BA, Oberlin College ’07, Program: MSTP, Third Year Research
Katherine Marie Holzem  Wisconsin Dells, WI, BA, University of Pennsylvania ’05, Program: MSTP, Third Year Research
Charles Robert Hong  Hong Kong, China, BS, Georgetown University ’10, Program: Doctor of Medicine, Clinical Clerkship Year
Jeffery C Hoover  South Bend, IN, BS, University of Southern California ’08, Program: Doctor of Medicine (5 Year), Elective Year
Kirk Kohwa Hou  Chesterfield, MO, BSE, Princeton University ’06, Program: MSTP, Fourth Year Research
Daniel Robert Howard  Richmond, VA, BA, University of Pennsylvania ’08, Program: Doctor of Medicine, 2012 Graduate, Orthopaedic Surgery, St. Luke’s-Roosevelt Hospital, New York, NY
Jennifer Hranilovich  Lansing, MI, BS, University Of California - Los Angeles ’09, Program: Doctor of Medicine, Elective Year
Xiaojing Huang  Princeton, NJ, BA, Princeton University ’08, Program: MSTP, First Year Research
Andrew Everett Oliver Hughes  Fairfax, VA, BS, The College of William and Mary ’08, Program: MSTP, Second Year Research
June Yueheng Hu  Houston, TX, BS, Rice University ’09, Program: Doctor of Medicine, Elective Year
Katie Yi Hu  Louisville, KY, BA, Miami University-Oxford ’08, Program: Doctor of Medicine, 2012 Graduate, Family Practice, Santa Monica - UCLA Medical Center, Santa Monica, CA
Matthew Terrence Humbert  St. Paul, MN, BA, University Of St. Thomas ’10, Program: Doctor of Medicine, Clinical Clerkship Year
Putzer Joseph Hung  Hsinchu, Taiwan, BS, Brown University ’10, Program: MSTP, Second Year Medical Student
Ari Roy Huverserian  Porter Ranch, CA, Program: Doctor of Medicine, First Year Medical Student
Tien-Phat Vuong Huynh  Garden Grove, CA, Program: MSTP, First Year Medical Student
Sarah Katherine Zeller Ihnen  Cincinnati, OH, BA, Indiana University ’03, Program: MSTP, Fifth Year Research
Uzoh Erick Ikpeama  Houston, TX, BH, University Of Pittsburgh ’11, Program: Doctor of Medicine, Second Year Medical Student
Santoshi Shalini Indrakanti  Santa Rosa, CA, BS, University Of California - Berkeley ’08, Program: Doctor of Medicine, Elective Year
Tara Christine Jackson  Lavallette, NJ, BS, Fairfield University ’08, Program: Doctor of Medicine, 2012 Graduate, Pediatrics, St. Louis Children's Hospital, St. Louis, MO
Celina Rose Jacobi  Nashville, TN, Program: Doctor of Medicine, First Year Medical Student
Kyle Glenn Jacobsen  St. Louis, MO, BS, Emory University ’10, Program: Doctor of Medicine, Clinical Clerkship Year
Nhila Jagadeesan  Schererville, IN, BS, Indiana University-Purdue ’11, Program: Doctor of Medicine, Second Year Medical Student
Radhika Jagannathan  Hopewell Junction, NY, BS, Massachusetts Institute of Technology ’05, Program: MSTP, Sixth Year Research
Nisha Jain  Program: Doctor of Medicine, Clinical Clerkship Year
Bayan Thomas Jalalizadeh  St. Louis, MO, Program: Doctor of Medicine, First Year Medical Student
Rohan Ariel Jalalizadeh  St. Louis, MO, Program: Doctor of Medicine, First Year Medical Student
Andrew Philip Jallouk  Oak Ridge, TN, BH, Vanderbilt University ’10, Program: MSTP, First Year Research
Raymond Alexander Jean  Manhasset, NY, BA, Harvard University ’08, Program: Master of Arts/ Doctor of Medicine, Master of Arts
Allan Jiang  Oakville, Ontario, BH, McMaster University ’11, Program: Doctor of Medicine, Second Year Medical Student
Naomi Yiyi Jiang  Northborough, MA, BS, Massachusetts Institute of Technology ’11, Program: Doctor of Medicine, Second Year Medical Student
Joyce Ji  Superior, CO, BS, Brown University ’11, Program: Doctor of Medicine, Second Year Medical Student
Linda X Jin Sammamish, WA, BS, University of Washington ’08, Program: Doctor of Medicine, Clinical Clerkship Year

Ramon Jin Cleveland, OH, BS, Case Western Reserve University ’06, Program: MSTP, Fifth Year Research

Linda Marie Johnson Roscoe, IL, BS, University of Illinois at Urbana-Champaign ’09, Program: MSTP, First Year Research

Rachael Celeste Johnston Wichita, KS, BS, University of Tulsa ’10, Program: Doctor of Medicine, Clinical Clerkship Year

Vovanti Tivoli Jones Durham, NC, BS, University of Maryland - Baltimore ’09, Program: MSTP, Elective Year

Anna Helena Jonsson Kansas City, MO, BA, Harvard University ’03, Program: MSTP, 2012 Graduate, Internal Medicine, Brigham & Women’s Hospital, Boston, MA

Catherine Teresa Jordan Cedar Falls, IA, BA, Agnes Scott College ’05, Program: MSTP, Clinical Clerkship Year

Michelle Amanda Jose-Kampfner Ann Arbor, MI, BS, Yale University ’08, Program: Doctor of Medicine, Elective Year

Jemila Maxine Joseph Diego Martin, Trinidad and Tobago, BS, Howard University ’06, Program: Doctor of Medicine (5 Year), 2012 Graduate, Internal Medicine, St. Louis University School of Medicine, St. Louis, MO

Kavita B. Joshi Cincinnati, OH, BA, Washington University ’09, Program: Doctor of Medicine, Elective Year

Neel Shailendra Joshi San Jose, CA, BA, Washington University ’10, Program: Doctor of Medicine, Clinical Clerkship Year

Andrew Warren Judd Portland, OR, BA, Portland State University ’07, Program: Doctor of Medicine, Clinical Clerkship Year

Braden Noah Juengel Edmond, OK, BS, Oral Roberts University ’10, Program: Doctor of Medicine, Clinical Clerkship Year

Jennifer Mae Jupitz Westminster, MD, BA, Johns Hopkins University ’10, Program: Doctor of Medicine, Clinical Clerkship Year

Vasilios Kalas Orland Park, IL, Program: MSTP, Second Year Medical Student

Jason Tao Kan Paducah, KY, BA, Washington University ’08, Program: Doctor of Medicine, 2012 Graduate, Emergency Medicine, University of Illinois - St. Francis Medical Center, Peoria, IL

Kristen Michelle Kapalka West Chester, PA, BS, Case Western Reserve University ’11, Program: Doctor of Medicine, Second Year Medical Student

Elliott Adam Karren Kaysville, UT, BS, University of Utah ’08, Program: Doctor of Medicine, 2012 Graduate, Internal Medicine-Preliminary, St. Mary’s Health Center, St. Louis, MO, Anesthesiology, University of Utah, Salt Lake City, UT

Monica Kasbekar Matthews, NC, BS, University of Virginia ’10, Program: MSTP, First Year Research

Daniel Martin Kaufman Chatsworth, CA, BS, University of California - San Diego ’11, Program: MSTP, Second Year Medical Student

Johanna Rose Kaufman St. Louis, MO, Program: Doctor of Medicine, First Year Medical Student

Sarah Kathryn Kaufman Okemos, MI, BA, University of California - Berkeley ’09, Program: MSTP, First Year Research

Chelsea Ann Kebodeaux Olathe, KS, BA, Washington University in St. Louis ’11, Program: Doctor of Medicine, Second Year Medical Student

Philip Scott Kemp Saint Louis, MO, BS, Columbia University ’09, Program: Doctor of Medicine, Clinical Clerkship Year

Jeffrey Scott Ketchersid South Boston, VA, BS, Massachusetts Institute of Technology ’09, Program: Doctor of Medicine, Elective Year

Sunaina Khandelwal Baltimore, MD, Program: MSTP, Second Year Medical Student

Elaine Ching-Feng Khoong Downers Grove, IL, BS, University of Pennsylvania ’07, Program: MSCI/MD, Clinical Clerkship Year

Aram Kim Korea, S. Korea, BS, Duke University ’09, Program: Doctor of Medicine, Clinical Clerkship Year

David Hyungwha Kim Las Vegas, NV, BS, Yale University ’10, MS, Yale University ’10, Program: Doctor of Medicine, Clinical Clerkship Year

Eric Hwan Kim St. Louis, MO, BS, Rice University ’08, Program: Doctor of Medicine, 2012 Graduate, Urology, Barnes-Jewish Hospital St. Louis, MO

Han Kim Little Rock, AR, BA, Harvard University ’08, Program: Doctor of Medicine, Elective Year

Jenna May Kim McLean, VA, BA, University Of Virginia ’08, Program: Doctor of Medicine, Clinical Clerkship Year

Judith Ann Kim Ridgewood, NJ, BA, Harvard University ’11, Program: Doctor of Medicine, Second Year Medical Student

Charles E Kircher Biddeford, ME, BA, Dartmouth College ’07, Program: Doctor of Medicine, Elective Year

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Vanessa Lynn Kleckner Northfield, MN, Program: Doctor of Medicine, First Year Medical Student

Roger Davies Klein Grosse Pointe, MI, Program: MSTP, Second Year Medical Student

Robert Jared Klemisch Mandan, ND, BA, Washington University '07, Program: Doctor of Medicine, Clinical Clerkship Year

Dylan Girard Kluck Boulder, CO, BA, University of California - Berkeley '10, Program: Doctor of Medicine, Second Year Medical Student

Brent Alexander Knight Wenatchee, WA, BS, Whitworth University '09, Program: Doctor of Medicine, Second Year Medical Student

Andrew W. Kraft St. Louis, MO, BA, Washington University '09, Program: MSTP, First Year Research

Nicole Marie Kretzer Rockford, IL, BS, University of Illinois - Urbana/Champaign '07, Program: MSTP, Third Year Research

Justin David Krogue Mineral Wells, TX, BS, Brigham Young University ‘11, Program: Doctor of Medicine, Second Year Medical Student

Mukti Vinayak Kulkarni Cincinnati, OH, BA, Washington University '06, Program: Doctor of Medicine (5 Year), 2012 Graduate, Family Practice, University of Colorado, Denver, CO

Runjun Dev Kumar Winnipeg, Manitoba, Program: MSTP, First Year Research

Daniel Kai-Ming Kwan Cupertino, CA, BS, University of California - Berkeley '07, Program: Doctor of Medicine, 2012 Graduate, Emergency Medicine, Univ. of California, San Francisco - Fresno, Fresno, CA

Christina Grace Kwong Phoenix, AZ, BS, University of Arizona '08, Program: Doctor of Medicine, 2012 Graduate, Pediatrics, St. Louis Children's Hospital, St. Louis, MO

Rachel Lea Kyllo Lester Prairie, MN, BS, University Of Minnesota-Twin Cities '10, Program: Doctor of Medicine, Clinical Clerkship Year

Jonathan Lake Parsippany, NJ, BS, Cornell University '05, Program: MSTP, Fifth Year Research

Gopal Ram Lalchandani Berkeley, CA, Program: Doctor of Medicine, First Year Medical Student

Andrea Nicole Lambert Canby, OR, BS, University of Portland '10, Program: Doctor of Medicine, Clinical Clerkship Year

Serena Szu-Min Lam Milpitas, CA, BS, Duke University '07, Program: Doctor of Medicine, 2012 Graduate, Internal Medicine, University of Washington, Seattle, WA

Colleen Walsh Lang Monticello, IL, BS, University of Notre Dame '06, Program: MSTP, First Year Research

Michael Hunter Lanier Fayetteville, AR, BA, Washington University '06, Program: MSTP, Third Year Research

Timothy Otto Laumann Chicago, IL, BA, Dartmouth College '06, Program: MSTP, Third Year Research

Osvaldo Jose Laurido-Soto Guaynabo, Puerto Rico, BS, University of Puerto Rico '10, Program: Doctor of Medicine, Clinical Clerkship Year

Christopher William Arvind Lawrence Sunnyvale, CA, BS, University Of California - Irvine '09, Program: Doctor of Medicine, Elective Year

Catherine N. Le Minneapolis, MN, BS, University Of Minnesota - Twin Cities '08, AA, Rochester Community and Technical College '04, Program: Doctor of Medicine, Elective Year

Katherin Eliza Leckie Bozeman, MT, Program: Doctor of Medicine, First Year Medical Student

Sarah Beth Lederhandler Miami, FL, BS, Yale University '10, Program: Doctor of Medicine, Second Year Medical Student

Andrew Robert Lee Orinda, CA, BS, Duke University '09, Program: Doctor of Medicine, Elective Year

Andrew Yoowon Lee Munster, IN, BA, Washington University '08, Program: Doctor of Medicine, 2012 Graduate, Internal Medicine-Preliminary, Rush University Medical Center, Chicago, IL, Radiation Oncology, University of Chicago Medical Center, Chicago, IL

Arthur S Lee Burnaby, BC, Canada, BA, Harvard University '08, Program: MSTP, Second Year Research

Audrey Alexandra Lee La Selva Beach, CA, BS, Rice University '11, Program: Doctor of Medicine, Second Year Medical Student

Dong Young Lee Redmond, WA, Program: Doctor of Medicine, First Year Medical Student

Iris Lee Madison, WI, BA, Williams College '09, Program: Master of Arts/ Doctor of Medicine, Clinical Clerkship Year

Michael Anthony Lee Orinda, CA, BS, Duke University '06, Program: Doctor of Medicine, Elective Year
Jeffrey Leong Reno, NV, BS, University of Nevada-Reno ’07, MS, University of Nevada-Reno ’07, Program: MSTP, Third Year Research

Dov Bernard Lerman-Sinkoff West Bloomfield, MI, BH, University of Michigan-Ann Arbor ’10, Program: MSTP, Second Year Medical Student

Adam Nathaniel Letvin Newton, MA, BA, Harvard University ’10, Program: Doctor of Medicine, Clinical Clerkship Year

Ann Leu Union City, CA, BS, California Institute of Technology ’05, Program: Doctor of Medicine, Second Year Medical Student

David Michael Levine Lincolnshire, IL, BA, Pomona College ’06, MA, National-Louis University ’08, Program: Doctor of Medicine, 2012 Graduate, Internal Medicine, New York University, New York, NY

Amy Margaret Liang Whitestone, NY, BA, Princeton University ’09, Program: Doctor of Medicine, Elective Year

Kelvin Yu Chung Liang Bellevue, WA, BS, Johns Hopkins University ’06, Program: MSTP, Second Year Research

Han Li Southgate, MI, BS, University of Michigan-Ann Arbor ’11, Program: Doctor of Medicine, Second Year Medical Student

Lucy Xiaotian Li Acton, MA, BA, Cornell University ’10, Program: MSTP, Second Year Medical Student

Ann Leu Union City, CA, BS, California Institute of Technology ’05, Program: Doctor of Medicine, Second Year Medical Student

Miranda Renee Lindburg Sandy, UT, Program: Doctor of Medicine, First Year Medical Student

Stephen Wheeler Linderman Rome, NY, BS, Cornell University ’10, Program: MSTP, Second Year Medical Student

Jonathan Beaux Lin Atlanta, GA, Program: MSTP, First Year Medical Student

Kenneth Michael Lin Castro Valley, CA, Program: Doctor of Medicine, First Year Medical Student

Kenny F Lin Sammamish, WA, BS, Boston University ’09, Program: Doctor of Medicine, Elective Year

Tzyy-Nong Tina Liou Taichung, Taiwan, BS, Washington University ’08, Program: Doctor of Medicine, Elective Year

Sophia Mengting Li Taian, Shandong Province (China), BA, Washington University in St. Louis ’11, Program: Doctor of Medicine, Second Year Medical Student

Patricia Elizabeth Litkowski Zionsville, IN, BA, Washington University ’08, Program: Doctor of Medicine, Elective Year

James Chang Liu Tucson, AZ, BA, Harvard University ’10, Program: Doctor of Medicine, Second Year Medical Student

Lucy Liu Woodbury, MN, BA, Washington University ’10, Program: Doctor of Medicine, Clinical Clerkship Year

Yedda Li San Jose, CA, Program: MSTP, Second Year Medical Student

Austin James Lohse Nashville, TN, Program: Doctor of Medicine, First Year Medical Student

Karly Lorbeer Jacksonville, FL, Program: Doctor of Medicine, First Year Medical Student

Luke Michaud Lowry Ames, IA, BS, Iowa State University ’09, Program: Doctor of Medicine, Elective Year

Andrew Joseph Loza Dublin, OH, BS, University of Notre Dame ’10, Program: MSTP, First Year Research

Amelia Claire Lucisano San Diego, CA, Program: Doctor of Medicine, Second Year Medical Student

Micah John Luderer Portage, MI, MS, Michigan State University ’11, Program: MSTP, Second Year Medical Student

Christine Tzy-Yuh Luo San Jose, CA, BS, University of California ’07, Program: MSTP, Third Year Research

Christopher Edward Lust Rochester, MN, BA, Williams College ’08, Program: Doctor of Medicine, 2012 Graduate, Pediatrics, St. Louis Children’s Hospital, St. Louis, MO

Ariel Maia Lyons-Warren St. Louis, MO, BA, Johns Hopkins University ’05, Program: MSTP, Fifth Year Research

Natalie Arianna Macaruso Columbia, SC, BS, Duke University ’11, Program: Doctor of Medicine, Second Year Medical Student

Jennifer Jill Macdonald Novi, MI, BS, University of Michigan-Ann Arbor ’08, Program: Doctor of Medicine, 2012 Graduate, Internal Medicine, University of Michigan Hospitals, Ann Arbor, MI

Matthew Reagan MacEwan Cleveland, OH, BS, Case Western Reserve University ’04, Program: MSTP, Seventh Year Research

Chinwe Christine Madubata Cambridge, MA, Program: Doctor of Medicine, First Year Medical Student

Annelise Yoo Mah Stanford, CA, Program: Doctor of Medicine, First Year Medical Student

Tatenda Mahlokozera Durham, NC, Program: MSTP, First Year Medical Student

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Raymond Bernard Mailhot Birmingham, AL, BA, Washington University ’08, Program: Doctor of Medicine, Elective Year
Laura Esther Mainardi Villarino San Juan, Puerto Rico, BS, Brown University ’10, Program: Doctor of Medicine, Clinical Clerkship Year
Shahriyar Patrick Majidi Chesterfield, MO, Program: MSTP, First Year Medical Student
Jimmy Ma Kansas City, KS, BA, Washington University in St. Louis ’11, Program: Doctor of Medicine, Second Year Medical Student
Lisa Shisi Ma Cambridge, MA, Program: Doctor of Medicine, First Year Medical Student
Nicole Samantha Maloney Bassestere, St. Kitts, BA, New York University ’05, Program: MSTP, Clinical Clerkship Year
Mark David Mangano Cincinnati, OH, BS, University of Cincinnati ’08, Program: Doctor of Medicine, 2012 Graduate, Transitional Year, Steward Carney Hospital, Boston, MA, Diagnostic Radiology, Massachusetts General Hospital, Boston, MA
Sara Lynn Manning London, KY, BS, University of Kentucky ’08, Program: Doctor of Medicine, 2012 Graduate, Emergency Medicine, Barnes-Jewish Hospital, St. Louis, MO
Albert Mao Bethesda, MD, BS, Duke University ’04, Program: MSTP, Sixth Year Research
Lauren Ashley Marks Saint Louis, MO, BA, Vanderbilt University ’11, Program: Doctor of Medicine, Second Year Medical Student
Brigid Kathleen Marshall Tucson, AZ, BS, University of Arizona ’09, Program: Doctor of Medicine, Clinical Clerkship Year
Lauren Therese Josiah Martin Holden, ME, Program: Doctor of Medicine, First Year Medical Student
Mona Mashayekhi Fort Lee, NJ, BA, University of Chicago ’04, Program: MSTP, Elective Year
Mary Clare Masters Oak Park, IL, BA, Stanford University ’08, Program: Master of Arts/ Doctor of Medicine, Clinical Clerkship Year
Jori Ellen May Birmingham, AL, BS, Duke University ’09, Program: Doctor of Medicine, Elective Year
Yuntong Ma New York, NY, Program: Doctor of Medicine, First Year Medical Student
Ioanna Georgopoulos Mazotos Northbrook, IL, BA, Northwestern University - Evanston ’06, Program: Doctor of Medicine (5 Year), 2012 Graduate, General Surgery, University of Connecticut Health Center, Farmington, CT
Jared Michael McAllister Longview, TX, BS, University of Texas, Austin ’10, Program: Doctor of Medicine, Clinical Clerkship Year
Stephen Andrew McCartney Bolivar, OH, BA, Johns Hopkins University ’04, Program: MSTP, Elective Year
William Howard McCoy Sewickley, PA, BS, University of Pittsburgh ’02, Program: MSTP, Clinical Clerkship Year
Martha Morris Orms McGilvray New York, NY, Program: Doctor of Medicine, First Year Medical Student
Phillip Andrew McGuinness Vancouver, WA, BS, Pacific Lutheran University ’10, Program: Doctor of Medicine, Clinical Clerkship Year
Paul Scott McNair Orlando, FL, BA, University of Florida ’08, Program: Doctor of Medicine, Clinical Clerkship Year
Jacquelyn Michelle Means St. Louis, MO, BA, Washington University ’08, Program: Doctor of Medicine, 2012 Graduate, Obstetrics and Gynecology, Univ. of Texas Southwestern Medical School, Dallas, TX
Nichelle Megowan Moorpark, CA, BA, University of Southern California ’10, Program: Doctor of Medicine, Clinical Clerkship Year
Ellen Catherine Merrick Alexandria, VA, BA, University Of Virginia ’09, Program: MSTP, Second Year Research
Cherise Meyerson Reseda, CA, Program: Doctor of Medicine, First Year Medical Student
Zachary Isaac Meyer Melville, NY, BA, Washington University in St. Louis ’11, Program: Doctor of Medicine, Second Year Medical Student
Agnieszka Monika Milczarek Palatine, IL, BS, Stanford University ’06, Program: Doctor of Medicine, Elective Year
Hannah Leigh Miller Elkridge, MD, Program: MSTP, First Year Medical Student
Jenna Lauren Miller West Lafayette, IN, BS, Purdue University ’07, Program: Doctor of Medicine, 2012 Graduate, Internal Medicine, University of Illinois, Chicago, IL
Jessica P Miller Broken Arrow, OK, BS, Washington University in St. Louis ’05, Program: MSTP, Second Year Medical Student
Jaspur Jiwon Min Saint Louis, MO, Program: Doctor of Medicine, First Year Medical Student
Aaron Joseph Mintz Memphis, TN, BS, Stanford University ’05, Program: Doctor of Medicine, Elective Year
Shruti Mishra Pasadena, IN, Program: Doctor of Medicine, First Year Medical Student

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Albert L. Misko  Coral Springs, FL, BS, University of Florida ’03, Program: MSTP, 2012 Graduate, Pediatrics, Massachusetts General Hospital, Boston, MA, Neurology, Massachusetts General Hospital, Boston, MA

Anish Mitra  Lincoln, NE, BS, Stanford University ’09, Program: MSTP, First Year Research

Marina Igorevna Mityul  Jacksonville, FL, BS, University of Miami ’10, Program: Doctor of Medicine, Clinical Clerkship Year

Amirali Modir Shanechi  Toronto, Ontario, Canada, BS, Princeton University ’08, Program: Doctor of Medicine (5 Year), Elective Year

Anand Mohapatra  Folsom, CA, Program: Doctor of Medicine, First Year Medical Student

Sergio Luis Molina  Pharr, TX, BS, Baylor University ’11, Program: Doctor of Medicine, Second Year Medical Student

Cynthia Lee Montana  Pasadena, CA, BS, University of Virginia ’05, Program: MSTP, Clinical Clerkship Year

Kelsey Ann Childs Moon  Chesterfield, MO, Program: Doctor of Medicine, First Year Medical Student

Nathan Herling Moore  Oklahoma City, OK, BA, University of Texas at Austin ’07, Program: Doctor of Medicine, Elective Year

Carrie Laub Morris  St. Louis, MO, BA, Harvard University ’05, Program: Doctor of Medicine, Elective Year

Chelsea Morris  San Diego, CA, BS, Brigham Young University ’08, Program: Doctor of Medicine, 2012 Graduate, Family Practice, Southwest Washington Medical Center, Vancouver, WA

Hallie Faryn Morris  Jacksonville, FL, BA, Princeton University ’10, Program: Doctor of Medicine, Clinical Clerkship Year

Marie Theresa Morris  Fayetteville, AR, Program: Doctor of Medicine, First Year Medical Student

Lindsey Elizabeth Moses  Saint Louis, MO, Program: Doctor of Medicine, First Year Medical Student

David Eugene Mosley  East St. Louis, IL, BS, Florida Agricultural and Mechanical University ’07, Program: Doctor of Medicine, 2012 Graduate, Internal Medicine, Mercy Hospital, St. Louis, MO

Brian Muegge  Springfield, MO, BA, Princeton University ’05, Program: MSTP, Clinical Clerkship Year

Lincoln Muhoro  Nairobi, Kenya, BA, Clark University ’08, MA, Clark University ’09, Program: MSTP, First Year Research

Neil Kunal Munjal  Saratoga, CA, BA, Saint Louis University ’08, Program: Doctor of Medicine, 2012 Graduate, Neurology, University of Pittsburgh Medical Center, Pittsburgh, PA

Nana-Aba Nduom  Accra, Ghana, BA, Yale University ’08, Program: Doctor of Medicine, Elective Year

Kevin Andrew Neal  Tallahassee, FL, BS, University of Florida ’09, Program: Doctor of Medicine, Elective Year

Leslie Chana Neems  Highland Park, IL, BA, Tufts University ’08, Program: Doctor of Medicine, 2012 Graduate, Transitional Year, Resurrection Medical Center, Chicago, IL, Ophthalmology, Northwestern - McGaw Medical Center, Chicago, IL

Nicole L. Nejedly  Orland Park, IL, BA, Washington University ’07, Program: Doctor of Medicine, 2012 Graduate, Pediatrics, Northwestern - McGaw Medical Center, Chicago, IL

Alexander Thien An Nguyen  West Palm Beach, FL, BA, University of Florida ’09, Program: Doctor of Medicine, Elective Year

Nhi Hoai Nguyen  Seattle, WA, BS, University of Central Florida ’07, Program: Doctor of Medicine, Elective Year

Hailyn Vendelboe Nielsen  Des Moines, IA, BS, University of Iowa ’05, Program: MSTP, Second Year Medical Student

Miriam Shugufa Nojan  Mission Viejo, CA, BS, University Of California - Irvine ’09, Program: Doctor of Medicine, Clinical Clerkship Year

Eric Preston Nolley  Amherst, VA, BS, Bridgewater College ’06, Program: Doctor of Medicine, 2012 Graduate, Internal Medicine, Barnes-Jewish Hospital, St. Louis, MO

Aaron John Norris  Colorado Springs, CO, BA, Colorado State University ’01, Program: MSTP, 2012 Graduate, Anesthesiology, Barnes-Jewish Hospital, St. Louis, MO

Landon Kyle Oetjen  Saint Louis, MO, Program: MSTP, First Year Medical Student

Ugochi Okoroafor  Roswell, GA, BS, University of Pittsburgh- ’09, Program: Doctor of Medicine, Elective Year

Emily Hunt Olsson  Brooklyn, NY, BA, Oberlin College ’10, Program: MSTP, First Year Research

Patrick David Olson  Omaha, NE, BS, University Of Nebraska - Lincoln ’09, Program: MSTP, First Year Research

Kazuo Quan Omi  Oakland, CA, BS, University of California-Davis ’04, Program: Doctor of Medicine, Clinical Clerkship Year

Courtney Lynne Ondeck  McMurray, PA, BS, Carnegie Mellon University ’08, MH, University of Cambridge ’09, Program: Doctor...
Heather Nicole Orth Evergreen, CO, BA, University of Colorado - Boulder '09, Program: Doctor of Medicine, Clinical Clerkship Year

Inema Epere Orukari Richmond, CA, Program: MSTP, Second Year Medical Student

Katelyn Andrea Ostendorf Zionsville, IN, BA, Rice University '10, Program: Doctor of Medicine, Clinical Clerkship Year

Katherine Carol Altheide Ott Los Angeles, CA, Program: Doctor of Medicine, First Year Medical Student

Bo Tyler Overschmidt Columbia, MO, Program: Doctor of Medicine, First Year Medical Student

Gugumobi Onyinye Ozoigbo Enugu, Nigeria, BS, University of Texas - Arlington '05, Program: Doctor of Medicine, 2012 Graduate, Anesthesiology, UCLA Medical Center, Los Angeles, CA

Eric Michael Padegimas Manchester, CT, BA, Dartmouth College '09, Program: Doctor of Medicine, Elective Year

Leena Vikas Padhye Lincoln, NE, BS, Duke University '10, Program: Doctor of Medicine, Clinical Clerkship Year

Pankaj Pal Tallahassee, FL, BS, Florida State University '07, Program: MSTP, Fourth Year Research

Priya Pal Tallahassee, FL, BS, Florida State University '08, Program: MSTP, Third Year Research

Kuang-Hung Pan Mountain View, CA, BS, National Taiwan University '99, MS, Stanford University '01, Program: Doctor of Medicine, Second Year Medical Student

Esther Marie Papp Riverside, CA, BS, Wheaton College-Wheaton '07, Program: Doctor of Medicine (5 Year), 2012 Graduate, Emergency Medicine, George Washington University, Washington, DC

Eugene Park Lake Zurich, IL, Program: Doctor of Medicine, Second Year Medical Student

Kevin Woo Park Sunnyvale, CA, BA, Yale University '09, Program: MSTP, Clinical Clerkship Year

Sungkook Andrew Park Daejon, South Korea, BS, University of California, Berkeley '06, Program: Doctor of Medicine (5 Year), 2012 Graduate, Anesthesiology, UCLA Medical Center, Los Angeles, CA

Sunmin Park Seoul, South Korea, BA, University of Pennsylvania '08, MS, University of Pennsylvania '08, Program: MSTP, Second Year Research

Mahjabeen Parween Duvall, WA, Program: Doctor of Medicine, First Year Medical Student

Aalok Pankaj Patel Chicago, IL, Program: Doctor of Medicine, First Year Medical Student

Ami Yogesh Patel Alpharetta, GA, BS, Emory University '08, Program: Doctor of Medicine, 2012 Graduate, Internal Medicine, Barnes-Jewish Hospital, St. Louis, MO

Bhuvic Patel Westborough, MA, BS, Brown University '11, Program: Doctor of Medicine, Second Year Medical Student

Keval Dipan Patel Livonia, MI, Program: MSTP, First Year Medical Student

Swapneel Jagdishchandra Patel Los Angeles, CA, BS, California State University '09, MS, California State University '11, Program: MSTP, Second Year Medical Student

Tirth Patel Riverside, CA, BS, University of California - Los Angeles '11, Program: Doctor of Medicine, Second Year Medical Student

Ima Paydar Memphis, TN, BA, Vanderbilt University '09, Program: Doctor of Medicine, Elective Year

Thomas Michael Pearce Madison, WI, BS, University of Wisconsin - Madison '04, Program: MSTP, Sixth Year Research

Chelsea Elizabeth Pearson St. Louis, MO, BA, Washington University '09, Program: Doctor of Medicine, Elective Year

David Richard Pearson Woodbury, MN, BA, Gustavus Adolphus College '09, Program: Doctor of Medicine, Elective Year

Philip Laurence Perez Cypress, TX, BA, Harvard University '09, Program: Doctor of Medicine, Clinical Clerkship Year

Lauren Elizabeth Perlin Novi, MI, BS, University of Michigan-Ann Arbor '10, Program: Doctor of Medicine, Clinical Clerkship Year

Andrew Scott Perry Salt Lake City, UT, Program: Doctor of Medicine, First Year Medical Student

Stephen Phillip Persaud Fredonia, NY, BS, Cornell University '05, Program: MSTP, Fifth Year Research

Elise Brianne Peterson Columbia, MO, BS, University of Rochester '07, Program: MSTP, Fourth Year Research

Joseph Planer North Manchester, IN, BA, Beloit College '05, Program: MSTP, Second Year Research

Alan Solomon Plotzker Wilmington, DE, BA, University Of Pennsylvania '08, Program: Doctor of Medicine, Second Year Medical Student
Alvin Caldwell Powell  Greensboro, NC, BA, Columbia University ’10, Program: Doctor of Medicine, Second Year Medical Student
Jonathan David Power  Wichita, KS, BA, University of Kansas ’04, Program: MSTP, Fourth Year Research
Niall Prendergast  Norwich, VT, BA, Harvard University ’09, Program: Doctor of Medicine, Clinical Clerkship Year
Sarah Proehl  Pleasantville, NY, BS, Massachusetts Institute of Technology ’09, Program: Doctor of Medicine, Elective Year
Chi Lun Pui  Hong Kong, China, BS, University of Texas - Austin ’08, Program: Doctor of Medicine, Clinical Clerkship Year
Robert Joseph Purgert  Cleveland, OH, BA, Johns Hopkins University ’07, Program: MSTP, Fourth Year Research
Vaishnavi Pursusothaman  Orlando, FL, BS, University of Florida ’10, Program: Master of Arts/ Doctor of Medicine, Master of Arts
Sara Marie Putnam  Wichita, KS, BS, University of Notre Dame ’08, Program: Doctor of Medicine, 2012 Graduate, Orthopaedic Surgery, Barnes-Jewish Hospital, St. Louis, MO
Owen Li Qi  Saint Louis, MO, Program: Doctor of Medicine, First Year Medical Student
David Augustus Qualls  Gainesville, FL, Program: Doctor of Medicine, First Year Medical Student
Saravanan Raju  Nashville, TN, BA, Northwestern University ’11, Program: MSTP, Second Year Medical Student
Anna Leah Hartrich Ramsey  St. Louis, MO, BA, Macalester College ’08, Program: Doctor of Medicine, 2012 Graduate, Pediatrics, University of Colorado, Denver, CO
Kara Nichole Ramsey  Frankfort, IL, Program: Doctor of Medicine, First Year Medical Student
Ran Ran  Toronto, Canada, BH, McMaster University ’09, Program: Doctor of Medicine, Elective Year
Tara Jean Rao  Huntington, IN, BS, Duke University ’07, Program: MSTP, Fourth Year Research
Yuan James Rao  Richmond, VA, BS, Virginia Commonwealth University ’09, Program: Doctor of Medicine, Elective Year
Valary Terenzoni Raup  Severna Park, MD, BA, University of Colorado - Boulder ’10, Program: Doctor of Medicine, Second Year Medical Student
Kelsey Anne Rebehn  Averill Park, NY, BS, Saint Lawrence University ’11, Program: Doctor of Medicine, Second Year Medical Student
Jennifer Ann Reeves  Tulsa, OK, BA, Washington University ’09, Program: Doctor of Medicine, Elective Year
Samuel Wayne Reinhardt  Eagan, MN, BS, Yale University ’10, Program: Doctor of Medicine, Clinical Clerkship Year
Arvind Rengarajan  Cupertino, CA, BS, University Of California - Davis ’09, Program: Doctor of Medicine, Second Year Medical Student
Charles Gerard Rickert  Peoria, IL, BA, New York University ’03, Program: MSTP, Clinical Clerkship Year
Elijah Wade Riddle  Trussville, AL, BS, Georgia Institute of Technology ’08, Program: Doctor of Medicine, 2012 Graduate, General Surgery, Hospital of the University of Pennsylvania, Philadelphia, PA
Matthew Kevin Riddle  Ashland, KY, BA, Asbury College ’09, Program: Doctor of Medicine, Elective Year
Cassandra Nicole Riggs  Bailey, CO, BS, Oklahoma Christian University ’08, Program: Doctor of Medicine, 2012 Graduate, Orthopaedic Surgery, Boston University Medical Center, Boston, MA
Ryan P Rimer  Program: Doctor of Medicine, Clinical Clerkship Year
Gregory Louis Rippberger  Saint Louis, MO, Program: MSTP, First Year Medical Student
Michelle Lauren Robinette  Niceville, FL, BS, University of Michigan-Ann Arbor ’11, Program: MSTP, Second Year Medical Student
Jocelyn Maria Rodriguez  New Haven, CT, Program: Doctor of Medicine, First Year Medical Student
Anjali Rohatgi  Novi, MI, BA, Michigan State University ’07, Program: MSTP, Fourth Year Research
Erin Kerr Romberg  Woodbury, MN, BA, Oberlin College ’08, Program: Doctor of Medicine, Elective Year
Max Samuel Wedlan Rosen  Washington, DC, BA, Washington University in St. Louis ’10, Program: Doctor of Medicine, Second Year Medical Student
Adam Gene Rouse  Huxley, IA, BS, Washington University ’04, Program: MSTP, 2012 Graduate
David Morton Rubins  St Louis Park, MN, BS, University of Wisconsin-Madison ’09, Program: Doctor of Medicine, Clinical Clerkship Year

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Aaron Samuel Rudin  Boulder, CO, BS, University of California - Santa Cruz ’07, AS, Cabrillo College ’03, Program: Doctor of Medicine, Second Year Medical Student

Aaron Jacob Russell  Los Angeles, CA, Program: Doctor of Medicine, First Year Medical Student

Emilie Veronica Russler  Saint Louis, MO, Program: MSTP, First Year Medical Student

Michelle Catherine Sabo  Solon, OH, BS, Duquesne University ’04, Program: MSTP, Clinical Clerkship Year

Gina Nicole Sacks  Chapel Hill, NC, Program: Doctor of Medicine, First Year Medical Student

Joshua Michael Saef  Sarasota, FL, BS, University of Miami ’09, Program: Doctor of Medicine, Clinical Clerkship Year

Maryam Saheb-Al-Zamani  Toronto, Ontario, Canada, BS, University Of Toronto ’08, Program: Master of Arts/ Doctor of Medicine, Elective Year

Gurmukh Singh Sahota  Branchburg, NJ, BS, Rutgers University ’02, MS, University of Illinois at Urbana ’04, Program: MSTP, 2012 Graduate, Anesthesiology, Hospital of the University of Pennsylvania, Philadelphia, PA

Tarek Salih  Cheyenne, WY, BS, University of Wyoming ’09, AA, Laramie County Community ’07, Program: MSTP, Second Year Medical Student

Christian Alexander Salinas  Kennesaw, GA, BS, University of Georgia ’08, Program: Doctor of Medicine, 2012 Graduate, Internal Medicine-Preliminary, Barnes-Jewish Hospital, St. Louis, MO, Diagnostic Radiology, University of Virginia, Charlottesville, VA

Lauren Jeanne Saling  Camarillo, CA, BA, University of Pennsylvania ’08, Program: Doctor of Medicine, 2012 Graduate, Pediatrics-Preliminary, St. Louis Children’s Hospital, St. Louis, MO, Diagnostic Radiology, Barnes-Jewish Hospital, St. Louis, MO

Rabia Salman  Melbourne, FL, BA, New York University ’09, Program: Doctor of Medicine, Clinical Clerkship Year

Christelle Desiree Kouessieu Samen  Potomac, MD, BS, University of Maryland-Baltimore ’11, Program: MSTP, Second Year Medical Student

Katherine Bernadette Santosa  Flushing, NY, BA, Washington University ’07, Program: Doctor of Medicine (5 Year), 2012 Graduate, Plastic Surgery, University of Michigan Hospitals, Ann Arbor, MI

Ansuman Satpathy  Columbia, MO, Program: MSTP, Fifth Year Research

Paul Joseph Scheel III.  South Bend, IN, Program: Doctor of Medicine, First Year Medical Student

Matthew Robert Schill  Gowie, IA, BS, University of Iowa ’09, Program: Doctor of Medicine, Elective Year

Gregory Vincent Schimizzi  Wilmington, NC, BS, University of North Carolina, Chapel Hill ’09, Program: MSTP, First Year Research

Dana Michelle Schwartz  Mercer Island, WA, BA, Stanford University ’07, Program: Doctor of Medicine, 2012 Graduate, General Surgery, Massachusetts General Hospital, Boston, MA

Drew Joel Schwartz  Waverly Hall, GA, BS, Duke University ’07, Program: MSTP, Fourth Year Research

Forrest Hayes Schwartz  Honolulu, HI, BA, Stanford University ’08, Program: Doctor of Medicine, 2012 Graduate, Orthopaedic Surgery, Massachusetts General Hospital, Boston, MA

Michael J Scott  East Fallowfield, PA, BS, West Chester University of Pennsylvania ’10, Program: Doctor of Medicine, Clinical Clerkship Year

Adam Cory Searleman  Canton, NY, BS, Clarkson University ’06, Program: MSTP, Fifth Year Research

Daniel Nathan Seitz  South Bend, IN, BS, Indiana Wesleyan University ’09, Program: Doctor of Medicine, Elective Year

Nicholas Paul Semenkovich  St. Louis, MO, BS, Massachusetts Institute of Technology ’09, Program: MSTP, Second Year Research

Vikram Aditya Shankar  Columbus, OH, Program: Doctor of Medicine, First Year Medical Student

Lauren Kelly Shea  Fairfax Station, VA, BS, Duke University ’07, Program: Doctor of Medicine, Elective Year

Susan Qi Shen  Ames, IA, BS, California Institute of Technology ’09, Program: MSTP, Second Year Research

Marc Samuel Sherman  Cincinnati, OH, BS, University of Michigan-Ann Arbor ’07, Program: MSTP, Fourth Year Research

Shaanan Satish Shetty  Tallahassee, FL, BS, Duke University ’07, Program: Doctor of Medicine, 2012 Graduate, Transitional Year, Mercy Hospital, St. Louis, MO, Dermatology, Barnes-Jewish Hospital, St. Louis, MO

Arman Sheybani  Baton Rouge, LA, BS, Louisiana State University ’08, Program: Doctor of Medicine, 2012 Graduate, Internal Medicine-Preliminary, Mount Sinai School of Medicine, New York, NY, Diagnostic Radiology, University of Illinois, Chicago, IL
Shirley Lynn Shih  Corona, CA, BA, Pomona College '07, Program: MSCI/MD, 2012 Graduate, Internal Medicine-Preliminary, St. Vincent Hospital, Worcester, MA, Physical Medicine & Rehabilitation, Harvard Med. School-Spaulding Rehab Hospital, Boston, MA

Nicole Jimin Shin  Seoul, South Korea, BA, Washington University in St. Louis '09, Program: Doctor of Medicine, Second Year Medical Student

Tammy Sue Shirley  St. Louis, MO, BA, Washington University '07, Program: Doctor of Medicine, Elective Year

Joshua Sarfaty Siegel  Bethesda, MD, BA, Washington University in St. Louis '10, Program: MSTP, Second Year Medical Student

Alejandro Francisco Siller, Jr.  McAllen, TX, Program: Doctor of Medicine, First Year Medical Student

Shawgi Abbas Silver  Seattle, WA, BA, Whitman College '05, Program: Doctor of Medicine, Second Year Medical Student

Stephanie Lynn Skala  Fremont, CA, BS, University Of California - San Diego '09, Program: Doctor of Medicine, Clinical Clerkship Year

Tara Rachelle Skebba  Cedarburg, WI, BA, Rice University '09, Program: Doctor of Medicine, Elective Year

Scott Andrew Skillington  Colorado Springs, CO, Program: Doctor of Medicine, First Year Medical Student

Michael Joseph Slade  Martinez, GA, Program: Doctor of Medicine, First Year Medical Student

Emily Ann Slat  Rochester, NY, BS, University of Michigan-Ann Arbor '07, Program: MSTP, Third Year Research

Clark Samuel Smith  Conway, AR, BS, University of Arkansas - Fayetteville '08, Program: Doctor of Medicine, 2012 Graduate, Emergency Medicine, Barnes-Jewish Hospital, St. Louis, MO

Katherine Hollister Smith  Baton Rouge, LA, BS, Louisiana State University and Agricultural and Mechanical College '10, Program: Master of Arts/ Doctor of Medicine, Master of Arts

Sarah Elizabeth Smith  Philadelphia, PA, Program: MSTP, First Year Medical Student

Benjamin David Solomon  Rockville, MD, BA, Cornell University '09, Program: MSTP, Second Year Research

Isaac H. Solomon  Wilmington, NC, BS, University of N Carolina -Chapel '05, Program: MSTP, Clinical Clerkship Year

Avik Som  Houston, TX, BS, Johns Hopkins University '11, Program: MSTP, Second Year Medical Student

Joseph B Song  Snellville, GA, BS, Emory University '09, Program: Master of Arts/ Doctor of Medicine, Master of Arts

Emily Anne Spataro  St. Louis, MO, BS, Duke University '07, Program: Doctor of Medicine, 2012 Graduate, Otolaryngology, Barnes-Jewish HospitalSt. Louis, MO

Desiree Cherie Spencer  Bartlesville, OK, Program: Doctor of Medicine, Second Year Medical Student

Miriam Bathia Steinberg  Miami, FL, BS, Washington University in St. Louis '11, Program: Doctor of Medicine, Second Year Medical Student

Rachel H Steinhorn  Chicago, IL, BH, Bard College '10, Program: Doctor of Medicine (5 Year), Research (Here)

Allison Steinmetz  Woodbridge, CT, BS, Yale University '10, Program: Doctor of Medicine, Clinical Clerkship Year

Abby Ling-Lee Stephens  Evansville, IN, BS, Washington University '09, Program: Doctor of Medicine, Elective Year

Amanda Michelle Stewart  Springfield, OH, BS, University of Toledo '09, Program: Doctor of Medicine, Elective Year

Christopher Luke Stockburger  Fort Collins, CO, BA, University of Colorado '09, Program: Doctor of Medicine, Elective Year

Michael Vincent Stock  Saint Louis, MO, BS, Vanderbilt University '08, Program: Doctor of Medicine, 2012 Graduate, Transitional Year, Mercy Hospital, St. Louis, MO, Ophthalmology, Washington University in St. Louis SOM, St. Louis, MO

Geoffrey Evan Stoker  Holden, MA, BS, Boston College '09, Program: Doctor of Medicine (5 Year), Clinical Clerkship Year

David Wesley Strong  Southfield, MI, BA, The Johns Hopkins University '03, Program: MSTP, 2012 Graduate, Emergency Medicine, University Hospital, Cincinnati, OH

Marshall Channing Strother  Potomac, MD, BA, Washington University '10, Program: Doctor of Medicine, Clinical Clerkship Year

Sathish Subramanian  Lusaka, Zambia, BA, University of Pennsylvania '08, MS, University of Pennsylvania '08, MH, University of Cambridge '09, Program: MSTP, Second Year Research

Sanaa Hasan Suhaawardy  Danville, CA, BA, University of California - Los Angeles '09, Program: Doctor of Medicine, Elective Year
Varun Sundaram  Muncie, IN, BA, Washington University '09, Program: Doctor of Medicine, Elective Year

Hank Haw Sun  Denver, CO, BA, Washington University '08, Program: Master of Arts/ Doctor of Medicine, Elective Year

Jessica Yee-Tyng Sun  Fremont, CA, BS, University of California - Los Angeles '09, Program: Doctor of Medicine, Second Year Medical Student

Lulu Sun  Cupertino, CA, BS, McGill University '07, Program: MSTP, Fourth Year Research

Mengyang Sun  Singapore, China, BA, Washington University '07, Program: Doctor of Medicine (5 Year), Research (Here)

Michel Muzzi Sun  Randolph, NJ, BA, Rutgers University '08, Program: MSTP, Third Year Research

Sam Qianchung Sun  Needham, MA, Program: Doctor of Medicine, First Year Medical Student

Teerawit Supakorndej  Athens, GA, BS, University of Georgia '07, Program: MSTP, Fourth Year Research

Erin Colleen Swor  Beverly Hills, MI, Program: Doctor of Medicine, First Year Medical Student

Jane Wadsworth Symington  Washington, DC, BS, Yale University '07, Program: MSTP, Third Year Research

Nicholas Paul Szrama  Darien, IL, BS, University of Illinois - Urbana/Champaign '06, Program: MSTP, Third Year Research

Jie Tang  Spanish Fort, AL, BS, University of Pennsylvania '09, Program: Doctor of Medicine, Elective Year

Michael Edward Tang  Columbus, OH, BS, Ohio State University '10, Program: Doctor of Medicine, Clinical Clerkship Year

Wen Hui Tan  Henderson, NV, BS, Massachusetts Institute of Technology '09, Program: Doctor of Medicine, Elective Year

Ameet Indravadan Thaker  Cleveland, OH, BA, Washington University '06, Program: Master of Arts/ Doctor of Medicine, 2012 Graduate, Pathology/Laboratory Medicine, University of Washington, Seattle, WA

Ariel Star Thomas  Athens, GA, Program: Doctor of Medicine, First Year Medical Student

Stephanie Rose Thomas  Rochester, MN, BA, Carleton College '09, Program: Doctor of Medicine, Clinical Clerkship Year

Jessica Thom  Richmond Hill, Ontario, California, BS, Queen's Univ at Kingston '08, Program: Doctor of Medicine, 2012 Graduate, Internal Medicine, McGill University, Montreal, Quebec,

Russell Edward Thompson  Claremont, CA, Program: MSTP, First Year Medical Student

Vivian Tien  Saratoga, CA, BA, University of Chicago '09, MS, Stanford University '11, Program: Doctor of Medicine, Second Year Medical Student

Illya Tolokh  Guelph, Ontario, BS, University of Guelph '04, MS, University of Guelph '05, Program: MSTP, Sixth Year Research

Jennifer Lynne Travieso  Spring, TX, Program: Doctor of Medicine, Second Year Medical Student

Michael Paul Triebwasser  Loveland, OH, BS, University of Wisconsin-Madison '05, Program: MSTP, Fifth Year Research

Maria Chom Trissal  Phoenix, AZ, BS, University of Arizona '06, Program: MSTP, Fourth Year Research

Jennifer Lee Troyer  Evansville, IN, BS, Indiana University -Bloomington '09, Program: Doctor of Medicine, Elective Year

Shaw-Wei David Tsen  Chandler, AZ, BS, Johns Hopkins University '08, Program: MSTP, Second Year Research

Diwakar Turaga  Chelmsford, MA, BS, University of Massachusetts '04, Program: MSTP, 2012 Graduate, Pediatrics, St. Louis Children's Hospital, St. Louis, MO

Jason Eric Turner  Indianapolis, IN, BS, Indiana University, Bloomington '08, Program: Doctor of Medicine, 2012 Graduate, Emergency Medicine, University of Chicago Medical Center, Chicago, IL

Nneka Nnaoke Ufere  Marietta, GA, BA, Harvard University '08, Program: Doctor of Medicine, 2012 Graduate, Internal Medicine, Massachusetts General Hospital, Boston, MA

Grace Taeheuy Um  Charlotte, NC, BS, Stanford University '10, Program: Doctor of Medicine, Second Year Medical Student

Punit Akshaya Vachharajani  Saint Louis, MO, Program: Doctor of Medicine, First Year Medical Student

Sravya Padmaja Vajapeyaju  Centerville, OH, Program: Doctor of Medicine, First Year Medical Student

Mark C Valentine  Denver, CO, BS, Brigham Young University '08, Program: MSTP, First Year Research

Manouela Vesselinova Valtcheva  Alpharetta, GA, BS, University of Georgia '10, Program: MSTP, First Year Research

Samantha Lynn Van Hove  Elgin, MN, BS, University Of Minnesota-Twin Cities '09, Program: MSTP, Second Year Medical Student
Dorothy Van Oppen  Seattle, WA, BA, Carleton College ’09, Program: Doctor of Medicine, Elective Year
James Thomas Vandenb"{e}rg  Grand Rapids, MI, Program: Doctor of Medicine, First Year Medical Student
Rahul Mahendra Varman  Omaha, NE, Program: Doctor of Medicine, First Year Medical Student
Sumeeta Varma  Pittsburgh, PA, BS, Stanford University ’06, Program: MSCI/MD, 2012 Graduate, Pediatrics-Preliminary, St. Louis Children’s Hospital, St. Louis, MO, Radiation Oncology, Vanderbilt University Medical Center, Nashville, TN
Stephanie Margaret Velloze  Avon Lake, OH, BA, Case Western Reserve University ’11, Program: Doctor of Medicine, Second Year Medical Student
Daniel Joseph Verbaro  Cinnaminson, NJ, Program: MSTP, First Year Medical Student
Vivek Verma  Pittsburgh, PA, BS, University of Pittsburgh ’08, Program: Doctor of Medicine, Elective Year
Michael C Verre  Niles, IL, BA, Washington University ’08, Program: Doctor of Medicine (5 Year), Research (Away)
Matthew David Vesely  Tampa, FL, BA, Creighton University ’03, Program: MSTP, Clinical Clerkship Year
Natalie Marie Villafranco  San Antonio, TX, BS, Ohio State University ’08, Program: Doctor of Medicine, 2012 Graduate, Pediatrics, Baylor College of Medicine, Houston, TX
Alecia Cristen Vogel-Hammen  Freeburg, IL, Program: MSTP, Clinical Clerkship Year
Matthew R Vogt  St. Peters, MO, BA, Washington University ’05, Program: MSTP, Clinical Clerkship Year
Ross Robert Vyhmeister  Hillsboro, OR, Program: Doctor of Medicine, First Year Medical Student
Julia Alexandra Wagner  Montreal, Canada, Program: Doctor of Medicine, First Year Medical Student
Katharine Abraham Walz  Coralville, IA, BS, Iowa State University ’11, Program: Doctor of Medicine, Second Year Medical Student
Betsy Peixi Wan  Irvine, CA, BA, Washington University ’09, Program: Doctor of Medicine, Elective Year
Annie Zhili Wang  Northbrook, IL, BS, University of Illinois - Chicago ’11, Program: Doctor of Medicine, Second Year Medical Student
Gary Xiaoashi Wang  Chantilly, VA, BA, University of Chicago ’05, Program: MSTP, Sixth Year Research
Pengcheng Wang  Albany, CA, Program: Doctor of Medicine, First Year Medical Student
Stephanie Zi Wang  Lilburn, GA, BS, Massachusetts Institute of Technology ’11, Program: Doctor of Medicine, Second Year Medical Student
Xinyu Wang  Winchester, MA, BS, Harvard University ’09, Program: MSTP, Second Year Research
Yi Wang  Woodinville, WA, BS, Massachusetts Institute of Technology ’09, Program: Doctor of Medicine, Elective Year
Yunzu Michele Wang  Arcadia, CA, BS, University of California - Los Angeles ’09, Program: Doctor of Medicine, Elective Year
Julia Therese Warren  Summit, NJ, BA, The University of Chicago ’07, Program: MSTP, Fourth Year Research
Jonathan Randolph Weese  Caldwell, ID, Program: Doctor of Medicine, First Year Medical Student
Iga Natalia Wegorzewska  Brooklyn, NY, BS, Georgetown University ’04, Program: MSTP, Clinical Clerkship Year
Austin James Wesevich  San Antonio, TX, BA, Washington University in St. Louis ’11, Program: Doctor of Medicine, Second Year Medical Student
Lauren Elisabeth Wessel  Bethesda, MD, BS, Duke University ’09, Program: Doctor of Medicine, Second Year Medical Student
Brian Richard White  Cape Elizabeth, ME, BA, Harvard University ’04, Program: MSTP, 2012 Graduate, Pediatrics, Children’s Hospital, Philadelphia, PA
Krista Renee Whitney  Olathe, KS, BA, Washington University ’09, Program: Doctor of Medicine, Elective Year
Christian Mark Wichterman  Springfield, IL, BA, Washington University in St. Louis ’10, Program: Doctor of Medicine, Second Year Medical Student
Georgia Wilke  Baltimore, MD, BA, University of Chicago ’09, Program: MSTP, Second Year Medical Student
Jared Daniel Wilkinson  Indianapolis, IN, BS, Purdue University ’09, Program: Doctor of Medicine, Elective Year
Alton Cleotha Williams III.  Huntsville, TN, BS, Austin Peay State University ’06, Program: Doctor of Medicine, Elective Year

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<table>
<thead>
<tr>
<th>Name</th>
<th>City, State, Program</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jordan Williams</td>
<td>Dell Rapids, SD, MSTP</td>
<td>BS, South Dakota State University '05, First Year Medical Student</td>
</tr>
<tr>
<td>Michael Brandon Williams</td>
<td>Mission, TX, BS,</td>
<td>Brown University '08, Clinical Clerkship Year</td>
</tr>
<tr>
<td>Michael Brent Wilson</td>
<td>Highland, UT, BS,</td>
<td>Brigham Young University '11, Doctor of Medicine, Second Year Medical Student</td>
</tr>
<tr>
<td>Jacob Samuel Witt</td>
<td>Saint Louis, MO</td>
<td>Program: Doctor of Medicine, First Year Medical Student</td>
</tr>
<tr>
<td>Robert David Wojahn</td>
<td>Denver, CO, BS,</td>
<td>Northwestern University '09, Elective Year</td>
</tr>
<tr>
<td>Morgan Bernard Wolfe, Jr</td>
<td>Houma, LA, BS,</td>
<td>Georgia Institute of Technology '09, Elective Year</td>
</tr>
<tr>
<td>Maxim Wolfson</td>
<td>St. Louis, MO, BS,</td>
<td>Washington University in St. Louis '10, Second Year Medical Student</td>
</tr>
<tr>
<td>Angelica Wong</td>
<td>Brooklyn, NY, BS,</td>
<td>University of Chicago '10, Second Year Medical Student</td>
</tr>
<tr>
<td>Kristine Shannon Wong</td>
<td>Hockessin, DE, BA,</td>
<td>University of Pennsylvania '10, Clinical Clerkship Year</td>
</tr>
<tr>
<td>Elizabeth Copeland Wright-Jin</td>
<td>Albuquerque, NM, BA,</td>
<td>University of New Mexico '06, MSTP, Third Year Research</td>
</tr>
<tr>
<td>Jonathan Owen Wright</td>
<td>Sandy, UT, BS,</td>
<td>Brigham Young University '10, MSTP, First Year Research</td>
</tr>
<tr>
<td>Melissa Anderson Wright</td>
<td>St. Louis, MO, BS,</td>
<td>Duke University '10, Doctor of Medicine, Clinical Clerkship Year</td>
</tr>
<tr>
<td>Tiffany Ying Wu</td>
<td>Parsippany, NJ, BA,</td>
<td>New York University '08, University of Pittsburgh Medical Center, Pittsburgh, PA</td>
</tr>
<tr>
<td>Xiaodi Wu</td>
<td>Toronto, Canada, BA,</td>
<td>Harvard University '09, MSTP, Second Year Research</td>
</tr>
<tr>
<td>Yuwei Wu</td>
<td>Shrewsbury, MA, BS,</td>
<td>University of Chicago '09, Master of Arts/Doctor of Medicine, First Year Medical Student</td>
</tr>
<tr>
<td>Daphne Ying Xiao</td>
<td>Olivotte, CA,</td>
<td>Program: Doctor of Medicine, First Year Medical Student</td>
</tr>
<tr>
<td>Qi Xiao</td>
<td>Durham, NC,</td>
<td>Program: Doctor of Medicine, First Year Medical Student</td>
</tr>
<tr>
<td>Wen Zhu Xu</td>
<td>Sugar Land, TX,</td>
<td>Program: Doctor of Medicine, First Year Medical Student</td>
</tr>
<tr>
<td>Lauren Margaret Yang</td>
<td>Silver Spring, MD,</td>
<td>Cornell University '10, Doctor of Medicine, Clinical Clerkship Year</td>
</tr>
<tr>
<td>Lu Morgan Yang</td>
<td>Houston, TX, BS,</td>
<td>Rice University '11, Second Year Medical Student</td>
</tr>
<tr>
<td>Zao Yang</td>
<td>Atlanta, GA, BS,</td>
<td>University of Georgia '10, Doctor of Medicine, Clinical Clerkship Year</td>
</tr>
<tr>
<td>Peter Hou Yu Yen</td>
<td>San Marino, CA,</td>
<td>Washington University '10, Doctor of Medicine, Clinical Clerkship Year</td>
</tr>
<tr>
<td>David Qianli Ying</td>
<td>Miami, FL, BS,</td>
<td>Massachusetts Institute of Technology '09, Elective Year</td>
</tr>
<tr>
<td>Shaun Robert Yockelson</td>
<td>Eugene, OR, BS,</td>
<td>Tulane University '08, Doctor of Medicine, 2012 Graduate, Anesthesiology, Oregon Health &amp; Science University, Portland, OR</td>
</tr>
<tr>
<td>Christine C Yokoyama</td>
<td>St. Louis, MO, BA,</td>
<td>Harvard University '04, MSTP, Second Year Research</td>
</tr>
<tr>
<td>Victoria Hyun Yom</td>
<td>Stevenson Ranch, CA,</td>
<td>University of California Berkeley '05, MSCI/MD, 2012 Graduate, Transitional Year, Mercy Hospital, St. Louis, MO, Ophthalmology, Washington University in St. Louis SOM, St. Louis, MO</td>
</tr>
<tr>
<td>Mitsukuni Yoshida</td>
<td>Jackson Heights, NY,</td>
<td>Program: MSTP, First Year Medical Student</td>
</tr>
<tr>
<td>Andrew Lee Young</td>
<td>Bethesda, MD, BA,</td>
<td>Washington University '07, MSTP, First Year Research</td>
</tr>
<tr>
<td>Erica Paige Young</td>
<td>Sharon, MA, BS,</td>
<td>Massachusetts Institute of Technology '09, Elective Year</td>
</tr>
<tr>
<td>Margaret Ashley Young</td>
<td>Laytontsville, MD,</td>
<td>BS, Carnegie Mellon University '05, MSTP, Clinical Clerkship Year</td>
</tr>
<tr>
<td>Nicholas Scott Yozamp</td>
<td>St. Cloud, MN, BA,</td>
<td>Washington University in St. Louis '11, Second Year Medical Student</td>
</tr>
<tr>
<td>Kevin Zheng Yuan</td>
<td>Chesterfield, MO, BS,</td>
<td>Washington University '10, Doctor of Medicine, Clinical Clerkship Year</td>
</tr>
<tr>
<td>Sonia Yuen</td>
<td>Syosset, NY, BA,</td>
<td>Dartmouth College '11, Doctor of Medicine, Second Year Medical Student</td>
</tr>
<tr>
<td>Faye Hwa-Young Yu</td>
<td>Saipan, MP, BA, Dartmouth College '09, Program: Doctor of Medicine, Second Year Medical Student</td>
<td></td>
</tr>
<tr>
<td>Jennifer Yu</td>
<td>Columbus, IN, BS,</td>
<td>Washington University '08, Program: Doctor of Medicine, 2012 Graduate, General Surgery, Barnes-Jewish Hospital, St. Louis, MO</td>
</tr>
</tbody>
</table>
Jenny Lijun Yu Evanston, IL, Program: Doctor of Medicine, First Year Medical Student

Emily Susan Zantow Fayetteville, AR, BH, Vanderbilt University '11, Program: Doctor of Medicine, Second Year Medical Student

Mark Alan Zaydman Rochester, NY, BS, Case Western Reserve University '07, Program: MSTP, Fourth Year Research

Joseph Zenga Medford, MA, BA, Cornell University '08, Program: Doctor of Medicine, 2012 Graduate, Otolaryngology, Barnes-Jewish Hospital, St. Louis, MO

Wenjing Zeng Miami, FL, BS, Yale University '08, Program: Doctor of Medicine, 2012 Graduate, Orthopaedic Surgery, University of Rochester/Strong Memorial Hospital, Rochester, NY

May Meishu Zhang Thousand Oaks, CA, BA, Harvard University '10, Program: Doctor of Medicine, Clinical Clerkship Year

Yingxin Zhang Worcester, MA, BS, Massachusetts Institute of Technology '07, MH, Massachusetts Institute of Technology '08, Program: Doctor of Medicine, 2012 Graduate, Transitional Year, St. Vincent's Medical Center, Bridgeport, CT, Ophthalmology, Yale-New Haven Medical Center, New Haven, CT

Jeff Guanbo Zhao Burnaby, British Columbia, Canada, BA, Dartmouth College '08, Program: Doctor of Medicine, 2012 Graduate, Psychiatry, Hospital of the University of Pennsylvania, Philadelphia, PA

Johnny Zhao Durham, NC, Program: Doctor of Medicine, First Year Medical Student

Peter Chen Zhao Marietta, GA, BS, Emory University '11, Program: Doctor of Medicine, Second Year Medical Student

Yi Zhao Boca Raton, FL, BA, University of Chicago '08, Program: MSTP, First Year Research

Lida Zheng Westborough, MA, BS, Cornell University '11, Program: Doctor of Medicine, Second Year Medical Student

Daisy Zhou Princeton, NJ, Program: Doctor of Medicine, First Year Medical Student

Tina Tianyi Zhu Lakeville, MN, Program: Doctor of Medicine, First Year Medical Student

Kristen Elizabeth Ziara Okemos, MI, BS, University of North Carolina-Chapel Hill '07, Program: Master of Arts/ Doctor of Medicine, 2012 Graduate, Pediatrics, University of North Carolina, Chapel Hill, NC

Lawrence Richard Zieske Union City, CA, BA, Stanford University '05, Program: Doctor of Medicine (5 Year), Second Year Medical Student

Alexander Zozula East Brunswick, NJ, Program: Doctor of Medicine, Second Year Medical Student

Ema Zubovic Des Moines, IA, Program: Doctor of Medicine, First Year Medical Student

Summary of Students in the School of Medicine

2011-12

Doctor of Medicine and Doctor of Philosophy Degrees
Graduating Class: 25
Third-Year Class: 24
Sixth-Year Research: 3
Fifth-Year Research: 8
Fourth-Year Research: 14
Third-Year Research: 17
Second-Year Research: 21
First-Year Research: 23
Second-Year Class: 27
First-Year Class: 26

Doctor of Medicine and Master of Arts Degrees
Graduating Class: 4
Trainees: 4
Doctor of Medicine and Master of Science in Clinical Investigation Degree
Graduating Class: 3

Doctor of Medicine Degree
Graduating Class: 95
Five-Year Research Program: 6
Third-Year Class: 107
Second-Year Class: 98
First-Year Class: 95

Doctor of Physical Therapy Degree
Graduating Class: 75
Second-Year Class: 80
First-Year Class: 83
Part-Time Students: 37

Doctor of Occupational Therapy Degree
Graduating Class: 14
Third-Year Class: 21
Second-Year Class: 27
First-Year Class: 11

Doctor of Audiology
Graduating Class: 10
Third-Year Class: 13
Second-Year Class: 12
First-Year Class: 13

Master of Science in Occupational Therapy Degree
Graduating Class: 53
Second-Year Class: 65
First-Year Class: 75

Master of Science in Population Health Sciences
First-Year Class: 12

Master of Science in Genetic Epidemiology
Graduating Class: 4
First-Year Class: 2
Certificate/SCND: 8

Master of Science in Biostatistics
First-Year Class: 6

Master of Science in Deaf Education
Graduating Class: 10
First-Year Class: 11

Master of Science in Clinical Investigation
Graduating Class: 20
First-Year Class: 25
Certificate: 14
SCND: 92

Total: 1,393
Map

Map
For a printable version of the School of Medicine campus map, please download this pdf:

For additional information, see the map at: http://visitor.wustl.edu/medicalmap.pdf
Schools of Washington University

Schools of Washington University

All schools are located at One Brookings Drive, St. Louis, Missouri 63130 except Medicine (660 S. Euclid Ave., St. Louis, Missouri 63110). A University-sponsored shuttle bus travels between the Danforth Campus and the Medical Center at regular intervals.

Arts & Sciences
- College of Arts & Sciences
- Graduate School of Arts & Sciences
- University College

Sam Fox School of Design & Visual Arts
- College of Architecture
- Graduate School of Architecture & Urban Design
- College of Art
- Graduate School of Art

Olin Business School

School of Engineering & Applied Science

School of Law

School of Medicine

George Warren Brown School of Social Work
All Faculty

Alphabetical List of Faculty

Elliot Efrem Abbey, MD  Professor of Clinical Medicine, Internal Medicine
Camille N. Abboud, MD  Professor of Medicine, Internal Medicine
Basem Abdeen, MD  Instructor in Clinical Medicine, Internal Medicine
Shadi Abdelnour  Instructor in Clinical Medicine, Internal Medicine
Haley J Abel, MA, PHD  Research Instructor in Genetics, Genetics
Dana Ray Abendschein, PHD  Associate Professor of Cell Biology and Physiology, Cell Biology and Physiology
Dana Ray Abendschein, PHD  Associate Professor of Medicine, Internal Medicine
Marc Bruce Abrams, DDS  Instructor in Clinical Otolaryngology, Otolaryngology
Barry K Abramson, MD  Instructor in Clinical Medicine, Internal Medicine
Yousef Abu-Amer, MS, PHD  Professor of Cell Biology and Physiology, Cell Biology and Physiology
Yousef Abu-Amer, MS, PHD  Professor of Orthopaedic Surgery, Orthopaedic Surgery
Mouhamed O Abuattieh, MD  Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Nada A Abumrad, PhD  Professor of Cell Biology and Physiology, Cell Biology and Physiology
Nada A Abumrad, PhD  Robert C Atkins Professor of Obesity Research in Medicine, Internal Medicine
Aninda Bhat Acharya, PhD  Instructor in Clinical Neurology, Neurology
Samuel I Achilefu, PhD  Professor of Biochemistry and Molecular Biophysics, Biochemistry and Molecular Biophysics
Samuel I Achilefu, PhD  Professor of Radiology, Radiology
Samuel I Achilefu  Siteman Cancer Center, Professor of Radiology, Division of Radiological Sciences, Mallinckrodt Institute of Radiology, Washington University School of Medicine, 1991-1993: Postdoctoral research fellow, oxygen transport systems, Oxford University, Oxford, England, 1991: PhD, chemistry, University of Nancy, Nancy, France
Tracy Adair-Kirk, PhD  Research Assistant Professor of Medicine, Internal Medicine
Susan E Adams, MD, PHD  Assistant Professor of Clinical Pediatrics, Pediatrics
Susan R Adams, MD  Instructor in Clinical Medicine, Internal Medicine
William S Adams, MD  Associate Professor of Clinical Pediatrics, Pediatrics
Tara Joshi Adhikari, MBBS  Instructor in Medicine, Internal Medicine
Douglas R Adkins, MD  Professor of Medicine, Internal Medicine
Rebecca L Aft, MD, PHD  Professor of Surgery (General Surgery), Surgery
Ashima Agrawal, MD  Instructor in Pathology and Immunology, Pathology and Immunology
Kelly Lynn Agrawal, MD  Instructor in Medicine, Internal Medicine
Sirajuddin Agha, MBBS  Assistant Professor of Anesthesiology, Anesthesiology
Arpana Agrawal, PhD  Assistant Professor of Psychiatry, Psychiatry
Arpit Agrawal, MD  Instructor in Medicine, Internal Medicine
Aqeeb Ahmad  Instructor in Clinical Psychiatry, Psychiatry
Nawal Mona Ahmed  Instructor in Clinical Otolaryngology (DDS), Otolaryngology
Sun-Young Ahn  , MD Instructor in Pediatrics, Pediatrics
Walter John Akers  , DVM, PHD Assistant Professor of Radiology, Radiology
Abdulla Akfaly  , MD Instructor in Clinical Medicine, Internal Medicine
Gustav Akk  , PHD Assistant Professor of Anesthesiology, Anesthesiology
Etihad S. Al-Falahi  Instructor in Clinical Pediatrics, Pediatrics
Muhammad Taher Al-Lozi  , MD, MS Professor of Neurology, Neurology
Hussam Al Kateb  , MA, PHD Assistant Professor of Pathology and Immunology, Pathology and Immunology
Belal Outhman Al Khiami  , MD Instructor in Medicine, Internal Medicine
Bassam Albarcha  Instructor in Clinical Medicine, Internal Medicine
Suzanne G Albrecht  Instructor in Clinical Pediatrics, Pediatrics
Jorge M Alegre  , MD Instructor in Clinical Medicine, Internal Medicine
Muhammad A Ali  , MD Instructor in Clinical Medicine, Internal Medicine
Zarmeena Ali  , MBBS Instructor in Medicine, Internal Medicine
Paul M Allen  , MS, PHD Robert L. Kroc Professor of Pathology and Immunology, Pathology and Immunology
Henry W Allhoff  , OD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Ardis Kay Allison  , DOST Instructor in Clinical Pediatrics, Pediatrics
Donald Craig Allred  , MD Professor of Pathology and Immunology, Pathology and Immunology
D. Craig Allred  Siteman Cancer Center, Professor of Pathology and Immunology, Division of Anatomic and Molecular Pathology, Washington University School of Medicine, 1979-1981, 1982-1983: Resident, anatomic pathology, University of Connecticut Health Center, Farmington, 1981-1982: Fellow, immunobiology, University of Connecticut Health Center, 1979: MD, University of Utah, Salt Lake City, Primary Specialty: Breast pathology, Board Certified, 1984: American Board of Pathology, Anatomic Pathology
Jennifer Elizabeth Allsworth  , AB, PHD Assistant Professor of Obstetrics and Gynecology, Obstetrics and Gynecology
Jennifer Elizabeth Allsworth  , AB, PHD Assistant Professor of Surgery (Public Health Sciences), Surgery
David Hershel Alpers  , MD William B Kountz Professor of Gerontology in Medicine, Internal Medicine
Abeer Said Alqaisi  , MD Instructor in Clinical Medicine, Internal Medicine
Denis Ian Altman  , MBBCH Assistant Professor of Clinical Pediatrics, Pediatrics
Denis Ian Altman  , MBBCH Associate Professor of Clinical Neurology, Neurology
Michael Bernard Altman  , PHD Instructor in Radiation Oncology, Radiation Oncology
Lizette Alvarez-Montero  , MD Instructor in Clinical Neurology, Neurology
Luciano C. Amado  , MD Assistant Professor of Medicine, Internal Medicine
Jamaluddin Faisal Amanullah  Instructor in Clinical Medicine, Internal Medicine
Gayatri Amarasinghe  , PHD Assistant Professor of Biochemistry and Molecular Biophysics, Biochemistry and Molecular Biophysics
Maryellen Amato  , MD Instructor in Clinical Radiology, Radiology
Patricia J Amato  , MD Associate Professor of Clinical Pediatrics, Pediatrics
Amit P. Amin  , MD Assistant Professor of Medicine, Internal Medicine
Navinkumar J Amin  , MS Associate Professor of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Shilpa S Amin  , MD Assistant Professor of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Department</th>
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<tr>
<td>Mohamad T Amjad, MD</td>
<td>Professor of Clinical Pediatrics</td>
<td>Pediatrics</td>
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<tr>
<td>Ping An, MD</td>
<td>Research Assistant Professor of Genetics</td>
<td>Genetics</td>
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<tr>
<td>Jagruti Shah Anadkat</td>
<td>Instructor in Pediatrics</td>
<td>Pediatrics</td>
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<tr>
<td>Milan J. Anadkat, MD</td>
<td>Assistant Professor of Medicine (Dermatology), Internal Medicine</td>
<td>Pediatrics</td>
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<tr>
<td>Beau Mark Ances, MD, MS, PHD</td>
<td>Assistant Professor of Neurology</td>
<td>Neurology</td>
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<tr>
<td>Kristen Minette Andersen</td>
<td>Instructor in Clinical Pediatrics</td>
<td>Pediatrics</td>
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<tr>
<td>Carolyn J Anderson, MD, PHD</td>
<td>Adjunct Professor of Radiology</td>
<td>Radiology</td>
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<tr>
<td>Dale J Anderson, MD</td>
<td>Instructor in Clinical Psychiatry, Psychiatry</td>
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<td>Frank Kim Anderson, MD</td>
<td>Instructor in Clinical Medicine (Dermatology), Internal Medicine</td>
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<td>Richard H Anderson, MD, MS, PHD</td>
<td>Instructor in Clinical Psychiatry, Psychiatry</td>
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<tr>
<td>Scott J Anderson, MD, PHD</td>
<td>Instructor in Clinical Medicine, Internal Medicine</td>
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<tr>
<td>Usha P Andley, MS, PHD</td>
<td>Assistant Professor of Biochemistry and Molecular Biophysics</td>
<td>Biochemistry and Molecular Biophysics</td>
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<tr>
<td>Usha P Andley, MS, PHD</td>
<td>Professor of Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences</td>
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<tr>
<td>Dorothy A Andriole, MD</td>
<td>Assistant Dean for Student Affairs and Medical Education, Associate Dean Curriculum</td>
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<tr>
<td>Dorothy A Andriole, MD</td>
<td>Associate Professor of Surgery (General Surgery), Surgery</td>
<td>Surgery</td>
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<tr>
<td>Gerald L Andriole, MD</td>
<td>Robert Killian Royce, M.D. Distinguished Professor of Urologic Surgery, Surgery</td>
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<tr>
<td>Dana E Ankney, MD</td>
<td>Instructor in Pediatrics</td>
<td>Pediatrics</td>
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<tr>
<td>Andrey P Anokhin, MS, PHD</td>
<td>Associate Professor of Psychiatry</td>
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<tr>
<td>George Anstas</td>
<td>Instructor in Clinical Medicine, Internal Medicine</td>
<td>Pediatrics</td>
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<tr>
<td>Lucinda L. Antonacci-Fulton, MS</td>
<td>Research Instructor in Genetics, Genome Center</td>
<td>Genetics</td>
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<tr>
<td>Amal F. Antoun</td>
<td>Instructor in Clinical Pediatrics</td>
<td>Pediatrics</td>
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<tr>
<td>John K Appelbaum, MD</td>
<td>Assistant Professor of Clinical Obstetrics and Gynecology, Obstetrics and Gynecology</td>
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<tr>
<td>Murray Howard Appelbaum, DDENT</td>
<td>Instructor in Clinical Otolaryngology (DMD), Otolaryngology</td>
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<tr>
<td>Catherine M Appleton, MD</td>
<td>Assistant Professor of Radiology</td>
<td>Radiology</td>
</tr>
<tr>
<td>Catherine M. Appleton</td>
<td>Siteman Cancer Center, Assistant Professor of Radiology and Chief, Section of Breast Imaging, Washington University School of Medicine, 2000-2001: Intern, Reading Hospital and Medical Center, Reading, Pa., 2001-2005: Resident and chief resident, diagnostic radiology, Washington University, St. Louis, 2005-2006: Fellow, breast imaging, Washington University, 2000: MD, University of Florida, Gainesville, Primary Specialty: Breast imaging and diagnostic radiology, Board Certified: 2005: American Board of Radiology</td>
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<tr>
<td>Rajendra Apte, MD, PHD</td>
<td>Associate Professor of Developmental Biology, Molecular Biology and Pharmacology</td>
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<td>Assistant Professor of Clinical Obstetrics and Gynecology, Obstetrics and Gynecology</td>
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<td>Scott J Arbaugh, MD</td>
<td>Instructor in Clinical Psychiatry, Psychiatry</td>
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<td>Jeffrey Michael Arbeit, MD</td>
<td>Professor of Cell Biology and Physiology, Cell Biology and Physiology</td>
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<td>Professor of Surgery (Urologic Surgery), Surgery</td>
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<td>Assistant Professor of Pediatrics, Pediatrics</td>
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<td>Ahmad Beheshti Ardekani, MD</td>
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<td>Kenneth J Arnold, MD</td>
<td>Assistant Professor of Clinical Surgery (General Surgery), Surgery</td>
<td>Surgery</td>
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<tr>
<td>Anna Maria Arroyo Plasencia, MD</td>
<td>Instructor in Medicine, Internal Medicine</td>
<td>Medicine</td>
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<tr>
<td>Jennifer L. Arter</td>
<td>Assistant Professor of Clinical Pediatrics, Pediatrics</td>
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<td>Stella Arthur, MD</td>
<td>Assistant Professor of Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences</td>
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</table>
Saira M Asadullah, MD Instructor in Clinical Medicine, Internal Medicine
Phillip V. Asaro, MD Assistant Professor of Emergency Medicine in Medicine, Internal Medicine
Elizabeth L Atkinson, MD Instructor in Clinical Pediatrics, Pediatrics
Jeffrey Jay Atkinson, MD Assistant Professor of Medicine, Internal Medicine
Jeffrey Jay Atkinson, MD Assistant Professor of Pediatrics, Pediatrics
John Patterson Atkinson, MD Professor of Molecular Microbiology, Molecular Microbiology
John Patterson Atkinson, MD Samuel Grant Professor of Medicine, Internal Medicine
Robert K Atteberry Instructor in Clinical Pediatrics, Pediatrics
Heidi Kathleen Atwell, DOST Assistant Professor of Anesthesiology, Anesthesiology
Heidi Kathleen Atwell, DOST Assistant Professor of Surgery (Cardiothoracic Surgery), Surgery
Crystal Lynn Atwood, MD Instructor in Medicine, Internal Medicine
Adrienne Denise Atzemis, MD Assistant Professor of Pediatrics, Pediatrics
Chandra Aubin, MD Associate Professor of Emergency Medicine in Medicine, Internal Medicine
Vorachart Auethavekiat, MD Assistant Professor of Medicine, Internal Medicine
Paul F Austin, MD Associate Professor of Surgery (Urologic Surgery), Surgery
James G Avery, MD Associate Professor of Clinical Medicine, Internal Medicine
Michael Simon Avidan, MBBCH Professor of Anesthesiology, Anesthesiology
Michael Simon Avidan, MBBCH Professor of Surgery (Cardiothoracic Surgery), Surgery
Michael Magdi Awad, MD, PHD Assistant Professor of Surgery (General Surgery), Surgery
Sylvia Awadalla, MD Professor of Neurology, Neurology
Victoria Brooke Ayden, MD Instructor in Psychiatry, Psychiatry
Sara Ayers, MD Instructor in Clinical Pediatrics, Pediatrics
Abdelkareem Azab, PHD Assistant Professor of Radiation Oncology, Radiation Oncology
Riad Azar, MD Associate Professor of Medicine, Internal Medicine
Fariba Azarpour, MD, X, Pediatrics
Sangeeta Kaur Babar, MD Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Hilary M Babcock, MD, MPH Assistant Professor of Medicine, Internal Medicine
Richard G. Bach, MD, MS Associate Professor of Medicine, Internal Medicine
Leonard B Bacharier, MD Professor of Medicine, Internal Medicine
Leonard B Bacharier, MD Professor of Pediatrics, Pediatrics
Kyongtae T Bae, MD, ME, MS, PHD Adjunct Associate Professor of Radiology, Radiology
Jacques Ulrich Baenziger, MD, PHD Professor of Cell Biology and Physiology, Cell Biology and Physiology
Jacques Ulrich Baenziger, MD, PHD Professor of Pathology and Immunology, Pathology and Immunology
Nancy L Baenziger, PHD Research Associate Professor of Neurobiology, Anatomy and Neurobiology
Jill M Baer, MD Assistant Professor of Clinical Pediatrics, Pediatrics
Maria Quintos Baggstrom, MD Assistant Professor of Medicine, Internal Medicine
Maria Q. Baggstrom Siteman Cancer Center, Assistant Professor of Medicine, Division of Oncology, Section of Medical Oncology, Washington University School of Medicine, 1996-1999: Resident, internal medicine, University of North Carolina, Chapel Hill, 1999-2002: Fellow, hematology/oncology, University of North Carolina, 1996: MD, University of Texas Medical School at Houston, Primary Specialty: Lung and esophageal cancer, Board Certified: 1999: American Board of Internal Medicine, Internal Medicine 2004: American Board of Internal Medicine, Medical Oncology
Kathy Baglan, Instructor in Clinical Radiation Oncology, Radiation Oncology
Om Parkash Bahl, MS, Assistant Professor of Clinical Medicine, Internal Medicine
Jeffrey Allen Bailey, M PA, MD, Assistant Professor of Surgery (General Surgery), Surgery
Sean B Bailey, MD, MS, Instructor in Clinical Otolaryngology, Otolaryngology
Thomas C Bailey, MD, Professor of Medicine, Internal Medicine
Gregory Eden Baker, MD, Instructor in Clinical Medicine, Internal Medicine
Jonathan C Baker, MD
Elizabeth A Baker, Siteman Cancer Center, Professor of Community Health, Division of Behavioral Science and Health Education, Saint Louis University School of Public Health, 1987: MPH, health behavior/education, University of Michigan, Ann Arbor, 1993: PhD, health behavior/education, University of Michigan, Ann Arbor
Parul Bakhshi, Research Assistant Professor of Occupational Therapy (Pending Executive Faculty Approval), Program in Occupational Therapy
Dennis M Balf, MD, Professor of Radiology, Radiology
Dennis M Balf, Siteman Cancer Center, Professor of Radiology, Mallinckrodt Institute of Radiology, Washington University School of Medicine, 1975-1979: Resident, diagnostic radiology, St. Mary’s Hospital, San Francisco, 1979-1980: Fellow, Washington University, St. Louis, 1975: MD, Medical College of Wisconsin, Milwaukee, Primary Specialty: Radiology, abdominal imaging, Board Certified; American Board of Radiology, Diagnostic Radiology
Fred J Balis, MD, MS, Assistant Professor of Clinical Medicine, Internal Medicine
Robert H Baloh, MD, PHD, Adjunct Assistant Professor of Neurology, Neurology
Sirine A. Baltagi, Instructor in Pediatrics (Pending Dean's Approval), Pediatrics
David T Balzer, MD, Professor of Pediatrics, Pediatrics
Sonya Bamba, MD, Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
David Ban, MD, Associate Professor of Clinical Medicine, Internal Medicine
James William Banks, MD, Instructor in Clinical Medicine, Internal Medicine
Michael Roman Banton, MD
Jianxin Bao, PhD, Research Associate Professor of Audiology and Communication Sciences, Program in Audiology and Communication Sciences
Jianxin Bao, PhD, Research Associate Professor of Otolaryngology, Otolaryngology
Abraham Barake, MD, Associate Professor of Clinical Medicine, Internal Medicine
Thomas J Baranski, MD, PHD, Associate Professor of Developmental Biology, Molecular Biology and Pharmacology
Thomas J Baranski, MD, PHD, Associate Professor of Medicine, Internal Medicine
Peggy Barco, MED, Instructor in Medicine, Internal Medicine
Peggy Barco, MED, Instructor in Occupational Therapy, Program in Occupational Therapy
Angela L Bard, MD, Associate Professor of Clinical Pediatrics, Pediatrics
Rachel Hannah Bardowell, MD, Instructor in Medicine, Internal Medicine
Philip M Barger, MD, Assistant Professor of Medicine, Internal Medicine
Wayne Morris Barnes, PHD, Associate Professor of Biochemistry and Molecular Biophysics, Biochemistry and Molecular Biophysics
Edward M Barnett, MD, PHD, Professor of Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Alan Roy Barnette, Adjunct Instructor in Pediatrics, Pediatrics
Joaquin Barnoya, MD, MS, Research Assistant Professor of Surgery (General Surgery), Surgery
Robert L Barrack, MD, Charles F and Joanne Knight Distinguished Professor of Orthopaedic Surgery, Orthopaedic Surgery
Ernie-Paul Barrette, MA, MD, Associate Professor of Medicine, Internal Medicine
Jeffrey John Bednarski, MD, PHD Instructor in Pediatrics, Pediatrics
David C Beebe, MS, PHD Janet and Bernard Becker Professor of Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
David C Beebe, MS, PHD Professor of Cell Biology and Physiology, Cell Biology and Physiology
Mark Edward Beehner, DDENT, MD Assistant Professor of Clinical Surgery (Plastic and Reconstructive Surgery), Surgery
Earl C Beeks Jr, MD Associate Professor of Clinical Pediatrics, Pediatrics
Avraham Beigelman, MD Assistant Professor of Pediatrics, Pediatrics
Melissa S. Belanger, MD Instructor in Pediatrics, Pediatrics
James E Belcher, MD Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Andrew Curry Belden, MS Research Instructor in Psychiatry, Psychiatry
Joe E Belew, MD Associate Professor of Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Richard C Bell, MD Instructor in Clinical Medicine (Dermatology), Internal Medicine
C. Elliott Bell Jr, MD Instructor in Clinical Medicine, Internal Medicine
Arbi Ben Abdallah Instructor in Anesthesiology, Anesthesiology
William Waite Benedict, MD Instructor in Clinical Medicine, Internal Medicine
Kenneth J Bennett, MD Associate Professor of Clinical Surgery (General Surgery), Surgery
Walter F Benoist, MD Professor of Clinical Pediatrics, Pediatrics
Brian Michael Benway, MD Assistant Professor of Surgery (Urologic Surgery), Surgery
Max Prely Benzaquen Instructor in Clinical Neurology, Neurology
Tammie Lee Smith Benzinger, MD, PHD Assistant Professor of Neurological Surgery, Neurological Surgery
Tammie Lee Smith Benzinger, MD, PHD Assistant Professor of Radiology, Radiology
George Richard Benzinger III, MD, PHD Assistant Professor of Anesthesiology, Anesthesiology
2008: American Board of Radiology, Neuroradiology
Kathleen Mary Berchelmann, MD Instructor in Pediatrics, Pediatrics
Louise E Berdan, MA, PHS Instructor in Clinical Pediatrics, Pediatrics
Gregg Jonathan Berdy, MD Assistant Professor of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Susan Berdy, MD Assistant Professor of Clinical Medicine, Internal Medicine
Mikhail Y Berezin, MS, PHD Assistant Professor of Radiology, Radiology
Mikhail Y. Berezin Siteman Cancer Center, Assistant Professor of Radiology, Division of Radiological Sciences, Mallinckrodt Institute of Radiology, Washington University School of Medicine, 1996-2000: Postdoctoral fellow, chemistry, Monstanto Co., St. Louis, 2003-2004: Postdoctoral research assistant, optical imaging, Washington University, St. Louis, 1987: MSc, chemical engineering, Moscow Institute of Oil and Gas, 1991: PhD, organic chemistry, Moscow Institute of Oil and Gas
Christine R. Berg, BSOT, MS, PHD Assistant Professor of Neurology, Neurology
Christine R. Berg, BSOT, MS, PHD Assistant Professor of Occupational Therapy, Program in Occupational Therapy
Daniel Ralph Berg, MD Assistant Professor of Clinical Medicine, Internal Medicine
Douglas E Berg, PHD Alumni Professor of Molecular Microbiology, Molecular Microbiology
Douglas E Berg, PHD Professor of Genetics, Genetics
Douglas E Berg, PHD Professor of Medicine, Internal Medicine
Michael A Berk, MD Professor of Clinical Medicine, Internal Medicine
Lynda Cheryl Berkowitz, MS Instructor in Audiology and Communication Sciences, Program in Audiology and Communication Sciences
John Rutledge Bermingham Jr Adjunct Associate Professor of Genetics, Genetics
Kathryn Quitasol Bernabe, MD Assistant Professor of Surgery (Pediatric Surgery), Surgery
Cory Thomas Bernadt, MD, PHD Assistant Professor of Pathology and Immunology, Pathology and Immunology
Carlos Bernal-Mizrachi, MD Assistant Professor of Cell Biology and Physiology, Cell Biology and Physiology
Carlos Bernal-Mizrachi, MD Assistant Professor of Medicine, Internal Medicine
Lisa Marie Bernhard, MD Assistant Professor of Obstetrics and Gynecology, Obstetrics and Gynecology
Paul M Bernier, OD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Aaron M Bernstein, MD Assistant Professor of Clinical Medicine, Internal Medicine
Keith A Bernstein, MD Instructor in Clinical Medicine, Internal Medicine
Marc Jordan Bernstein, MD Associate Professor of Clinical Medicine, Internal Medicine
Douglas R Berson, MD Instructor in Clinical Medicine, Internal Medicine
Mary Ellen Bertrand, MD Associate Professor of Neurology, Neurology
Mary Ellen Bertrand, MD Associate Professor of Pediatrics, Pediatrics
Stephen M Beverley, PHD Head of the Department of Molecular Microbiology, Molecular Microbiology
Stephen M Beverley, PHD Marvin A Brennecke Professor of Molecular Microbiology, Molecular Microbiology
Sanjeev Bhalla, MD Professor of Radiology, Radiology
Anita R. Bhandiwad, MD Assistant Professor of Medicine, Internal Medicine
Henish Ashish Bhansali, MD Instructor in Medicine, Internal Medicine
Mythili C. Bharadwaj Instructor in Clinical Medicine, Internal Medicine
Shobha Bhaskar, MBBS Instructor in Pediatrics, Pediatrics
Savita Bhat, MS, MS1 Instructor in Clinical Psychiatry, Psychiatry
Deepta Bhattacharya, PHD Assistant Professor of Pathology and Immunology, Pathology and Immunology
Rakhee Kapadia Bhayani, MD Assistant Professor of Medicine, Internal Medicine
Sam B Bhayani, MD Associate Professor of Surgery (Urologic Surgery), Surgery
Anjali Maruti Bhorade, MD Associate Professor of Occupational Therapy, Program in Occupational Therapy
Anjali Maruti Bhorade, MD Associate Professor of Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Stanley I Biel, MD Instructor in Clinical Medicine, Internal Medicine
Frank Joseph Bier, OD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Andrew J Bierhals, MD, MPH Assistant Professor of Radiology, Radiology
Joelle Biernacki, MD Instructor in Radiology, Radiology
Laura J Bierut, MD Professor of Psychiatry, Psychiatry
Scott W Biest, MD Assistant Professor of Obstetrics and Gynecology, Obstetrics and Gynecology
Ronald C Bilchik, MD Assistant Professor of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Joseph John Billadello, MD Associate Professor of Medicine, Internal Medicine
Lawrence J Billy, MD Instructor in Clinical Surgery (General Surgery), Surgery
Ellen F Binder, MD Associate Professor of Medicine, Internal Medicine
Ellen F Binder, MD Associate Professor of Occupational Therapy, Program in Occupational Therapy
Aaron Birenbaum, MD Assistant Professor of Clinical Medicine, Internal Medicine
William D Birenbaum, MD Instructor in Clinical Medicine, Internal Medicine
Clifford Allen Birge, MD Assistant Professor of Clinical Medicine, Internal Medicine
Stanley J Birge, MD Associate Professor of Medicine, Internal Medicine
Rebecca L Birkenmeier, MS Research Assistant Professor of Neurology, Neurology
Rebecca L Birkenmeier, MS Research Assistant Professor of Occupational Therapy, Program in Occupational Therapy
Rebecca L Birkenmeier, MS Research Assistant Professor of Physical Therapy, Program in Physical Therapy
Thomas M Birkenmeier, MD Assistant Professor of Medicine, Internal Medicine
Mark Gerald Birkmann, OD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Jean E Birmingham, MD Associate Professor of Clinical Pediatrics, Pediatrics
Elisa H Birnbaum, MD Professor of Surgery (General Surgery), Surgery
1992, 1999: American Board of Colon and Rectal Surgery
Alan J Birtwistle Assistant Professor of Clinical Neurology, Neurology
Kumar Sanjeev Bishnupuri, MS, PHD Research Instructor in Medicine, Internal Medicine
Monica E. Bishop Assistant Professor of Psychiatry, Psychiatry
Joseph T Black, MD Professor of Clinical Neurology, Neurology
Kevin J. Black, MD Professor of Neurobiology, Anatomy and Neurobiology
Kevin J. Black, MD Professor of Psychiatry, Psychiatry
Kevin J. Black, MD Professor of Radiology, Radiology
Lynn Bennett Blackburn, MA, PHD Assistant Professor of Clinical Neurology, Neurology
Huldah C Blamoville, MD Associate Professor of Clinical Pediatrics, Pediatrics
Valerie Blanc, MS, PHD Research Instructor in Medicine, Internal Medicine
Melvin S Blanchard, BBA, MD Associate Professor of Medicine, Internal Medicine
Melvin S Blanchard, BBA, MD Director of Residency Program, Department of Internal Medicine, Internal Medicine
Roberto Carlos Blanco Duarte, MD Instructor in Anesthesiology, Anesthesiology
Margheuretta Dakota Bland, DPT, MS Instructor in Physical Therapy, Program in Physical Therapy
Thomas J Blanke Sr, MD Instructor in Surgery (General Surgery), Surgery
Kevin J Blanton Instructor in Clinical Pediatrics, Pediatrics
Andrew N Blatt, MA, MD Assistant Professor of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Pablo M Blazquez Gamez, PHD Research Assistant Professor of Otolaryngology, Otolaryngology
Richard Bligh, MD Instructor in Clinical Medicine, Internal Medicine
Kevin Jay Blinder, MD Professor of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Morey A Blinder, MD Assistant Professor of Pathology and Immunology, Pathology and Immunology
Morey A Blinder, MD Associate Professor of Medicine, Internal Medicine
Charles D Bloch, MS, PHD Associate Professor of Radiation Oncology, Radiation Oncology
Gordon R Bloomberg, MD Professor of Pediatrics, Pediatrics
Jeffrey D Bloss Adjunct Associate Professor of Obstetrics and Gynecology, Obstetrics and Gynecology
Donald Allen Blum Assistant Professor of Clinical Medicine, Internal Medicine
Kendall Jay Blumer, PHD Professor of Cell Biology and Physiology, Cell Biology and Physiology
Trina Blythe, MD Instructor in Clinical Pediatrics, Pediatrics
James C Bobrow MD Professor of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Grant Bochicchio, M PH, MD Professor of Surgery (General Surgery), Surgery
Imre Bodo Adjunct Instructor in Medicine, Internal Medicine
Jennifer Marie Wilding Bogucki, MD Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
George M Bohigian, MD Professor of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Barbara Ann Bohne, PHD Professor of Audiology and Communication Sciences, Program in Audiology and Communication Sciences
Barbara Ann Bohne, PHD Professor of Otolaryngology (Neurobiology), Otolaryngology
Donald David Bohnenkamp, MD Instructor in Psychiatry, Psychiatry
Irving Boime, MS, PHD Professor of Developmental Biology, Molecular Biology and Pharmacology
Irving Boime, MS, PHD Professor of Reproductive Biology in Obstetrics and Gynecology, Obstetrics and Gynecology
Joshua P Boldt Instructor in Clinical Pediatrics, Pediatrics
Michael Bolger Instructor in Clinical Medicine, Internal Medicine
Isaac Boniuk, MD Professor Emeritus of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Stephanie Lynn Bonne, MD Instructor in Surgery (General Surgery) (Pending Dean's Approval), Surgery
James Scott Bonner, MD Instructor in Clinical Neurology, Neurology
Matthew James Bonzelet, MD Instructor in Clinical Medicine, Internal Medicine
Jonathan S Boomer, PHD Research Instructor in Medicine, Internal Medicine
Adrianus C Boon, MS, PHD Assistant Professor of Medicine, Internal Medicine
Adrianus C Boon, MS, PHD Assistant Professor of Molecular Microbiology, Molecular Microbiology
Adrianus C Boon, MS, PHD Assistant Professor of Pathology and Immunology, Pathology and Immunology
Ingrid B Borecki, MS, PHD Associate Professor of Biostatistics, Division of Biostatistics
Ingrid B Borecki, MS, PHD Associate Professor of Genetics, Genetics
Bernita Born-Wolf, BN, OD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Benjamin A Borowsky, MD Professor of Clinical Medicine, Internal Medicine
Jonathan D Bortz, MD Instructor in Clinical Medicine, Internal Medicine
Walter R Bosch, BE, MS, PHS Research Associate Professor of Radiation Oncology, Radiation Oncology
Ron Bose, MD, PHD Assistant Professor of Cell Biology and Physiology, Cell Biology and Physiology
Ron Bose, MD, PHD Assistant Professor of Medicine, Internal Medicine
Matthew S Bosner, MD Assistant Professor of Clinical Medicine, Internal Medicine
Umar Sekou-Toure Boston, MD Associate Professor of Surgery (Cardiothoracic Surgery), Surgery
Paul J Botelho, MD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Kathryn L Botney, MD Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Kelly N Botteron, MD Professor of Psychiatry (Child Psychiatry), Psychiatry
Kelly N Botteron, MD Professor of Radiology, Radiology
Laila M Bottros, MD Assistant Professor of Anesthesiology, Anesthesiology
Michael M Bottros, MD Instructor in Anesthesiology, Anesthesiology
Lawrence V Boveri, MD Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Anne M Bowcock, PHD Professor of Genetics, Genetics
Anne M Bowcock, PHD Professor of Medicine (Dermatology), Internal Medicine
Anne M Bowcock, PHD Professor of Pediatrics, Pediatrics
William G Bowen, MD Associate Professor of Clinical Medicine, Internal Medicine
Jessica Naomi Bowers Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Gary Boxer, MD Associate Professor of Psychiatry (Child Psychiatry), Psychiatry
Martin I Boyer, MD, MS Carol B and Jerome T Loeb Professor of Orthopaedic Surgery, Orthopaedic Surgery
Susan Kathleen Boyer, MD Instructor in Clinical Psychiatry, Psychiatry
Allyson Boyle, MD Instructor in Clinical Psychiatry, Psychiatry
Walter A Boyle III, MD Assistant Professor of Developmental Biology, Molecular Biology and Pharmacology
Walter A Boyle III, MD Professor of Anesthesiology, Anesthesiology
Walter A Boyle III, MD Professor of Surgery (General Surgery), Surgery
Jeffrey D Bradley, MD S. Lee Kling Professor of Radiation Oncology, Radiation Oncology
Robert J Bradshaw, MD Instructor in Clinical Pediatrics, Pediatrics
Robert Harry Brady, MD Adjunct Instructor in Psychiatry (Child Psychiatry), Psychiatry
Robert Harry Brady, MD Instructor in Clinical Psychiatry (Child Psychiatry), Psychiatry
Steven B Brandes, MD Professor of Surgery (Urologic Surgery), Surgery
Keith E Brandt, MD William G. Hamm Professor of Surgery (Plastic and Reconstructive Surgery), Surgery
1995: American Board of Plastic Surgery
1995: American Board of Surgery, Surgery of the Hand
Gregory Harris Branham, MD Professor of Otolaryngology, Otolaryngology
Richard D. Brasington Jr, MD Professor of Medicine, Internal Medicine
Rebekah Arletta Braslow, MD Instructor in Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Alan C Braverman, MD Alumni Endowed Professor of Cardiovascular Disease in Medicine, Internal Medicine
Peter Anthony Brawer, MA, PHD Instructor in Clinical Psychiatry, Psychiatry
Andrea Lynn Bredemeyer, PHD Research Instructor in Pathology and Immunology, Pathology and Immunology
Sean Michael Breit, MD Instructor in Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Daniel C Brennan, MD Professor of Medicine, Internal Medicine
Tamara L. Brent, MD, PHD Professor of Molecular Microbiology, Molecular Microbiology
Thomas J. Brett, PHD Assistant Professor of Biochemistry and Molecular Biophysics, Biochemistry and Molecular Biophysics
Thomas J. Brett, PHD Assistant Professor of Cell Biology and Physiology, Cell Biology and Physiology
Thomas J. Brett, PHD Assistant Professor of Medicine, Internal Medicine
G. Larry Bretthorst, MS, PHD Research Associate Professor of Radiology, Radiology
Paul C Bridgman, MS, PHD Associate Professor of Biomedical Engineering, Department of Biomedical Engineering
Paul C Bridgman, MS, PHD Professor of Neurobiology, Anatomy and Neurobiology
Keith Happ Bridwell, MD J Albert Key Distinguished Professor of Orthopaedic Surgery, Orthopaedic Surgery
Keith Happ Bridwell, MD Professor of Neurological Surgery, Neurological Surgery
Stephen Broderick Instructor in Surgery (Cardiothoracic Surgery), Surgery
David L Brody, MD, PHD Associate Professor of Neurology, Neurology
Steven L Brody, MD Professor of Medicine, Internal Medicine
Steven L Brody, MD Professor of Radiology, Radiology
Steven L Brody Siteman Cancer Center, Professor of Medicine, Division of Pulmonary and Critical Care Medicine, Washington University School of Medicine, 1980-1983: Resident, internal medicine, University of Cincinnati, 1989-1993: Fellow, pulmonary medicine, Pulmonary Branch, National Heart, Lung and Blood Institute, Bethesda, Md., 1994-1995: Postdoctoral fellow, developmental biology, Washington University, 1980: MD, University of Michigan, Ann Arbor, Primary Specialty: Pulmonary disease, gene therapy, Board Certified., 1983: American Board of Internal Medicine, Internal Medicine
1987, 2005: American Board of Internal Medicine, Critical Care Medicine
1992, 2005: American Board of Internal Medicine, Pulmonary Disease
Larry G Brokering, OD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Igor Brondz, MD Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Christopher B. Brooks, MD Associate Professor of Emergency Medicine in Medicine, Internal Medicine
Robert Henry Brophy IV, MD, MS Assistant Professor of Orthopaedic Surgery, Orthopaedic Surgery
Victoria L. Brown-Kennerly, PHD Research Assistant Professor of Genetics, Genetics
Angela L Brown, MD Assistant Professor of Medicine, Internal Medicine
Kathryn Corinne Brown Instructor in Clinical Medicine, Internal Medicine
Lawrence R Brown, MD, PHD Assistant Professor of Emergency Medicine in Medicine, Internal Medicine
Marc Richard Brown, OD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Marybeth Brown, MA, PHD Adjunct Associate Professor of Physical Therapy, Program in Physical Therapy
Robert J Brown, MD Assistant Professor of Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Sarah Michelle Brown, PHD Instructor in Pathology & Immunology, Pathology and Immunology
Yolette V Brown, MD Assistant Professor of Clinical Pediatrics, Pediatrics
Earline A Brownridge, MD Instructor in Clinical Pediatrics, Pediatrics
Seth J Brownridge, MD Assistant Professor of Clinical Pediatrics, Pediatrics
George John Broze Jr, MD Professor of Cell Biology and Physiology, Cell Biology and Physiology
George John Broze Jr, MD Professor of Medicine, Internal Medicine
George John Broze Jr, MD Professor of Pathology and Immunology, Pathology and Immunology
Robert M Bruce, MD Professor of Clinical Medicine, Internal Medicine
Steven E. Bruce, MA, PHD Visiting Assistant Professor of Psychiatry, Psychiatry
Michael Raymond Bruchas, PHD Assistant Professor of Anesthesiology, Anesthesiology
Janice E Brunstrom-Hernandez, MD Associate Professor of Neurology, Neurology
Janice E Brunstrom-Hernandez, MD Associate Professor of Pediatrics, Pediatrics
Elizabeth M Brunt, MD Professor of Pathology and Immunology, Pathology and Immunology
L. Michael Brunt, MD Professor of Surgery (General Surgery), Surgery
Kathleen S Brunts, MD Instructor in Clinical Medicine, Internal Medicine
Bruce L Bryan, BE, MD Assistant Professor of Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Guojun Bu, PHD Adjunct Professor of Pediatrics, Pediatrics
Robert Charles Bucelli, MD, PHD Assistant Professor of Neurology, Neurology
Tony Wayne Buchanan, MA, PHD Adjunct Asst Professor of Psychiatry, Psychiatry
Kathleen K Bucholz, MS, MS1, PHD Professor of Psychiatry, Psychiatry
Jacob M Buchowski, MD, MS Associate Professor of Neurological Surgery, Neurological Surgery
Jacob M Buchowski, MD, MS Associate Professor of Orthopaedic Surgery, Orthopaedic Surgery
Nancy M Buchser, MD Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Stanley Buck, MD Instructor in Clinical Medicine, Internal Medicine
Kathryn Ann Bucklen, BFA, MD Assistant Professor of Pediatrics, Pediatrics
Virginia D Buckles, MS, PHD Research Professor of Neurology, Neurology
Tara M. Budetti Instructor in Clinical Pediatrics, Pediatrics
John B Buettner, MD Instructor in Clinical Surgery (General Surgery), Surgery
Lorena Buffa, MD Instructor in Clinical Pediatrics, Pediatrics
Richard S Buller, MS, PHD Research Assistant Professor of Pediatrics, Pediatrics
Rebecca Kay Bullivant, MD Assistant Professor of Clinical Pediatrics, Pediatrics
Arnold D Bullock, MD Professor of Surgery (Urologic Surgery), Surgery
Michelle A. Burack, MD, PHD Adjunct Instructor in Neurology, Neurology
Max H Burgdorf, MD Assistant Professor of Clinical Pediatrics, Pediatrics
Peter M Burgers, MS, PHD Marvin A. Brennecke Professor of Biological Chemistry, Biochemistry and Molecular Biophysics
Peter MJ Burgers Siteman Cancer Center, Professor of Biochemistry and Molecular Biophysics, Washington University School of Medicine, 1972: MS, organic chemistry, State University of Leiden, Netherlands, 1977: PhD, State University of Leiden
Dean B Burgess, MD Professor Emeritus of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Andreas H Burkhalter, MS, PHD Associate Professor of Biomedical Engineering, Department of Biomedical Engineering
Andreas H Burkhalter, MS, PHD Associate Professor of Neurobiology in Neurological Surgery, Neurological Surgery
Andreas H Burkhalter, MS, PHD Professor of Neurobiology, Anatomy and Neurobiology
Tamara Lavon Burlis, DPT, MHS Assistant Professor of Medicine, Internal Medicine
Tamara Lavon Burlis, DPT, MHS Assistant Professor of Physical Therapy, Program in Physical Therapy
Tamara Lavon Burlis, DPT, MHS Associate Director for Clinical Education in Physical Therapy, Program in Physical Therapy
Scott H Burner, MD Associate Professor of Emergency Medicine in Medicine, Internal Medicine
Carey-Ann Dawn Burnham, PHD Assistant Professor of Pathology and Immunology, Pathology and Immunology
Carey-Ann Dawn Burnham, PHD Assistant Professor of Pediatrics, Pediatrics
Garrett C Burris, MD Associate Professor of Clinical Neurology, Neurology
Garrett C Burris, MD Associate Professor of Clinical Pediatrics, Pediatrics
Harold Burton, PHD Professor of Biomedical Engineering, Department of Biomedical Engineering
Harold Burton, PHD Professor of Cell Biology and Physiology, Cell Biology and Physiology
Harold Burton, PHD  Professor of Neurobiology, Anatomy and Neurobiology
Donald F Busiek, MD  Instructor in Clinical Medicine, Internal Medicine
Joan Rachel Butcher  Instructor in Clinical Psychiatry, Psychiatry
Melvin J Butler  Instructor in Clinical Medicine, Internal Medicine
Derek E Byers, MD, PHD  Assistant Professor of Medicine, Internal Medicine
Meredith S Byers, MD  Assistant Professor of Radiology, Radiology
James Byrd, MD  Instructor in Clinical Psychiatry (Child Psychiatry), Psychiatry
Galileu Cabral, MD  Associate Professor of Clinical Medicine, Internal Medicine
Kelley S. Caddel, MD  Instructor in Clinical Pediatrics, Pediatrics
William Todd Cade, MS, PHD  Assistant Professor of Medicine, Internal Medicine
William Todd Cade, MS, PHD  Assistant Professor of Physical Therapy, Program in Physical Therapy
Alison Gale Cahill, MD  Assistant Professor of Obstetrics and Gynecology, Obstetrics and Gynecology
Nigel John Cairns, PHD  Assistant Professor of Neurology, Neurology
Nigel John Cairns, PHD  Research Professor of Pathology and Immunology, Pathology and Immunology
Boris Calderon, MD  Research Instructor in Pathology and Immunology, Pathology and Immunology
Cheryl Ann Caldwell, DPT, MHS  Assistant Professor of Orthopaedic Surgery, Orthopaedic Surgery
Cheryl Ann Caldwell, DPT, MHS  Assistant Professor of Physical Therapy, Program in Physical Therapy
Archna Calfee, MD  Instructor in Clinical Pediatrics, Pediatrics
Ryan Patrick Calfee, MD  Assistant Professor of Orthopaedic Surgery, Orthopaedic Surgery
Joshua W. Calhoun, MD  Instructor in Clinical Psychiatry (Child), Psychiatry
David J Callahan, MD  Assistant in Clinical Pediatrics, Pediatrics
David J Callahan, MD  Assistant Professor of Clinical Neurology, Neurology
Wilma J. Calvert, BN, MSN, PHD  Adjunct Instructor in Psychiatry, Psychiatry
Bernard Chiong Camins, MD  Assistant Professor of Medicine, Internal Medicine
John William Campbell, MD  Professor of Clinical Medicine, Internal Medicine
Meghan Clark Campbell, PHD  Research Assistant Professor of Neurology, Neurology
Meghan Clark Campbell, PHD  Research Assistant Professor of Radiology, Radiology
Scott D Campbell, D SC, MHS  Research Instructor in Anesthesiology, Anesthesiology
Joseph Edward Cangas  Assistant Professor of Clinical Pediatrics, Pediatrics
Maria J Canizares, MD  Instructor in Clinical Medicine (Dermatology), Internal Medicine
Charles E Canter, MD  Professor of Pediatrics, Pediatrics
Russell C. Cantrell, MD  Instructor in Clinical Neurology, Neurology
Yuqing Cao, PHD  Assistant Professor of Anesthesiology, Anesthesiology
Michael G Caparon Jr., PHD  Professor of Molecular Microbiology, Molecular Microbiology
Celeste Capron, MD  Instructor in Pediatrics, Pediatrics
David Anthony Caplin, MD  Instructor in Clinical Surgery (Plastic and Reconstructive Surgery), Surgery
Douglas A Carano, DDENT  Instructor in Clinical Otolaryngology (DDS), Otolaryngology
John R Carlile, MD: Assistant Professor of Clinical Pediatrics, Pediatrics
Douglas W Carlson, MD: Professor of Pediatrics, Pediatrics
Kim Alan Carmichael, MD: Associate Professor of Medicine, Internal Medicine
Michael J. Carney, MD: Instructor in Clinical Pediatrics, Pediatrics
Robert Michael Carney, MS, PHD: Professor of Psychiatry, Psychiatry
Robert Michael Carney, MS, PHD: Professor of Psychology, Department of Psychology
Christopher Robert Carpenter, MD: Associate Professor of Emergency Medicine in Medicine, Internal Medicine
David A Carpenter, MD: Associate Professor of Neurology, Neurology
David B Carr, MD: Professor of Medicine, Internal Medicine
Beatriz M Carreno, PHD: Research Associate Professor of Medicine, Internal Medicine
Beatriz M Carreno, PHD: Research Associate Professor of Pathology and Immunology, Pathology and Immunology
Javier A Carrero-Brewer, MA, PHD: Research Instructor in Pathology and Immunology, Pathology and Immunology
Amanda E Carrion, MD: Instructor in Pediatrics, Pediatrics
Kenneth R Carson, MD: Assistant Professor of Medicine, Internal Medicine
Kenneth R. Carson, MD: Siteman Cancer Center, Assistant Professor of Medicine, Division of Oncology, Section of Medical Oncology, Washington University School of Medicine, 2000-2003: Resident, internal medicine, Duke University, Durham, N.C., 2004-2006: Postdoctoral research fellow, Northwestern University, Chicago, 2005-2008: Fellow, hematology and oncology, Northwestern University, 2000: MD, University of Southern California, Los Angeles, Primary Specialty: Medical oncology, lymphoma, leukemia, internal medicine, Board Certified:, 2003: American Board of Internal Medicine, Internal Medicine
Alexandre Carter, MD, PHD: Assistant Professor of Neurology, Neurology
Shelton D. Caruthers, MA, PHD: Research Associate Professor of Medicine, Internal Medicine
Arthur L Casey, MD: Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Amanda Fishback Cashen, MD: Assistant Professor of Medicine, Internal Medicine
Anil Govind Cashikar, MS, PHD: Research Instructor in Cell Biology/Physiology, Cell Biology and Physiology
Rubilinda Q Casino, MD: Instructor in Clinical Pediatrics, Pediatrics
Timothy James Casper, MD: Instructor in Pediatrics (Pending Dean's Approval), Pediatrics
Benjamin Edward Cassell, MD: Instructor in Medicine, Internal Medicine
Carmen F Castellano, OD: Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Mario Castro, M PH, MD: Professor of Medicine, Internal Medicine
Mario Castro, M PH, MD: Professor of Pediatrics, Pediatrics
Valeria Cavalli, MS, PHD: Assistant Professor of Neurobiology, Anatomy and Neurobiology
Laura Francesca Cavallone, MD: Assistant Professor of Anesthesiology, Anesthesiology
Patricia A Cavazos-Rehg, PHD: Research Assistant Professor of Psychiatry, Psychiatry
Lilibeth Maria Cayabyab-Loe, MD: Assistant Professor of Clinical Medicine, Internal Medicine
Ari Michael Cedars, MD: Assistant Professor of Medicine, Internal Medicine
Marina Cella, MD: Research Associate Professor of Pathology and Immunology, Pathology and Immunology
Chad Phadung Chadaratana, MD: Instructor in Clinical Otolaryngology, Otolaryngology
Murali M Chakinala, MD: Associate Professor of Medicine, Internal Medicine
Grant A Challen, PHD: Assistant Professor of Medicine, Internal Medicine
Grant A. Challen  Siteman Cancer Center, Assistant Professor of Medicine, Division of Oncology, Section of Molecular Oncology, Washington University School of Medicine, 2006-2012: Postdoctoral fellow, hematopoietic stem cells, Baylor College of Medicine, Houston, 2006: PhD, developmental biology, University of Queensland, Brisbane, Australia

Aaron Mark Chamberlain  , B MUS, MD Assistant Professor of Orthopaedic Surgery, Orthopaedic Surgery

Kari Terece Chambers  , PHD Research Instructor in Medicine, Internal Medicine

Szeman Ruby Chan  , PHD Research Instructor in Pathology and Immunology, Pathology and Immunology

Tattamangalam P Chandrika  , MS Associate Professor of Clinical Pediatrics, Pediatrics

Kae Pyng Chang  , MD Instructor in Clinical Medicine, Internal Medicine

Li-Wei Chang  , MS, PHS Research Instructor in Pathology and Immunology, Pathology and Immunology

Li-Wei Chang  Siteman Cancer Center, Research Instructor of Pathology and Immunology, Division of Laboratory and Genomic Medicine, Washington University School of Medicine, 2006-2010: Postdoctoral fellow, pathology and immunology, Washington University, St. Louis, 2002: MS, biomedical engineering, Washington University, St. Louis, 2006: DSc, biomedical engineering, Washington University

Earl S Changar  , OD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

William T Chao  , MD Instructor in Clinical Pediatrics, Pediatrics

William T Chao  , MD Eugene M. Bricker Professor of Surgery (General Surgery), Surgery

Douglas Char  , MA, MD Associate Professor of Emergency Medicine in Medicine, Internal Medicine

Mina Charepoo  , MD Instructor in Clinical Psychiatry, Psychiatry

Siroth Charmond  , MD Instructor in Clinical Medicine, Internal Medicine

Lewis Robert Chase  , MD Professor of Medicine, Internal Medicine

Alexander Chi Chen  , MD Assistant Professor of Medicine, Internal Medicine

Alexander Chi Chen  , MD Assistant Professor of Surgery (Cardiothoracic Surgery), Surgery

Chien-Huan Chen  , MD, PHD Assistant Professor of Medicine, Internal Medicine

Delphine L. Chen  , AB, MD Assistant Professor of Radiology, Radiology

Edward C. Chen  , MD Instructor in Clinical Medicine, Internal Medicine

Feng Chen  , PHD Assistant Professor of Cell Biology and Physiology, Cell Biology and Physiology

Feng Chen  , PHD Associate Professor of Medicine, Internal Medicine

Jane Chen  , MD Associate Professor of Medicine, Internal Medicine

Junjie Chen  , PHD Research Instructor in Medicine, Internal Medicine

Li-Shiun Chen  , M PH, MD, PHS Assistant Professor of Psychiatry, Psychiatry

Ling Chen  , MPH, MS, PHD Research Instructor in Biostatistics, Division of Biostatistics

Michael B Chen  Assistant Professor of Clinical Obstetrics and Gynecology, Obstetrics and Gynecology

Phyllis Chen  , MD Instructor in Clinical Medicine, Internal Medicine

Qing Chen  , MD, MS Instructor in Clinical Medicine, Internal Medicine

Shiming Chen  , MS, PHD Professor of Developmental Biology, Molecular Biology and Pharmacology

Shiming Chen  , MS, PHD Professor of Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

Ying Chen  , MD, PHD Assistant Professor of Medicine, Internal Medicine

Zhoufeng Chen  , MS, PHD Professor of Anesthesiology, Anesthesiology

Zhoufeng Chen  , MS, PHD Professor of Developmental Biology, Molecular Biology and Pharmacology

Zhoufeng Chen  , MS, PHD Professor of Psychiatry, Psychiatry

Zhouji Chen  , MS, PHD Research Assistant Professor of Medicine, Internal Medicine

Ziwei Chen  , MBBS, MS, PHD Research Assistant Professor of Anesthesiology, Anesthesiology
Li-Shiun Chen, Siteman Cancer Center, Assistant Professor of Psychiatry, Washington University School of Medicine, 1993-1994: Resident, psychiatry, National Taiwan University, Taipei, 2000-2004: Resident, psychiatry, Washington University, St. Louis, 1993: MD, National Taiwan University, Taipei, 1995: MPH, hygiene and public health, Johns Hopkins University, Baltimore, 1998: ScD, psychiatry and epidemiology, Johns Hopkins University, Primary Specialty: Psychiatry, Board Certified., 2007: American Board of Psychiatry and Neurology, Psychiatry

Glenn S Cheng, MD, Instructor in Clinical Pediatrics, Pediatrics

Steven Chih Nung Cheng, MD, Assistant Professor of Medicine, Internal Medicine

Su-Li Cheng, MS, PhD, Research Associate Professor of Medicine, Internal Medicine

Praveen R Chenna, MBBS, Instructor in Medicine, Internal Medicine

Rebecca D Chernock, MD, Assistant Professor of Otolaryngology, Otolaryngology

Rebecca D Chernock, MD, Assistant Professor of Pathology and Immunology, Pathology and Immunology

Rebecca D Chernock, Siteman Cancer Center, Assistant Professor of Pathology and Immunology, Division of Anatomic and Molecular Pathology, Washington University School of Medicine, 2004-2008: Resident, anatomic and clinical pathology, Washington University, St. Louis, 2008-2009: Fellow, surgical pathology, Washington University, 2004: MD, University of Pennsylvania, Philadelphia, Primary Specialty: Head and neck pathology, Board Certified., 2008: American Board of Pathology, Anatomic Pathology

James M Cheverud, MS, PhD, Professor of Anatomy, Anatomy and Neurobiology

James M Cheverud, MS, PhD, Professor of Anthropology, Department of Anthropology

James M Cheverud, MS, PhD, Professor of Genetics, Genetics

Wak S Chia, MD, Instructor in Clinical Pediatrics, Pediatrics

John N Chiapel, Instructor in Clinical Otolaryngology, Otolaryngology

Michael R Chicoine, MD, Associate Professor of Neurological Surgery, Neurological Surgery

Michael R Chicoine, MD, August A. Busch, Jr. Distinguished Professor, Neurological Surgery

Jonathan C Chiles, MD, Instructor in Pediatrics, Pediatrics

Kelly Lynne Chilson, MD, Assistant Professor of Anesthesiology, Anesthesiology

Ronald J Chod, MD, Adjunct Associate Professor of Obstetrics and Gynecology, Obstetrics and Gynecology

Jaebok Choi, BE, MS, PhD, Research Assistant Professor of Medicine, Internal Medicine

Kyunhee Choi, MS, PhD, Associate Professor of Pathology and Immunology, Pathology and Immunology

Richard A Chole, MD, PhD, Head of the Department of Otolaryngology, Otolaryngology

Richard A Chole, MD, PhD, Lindburg Professor of Otolaryngology, Otolaryngology

Richard A Chole, MD, PhD, Professor of Audiology and Communication Sciences, Program in Audiology and Communication Sciences

Richard A Chole, MD, PhD, Professor of Developmental Biology, Molecular Biology and Pharmacology

Vesselin M. Chorbov, MS, PhD, Research Assistant Professor of Psychiatry, Psychiatry

Camaryn E Chrisman Robbins, MPH, MD, Assistant Professor of Obstetrics and Gynecology, Obstetrics and Gynecology

Wenhua Chu, MS, PhD, Research Instructor in Radiology, Radiology

Philip Chu Pak-Yu, MD, Instructor in Clinical Medicine, Internal Medicine

Duck Sung Chun, MD, Instructor in Clinical Medicine, Internal Medicine

Jeffrey Peter Ciaramita, Instructor in Clinical Medicine, Internal Medicine

Theodore J Cicero, MS, PhD, Professor of Neurobiology, Anatomy and Neurobiology

Theodore J Cicero, MS, PhD, Professor of Neuropsychopharmacology in Psychiatry, Psychiatry

Theodore J Cicero, MS, PhD, Vice Chairman for Research, Department of Psychiatry, Psychiatry

Michael A Ciliberto, MD, MS, Assistant Professor of Neurology, Neurology

Michael A Ciliberto, MD, MS, Assistant Professor of Pediatrics, Pediatrics
Matthew Aaron Ciorba, MD Assistant Professor of Medicine, Internal Medicine
John R. Cirrito, PHD Assistant Professor of Neurology, Neurology
Geoffrey Cislo, MD Assistant Professor of Medicine, Internal Medicine
Roberto Civitelli, MD Professor of Cell Biology and Physiology, Cell Biology and Physiology
Roberto Civitelli, MD Professor of Orthopaedic Surgery, Orthopaedic Surgery
Roberto Civitelli, MD Sydney M and Stella H Schoenberg Professor of Medicine, Internal Medicine
Billie Ruth Clark, PHD Associate Professor of Neurology, Neurology
Billie Ruth Clark, PHD Associate Professor of Physical Therapy, Program in Physical Therapy
Christine M Clark, MA Instructor in Audiology and Communication Sciences, Program in Audiology and Communication Sciences
William W. Clark, MS, PHD Director of the Program in Audiology and Communication Sciences, Program in Audiology and Communication Sciences
William W. Clark, MS, PHD Professor of Audiology and Communication Sciences, Program in Audiology and Communication Sciences
William W. Clark, MS, PHD Professor of Education, Department of Education
William W. Clark, MS, PHD Professor of Otolaryngology, Otolaryngology
William W Clendenin, MD Assistant Professor of Clinical Psychiatry, Psychiatry
David B Clifford, MD Melba and Forest Seay Professor of Clinical Neuropharmacology in Neurology, Neurology
David B Clifford, MD Professor of Medicine, Internal Medicine
Paul F Cliften, MS, PHD Research Associate Professor of Genetics, Genetics
Dorothy Jean Cline, MD Instructor in Clinical Medicine (Dermatology), Internal Medicine
John C Clohisy, MD Daniel C. and Betty B. Viehmann Distinguished Professor of Orthopaedic Surgery, Orthopaedic Surgery
C. Robert Cloninger, MD Professor of Genetics, Genetics
C. Robert Cloninger, MD Professor of Psychiatry, Psychiatry
C. Robert Cloninger, MD Professor of Psychology, Department of Psychology
C. Robert Cloninger, MD Wallace Renard Professor of Psychiatry, Former Department Heads
James Close, MD Instructor in Clinical Medicine, Internal Medicine
William Edward Clutter, MD Associate Director of the House Staff Training Program, Department of Internal Medicine, Internal Medicine
William Edward Clutter, MD Associate Professor of Medicine, Internal Medicine
William E Clutter Siteman Cancer Center, Associate Professor of Medicine, Division of Endocrinology, Metabolism and Lipid Research, Washington University School of Medicine, 1975-1978: Resident, internal medicine, Washington University, St. Louis, 1978-1980: Fellow, metabolism and endocrinology, Washington University, 1975: MD, Ohio State University, Columbus, Primary Specialty: Endocrine cancer, metabolism, endocrinology, diabetes, Board Certified., 1978: American Board of Internal Medicine, Internal Medicine
Mary A Coats, MSN Research Associate Professor of Neurology, Neurology
John E. Codd, MD Professor of Clinical Surgery (Cardiothoracic Surgery), Surgery
Albert Murray Cohen, MD Assistant Professor of Anesthesiology, Anesthesiology
Barak Alon Cohen, PHD Associate Professor of Genetics, Genetics
Bruce H Cohen, MD Assistant Professor of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Darryl S Cohen, DOST Assistant Professor of Clinical Pediatrics, Pediatrics
Gene C Cohen, DDS Instructor in Clinical Otolaryngology (DDS), Otolaryngology
Shari J Cohen, MD Assistant Professor of Clinical Medicine, Internal Medicine
Sheldon C Cohen, DDENT Instructor in Clinical Otolaryngology, Otolaryngology
William Mark Cohen, DDENT, MS Instructor in Clinical Otolaryngology (DMD), Otolaryngology
Brian G Cohn, MD Instructor in Emergency Medicine in Medicine, Internal Medicine
Susan R Colbert-Threats, MD Assistant Professor of Clinical Medicine, Internal Medicine
Graham A Colditz, DRPH, M PH, MBBS Niess-Gain Professor of Surgery (General Surgery), Surgery
Graham A Colditz, DRPH, M PH, MBBS Professor of Medicine, Internal Medicine
Graham A. Colditz Siteman Cancer Center, Associate Director, Prevention and Control, Alvin J. Siteman Cancer Center, and Niess-Gain Professor in the School of Medicine, Department of Surgery, Washington University School of Medicine, 1979-1981: Intern and resident, internal medicine, Royal Brisbane Hospital, Brisbane, Australia, 1981-1983: Research fellow, Harvard University, Boston, Mass., 1979: MB BS, University of Queensland, Brisbane, Australia, 1982: MPH, epidemiology, Harvard University, Boston, Mass., 1986: DrPH, epidemiology, Harvard University, 1998: MD, University of Queensland

Danita L Cole, MD Instructor in Clinical Pediatrics, Internal Medicine
F. Sessions Cole, MD Assistant Vice Chancellor for Children's Health, Washington University School of Medicine, School of Medicine Vice Chancellor and Dean
F. Sessions Cole, MD Park J White, M.D. Professor of Pediatrics, Pediatrics
F. Sessions Cole, MD Professor of Cell Biology and Physiology, Cell Biology and Physiology
F. Sessions Cole, MD Vice Chair of the Department of Pediatrics, Pediatrics
John C. Cole, MD, PhD Instructor in Clinical Pediatrics, Pediatrics
Patricia L Cole, MA, MD Associate Professor of Clinical Medicine, Internal Medicine
Roger Barto Cole, MD, MS, PHD Instructor in Clinical Medicine, Internal Medicine
Lloyd W Coleman, MS, PHD Research Instructor in Medicine, Internal Medicine
Laura Ann Colletti-Mann, MD Associate Professor of Medicine (Pending Executive Faculty Approval), Internal Medicine
Lora Pearlman Collier Instructor in Clinical Pediatrics, Pediatrics
Brian Tyler Collins, MD Associate Professor of Pathology and Immunology, Pathology and Immunology
Sharon L. Collins, MD, MS, PHD Associate Professor of Otolaryngology, Otolaryngology
Brian T. Collins Siteman Cancer Center, Associate Professor of Pathology and Immunology, Division of Anatomic and Molecular Pathology, Washington University School of Medicine, 1988-1989: Intern, Cleveland Clinic, Cleveland, 1989-1993: Resident and chief resident, pathology, Indiana University, Indianapolis, 1993: Fellow, cytopathology, Indiana University, 1988: MD, University of Missouri, Kansas City, Primary Specialty: Cytopathology, endocrine pathology, pancreatic pathology, Board Certified: 1994: American Board of Pathology, Anatomic and Clinical Pathology
1997: American Board of Pathology, Cytopathology
Vicente M Colon-Alcaraz, MD Assistant Professor of Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Marco Colonna, MD Professor of Medicine, Internal Medicine
Marco Colonna, MD Professor of Pathology and Immunology, Pathology and Immunology
Nicholas J Colosi, MD Assistant Professor of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Eric S Colton, MD Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Arthur Hamilton Combs, MD Associate Professor of Clinical Medicine, Internal Medicine
Paul Kevin Commean Research Instructor in Radiology, Radiology
Susan Conger Instructor in Clinical Pediatrics, Pediatrics
David M Conner, MD Instructor in Clinical Psychiatry, Psychiatry
Anne Maureen Connolly, MD Professor of Neurology, Neurology
Anne Maureen Connolly, MD Professor of Pediatrics, Pediatrics
Janet M Connolly, MS, PHD Research Professor of Genetics, Genetics
Janet M Connolly, MS, PHD Research Professor of Pathology and Immunology, Pathology and Immunology

Janet M Connolly, Siteman Cancer Center, Research Professor of Pathology and Immunology, Section of Immunology and Molecular Pathology, Washington University School of Medicine, 1980-1983: Postdoctoral fellow, biochemistry, Rutgers University, New Brunswick, N.J., 1984-1986: Postdoctoral fellow, pathology and genetics, Washington University, St. Louis, 1970: MS, biology, American University, Washington, D.C., 1979: PhD, microbiology, George Washington University, Washington, D.C.

Lisa Tabor Connor, MA, PHD Assistant Professor of Neurology, Neurology

Lisa Tabor Connor, MA, PHD Assistant Professor of Occupational Therapy, Program in Occupational Therapy

Lisa Tabor Connor, MA, PHD Assistant Professor of Radiology, Radiology

John Michael Conoyer, MD Instructor in Clinical Otolaryngology, Otolaryngology

Donald Franklin Conrad, M RESEAR, PHD Assistant Professor of Genetics (Pending Executive Faculty Approval), Genetics

Glenn C Conroy, M PHIL, PHD Professor of Anatomy, Anatomy and Neurobiology

Glenn C Conroy, M PHIL, PHD Professor of Anthropology, Department of Anthropology

John Nicholas Constantino, MD Blanche F Ittleson Professor of Psychiatry (Child Psychiatry), Psychiatry

John Nicholas Constantino, MD Professor of Pediatrics, Pediatrics

Thomas E Conturo, MD, PHD Adjunct Associate Professor of Physics, Department of Physics

Thomas E Conturo, MD, PHD Associate Professor of Radiology, Radiology

Charles Richard Conway, MD Associate Professor of Psychiatry, Psychiatry

H. Groves Cooke III, DDENT, MS Instructor in Clinical Surgery (Plastic and Reconstructive Surgery), Surgery

Amber Russell Cooper, MD Assistant Professor of Obstetrics and Gynecology, Obstetrics and Gynecology

Daniel Horatio Cooper, MD Assistant Professor of Medicine, Internal Medicine

John A Cooper, MD, PHD Interim Head of the Department of Biochemistry, Biochemistry and Molecular Biophysics

John A Cooper, MD, PHD Professor of Biochemistry and Molecular Biophysics, Biochemistry and Molecular Biophysics

John A Cooper, MD, PHD Professor of Cell Biology and Physiology, Cell Biology and Physiology

Megan A Cooper, MD, PHD Assistant Professor of Pathology and Immunology, Pathology and Immunology

Megan A Cooper, MD, PHD Assistant Professor of Pediatrics, Pediatrics

John A Cooper, Siteman Cancer Center, Professor of Cell Biology and Physiology and Interim Chair, Department of Biochemistry and Molecular Biophysics, Washington University School of Medicine, 1983-1984: Postdoctoral fellow, cell biology, Johns Hopkins University, Baltimore, 1984-1985: Intern, pathology, Washington University, St. Louis, 1985-1987: Postdoctoral fellow, cell biology, Washington University, St. Louis, 1982: MD, Johns Hopkins University, Baltimore, 1983: PhD, cell biology, Johns Hopkins University

Douglas E Coplen, MD Associate Professor of Surgery (Urologic Surgery), Surgery


Ralph Copp Jr, MD Assistant Professor of Clinical Medicine, Internal Medicine

Maurizio Corbetta, MD Associate Professor of Psychology, Department of Psychology

Maurizio Corbetta, MD Norman J. Stupp Professor of Neurology, Neurology

Maurizio Corbetta, MD Professor of Neurobiology, Anatomy and Neurobiology

Maurizio Corbetta, MD Professor of Radiology, Radiology

Joseph C. Corbo, AB, MD, PHD Assistant Professor of Genetics, Genetics

Joseph C. Corbo, AB, MD, PHD Assistant Professor of Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

Joseph C. Corbo, AB, MD, PHD Assistant Professor of Pathology and Immunology, Pathology and Immunology
Joseph C. Corbo Siteman Cancer Center, Assistant Professor of Pathology and Immunology, Division of Neuropathology, Washington University School of Medicine, 1999-2001: Resident, anatomic pathology, Brigham and Women's Hospital, Boston, 2001-2003: Clinical fellow, neuropathology, Brigham and Women's Hospital, 2003-2005: Post-doctoral research fellow, genetics, Harvard Medical School, Boston, 1997: PhD, biology, University of California, San Diego, 1999: MD, University of California, San Diego

Suzanne Marie Cornbleet, DPT, MA Assistant Professor of Orthopaedic Surgery, Orthopaedic Surgery

Suzanne Marie Cornbleet, DPT, MA  Assistant Professor of Physical Therapy, Program in Physical Therapy

Lynn Anne Cornelius, BN, MD Winfred A and Emma R Showman Professor of Dermatology in Medicine, Internal Medicine

Pamela Ann Coslick-Fada, OD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

Ferdinand Louis Coste III, DOST Instructor in Pediatrics, Pediatrics

John Bernard Costello, MD Instructor in Clinical Medicine, Internal Medicine

Linda B Cottler, M PH, PHD Adjunct Professor of Psychiatry, Psychiatry

Steven Michael Couch, MD Assistant Professor of Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

Martha Laurin Council, MD Assistant Professor of Medicine (Dermatology) (Pending Executive Faculty Approval), Internal Medicine

Constance Stone Courtois, MD Assistant Professor of Radiology, Radiology

Douglas Floyd Covey, MA, PHD Professor of Pharmacology in Developmental Biology, Molecular Biology and Pharmacology

Sudha Mahajan Cowsik, MS, PHD Research Instructor in Biochemistry and Molecular Biophysics, Biochemistry and Molecular Biophysics

James L Cox, MD Evarts A. Graham Professor Emeritus of Surgery (Cardiothoracic Surgery), Surgery

Thomas E Cox, MD Associate Professor of Anesthesiology, Anesthesiology

Daniel W Coyne, MD Professor of Medicine, Internal Medicine

Traves D. Crabtree, MD Assistant Professor of Surgery (Cardiothoracic Surgery), Surgery

Mary Michaelaen Cradock Assistant Professor of Clinical Pediatrics, Pediatrics

Clarissa S. Craft, PHD Research Assistant Professor of Cell Biology/Physiol (Pending Executive Faculty Approval), Cell Biology and Physiology

Johnetta M Craig, MBA, MD Instructor in Clinical Medicine, Internal Medicine

James P Crane, MD Associate Professor of Genetics, Genetics

James P Crane, MD Associate Vice Chancellor for Clinical Affairs, School of Medicine Vice Chancellor and Dean

James P Crane, MD Chief Executive Officer-Faculty Practice Plan, Faculty Practice Plan

James P Crane, MD Professor of Obstetrics and Gynecology, Obstetrics and Gynecology

James P Crane, MD Professor of Radiology, Radiology

John Bruce Crane II, OD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

John Jeffrey Cras, MD, MS Assistant Professor of Medicine, Internal Medicine

Peter A. Crawford, MD, PHD Assistant Professor of Developmental Biology, Molecular Biology and Pharmacology

Peter A. Crawford, MD, PHD Assistant Professor of Genetics, Genetics

Peter A. Crawford, MD, PHD Assistant Professor of Medicine, Internal Medicine

Charles Crecelius, MD, PHD Assistant Professor of Clinical Medicine, Internal Medicine

Catherine E. Creeley, MA, PHD Research Instructor in Psychiatry, Psychiatry

Sharon Cresci, MD Assistant Professor of Medicine, Internal Medicine

Stephen R Crespin, MD Associate Professor of Clinical Medicine, Internal Medicine

Jeffrey S Crippin, MD Professor of Medicine, Internal Medicine

Robert D Crist Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Lucia del Pilar, MD Assistant Professor of Psychiatry, Psychiatry
Susan R Criswell, MD Assistant Professor of Neurology, Neurology
Seth Daniel Crosby, MD Research Assistant Professor of Genetics, Genetics
Betty Cross, MD Instructor in Clinical Pediatrics, Pediatrics
Dorothy Anne Cross, MD Professor of Neurology, Neurology
Veronica Lynn Cross, Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Dewitte T Cross III, MD Professor of Neurological Surgery, Neurological Surgery
Dewitte T Cross III, MD Professor of Radiology, Radiology
Erika C Crouch, MD, PHD Professor of Pathology and Immunology, Pathology and Immunology
Jack L Croughan, MD Associate Professor of Clinical Psychiatry, Psychiatry
Charles M Crowder, MD, PHD Dr. Seymour and Rose T. Brown Professor of Anesthesiology, Anesthesiology
Charles M Crowder, MD, PHD Professor of Developmental Biology, Molecular Biology and Pharmacology
Michael G Crowley, PHD Instructor in Radiology, Radiology
Beth Elaine Crowner, BS PT, DPT, M PP, MS Assistant Professor of Neurology, Neurology
Beth Elaine Crowner, BS PT, DPT, M PP, MS Assistant Professor of Physical Therapy, Program in Physical Therapy
Beth Elaine Crowner, BS PT, DPT, M PP, MS Division Director of Clinical Practice in Physical Therapy, Program in Physical Therapy
Carlos Cruchaga, MA, PHD Assistant Professor of Psychiatry, Psychiatry
Nicole Cruz, Instructor in Clinical Neurology, Neurology
Philip E Cryer, MD Irene E and Michael M Karl Professor of Endocrinology and Metabolism in Medicine, Internal Medicine
Phillip S. Cuculich, MD Assistant Professor of Medicine, Internal Medicine
Susan Margaret Culican, MD, PHD Assistant Professor of Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Susan E Cullen, PHD Adjunct Professor of Molecular Microbiology, Molecular Microbiology
Joseph P Culver, PHD Assistant Professor of Physics (Courtesy), Department of Physics
Joseph P Culver, PHD Associate Professor of Radiology, Radiology
Joseph P. Culver, Siteman Cancer Center, Associate Professor of Radiology, Division of Radiological Sciences, Mallinckrodt Institute of Radiology, Washington University School of Medicine, 1997-2001: Postdoctoral fellow, University of Pennsylvania, Philadelphia, 1997: PhD, physics, University of Pennsylvania, Philadelphia
Robert Culverhouse, MA, PHD Research Assistant Professor of Biostatistics, Division of Biostatistics
Robert Culverhouse, MA, PHD Research Assistant Professor of Medicine, Internal Medicine
Clayton Cummings, BSBA, MD Instructor in Pediatrics, Pediatrics
Kristopher W Cummings, MD Assistant Professor of Radiology, Radiology
Brian P. Cupps, MS, PHD Research Associate Professor of Surgery (Cardiothoracic Surgery), Surgery
John A Curci, MD Associate Professor of Surgery (General Surgery), Surgery
David T Curiel, MD, PHD Distinguished Professor of Radiation Oncology, Radiation Oncology
David T Curiel, MD, PHD Professor of Medicine, Internal Medicine
David T Curiel, MD, PHD Professor of Obstetrics and Gynecology, Obstetrics and Gynecology
Philip L Custer, MD Professor of Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Amy Cyr, MD Assistant Professor of Surgery (General Surgery), Surgery
Sylvia Lin Czuppon, MS Assistant Professor of Orthopaedic Surgery, Orthopaedic Surgery
Sylvia Lin Czuppon, MS Assistant Professor of Physical Therapy, Program in Physical Therapy
Gina Marie D’Angelo, PhD, SCM Assistant Professor of Biostatistics, Division of Biostatistics
Gina Marie D’Angelo, PhD, SCM Assistant Professor of Neurology, Neurology
Ralph G Dacey Jr, MD Head of the Department of Neurological Surgery, Neurological Surgery
Ralph G Dacey Jr, MD Henry G and Edith R Schwartz Professor of Neurological Surgery, Neurological Surgery
Neha Dahiya, MBA, MBBS, MD Instructor in Pathology and Immunology, Pathology and Immunology
Nirvika Dahiya, MD Assistant Professor of Pathology and Immunology, Pathology and Immunology
Sonika M Dahiya, MD Assistant Professor of Pathology and Immunology, Pathology and Immunology
Ann Marie Dale, PhD Research Assistant Professor of Medicine, Internal Medicine
Ann Marie Dale, PhD Research Assistant Professor of Occupational Therapy, Program in Occupational Therapy
Jeanenne M Dallas, MA Instructor in Neurology, Neurology
Jeanenne M Dallas, MA Instructor in Occupational Therapy, Program in Occupational Therapy
Tracey M. Daly, MD Instructor in Clinical Pediatrics, Pediatrics
Ralph James Damiano Jr, MD John M. Shoenberg Professor of Surgery (Cardiothoracic Surgery), Surgery
William H Danforth, MD Professor of Medicine, Internal Medicine
William H Danforth, MD Vice Chairman and Chancellor Emeritus, Office of Executive Vice Chancellor
Adish S. Dani, MA, PHD Research Assistant Professor of Pathology and Immunology, Pathology and Immunology
Erik D. Daniels, MD Instructor in Clinical Medicine, Internal Medicine
John S Daniels, MA, MD Associate Professor of Clinical Medicine, Internal Medicine
Rand E Dankner, MD Associate Professor of Clinical Medicine, Internal Medicine
Maria Cristina Dans, MD Assistant Professor of Medicine, Internal Medicine
Gautam Dantas, PHD Assistant Professor of Pathology and Immunology, Pathology and Immunology
Michael E Danter, MD Assistant Professor of Clinical Pediatrics, Pediatrics
Bhajan Shewaldas Dara, MD Instructor in Clinical Medicine, Internal Medicine
Michael D Darcy, MD Associate Professor of Surgery (General Surgery), Surgery
Michael D Darcy, MD Professor of Radiology, Radiology
Rachel S Darken, MD, PHD Assistant Professor of Neurology, Neurology
Lakshman Darzi, MBBS Assistant Professor of Medicine, Internal Medicine
Sundeep Das, MD Instructor in Clinical Medicine, Internal Medicine
Themistocles Dassopoulos, MD Associate Professor of Medicine, Internal Medicine
Alejandro M Datuin, AA, MD Assistant Professor of Clinical Psychiatry (On Staff at Malcolm Bliss Mental Health Center), Psychiatry
Yasmeen Daud, MD Assistant Professor of Pediatrics, Pediatrics
Carlos Colton Daughaday, MD Professor of Medicine, Internal Medicine
Bakul Dave, MD Assistant Professor of Anesthesiology, Anesthesiology
David L Davidson, OD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
John D Davidson, MD Professor of Clinical Medicine, Internal Medicine
Lisa S. Davidson, MS, PHD Research Assistant Professor of Audiology and Communication Sciences, Program in Audiology and Communication Sciences
Lisa S. Davidson, MS, PHD Research Assistant Professor of Otolaryngology, Otolaryngology
Nicholas O Davidson, MBBS Professor of Developmental Biology, Molecular Biology and Pharmacology
Nicholas O Davidson, MBBS Professor of Medicine, Internal Medicine
Richard Davidson, DDENT, MS Instructor in Clinical Otolaryngology (DMD), Otolaryngology
Victor G Davila-Roman, MD Professor of Anesthesiology, Anesthesiology
Victor G Davila-Roman, MD Professor of Medicine, Internal Medicine
Victor G Davila-Roman, MD Professor of Radiology, Radiology
Andrea Jill Davis, MD, MSN Instructor in Clinical Medicine, Internal Medicine
John C Davis, MD Associate Professor of Clinical Pediatrics, Pediatrics
Kasey L. Davis, MS, PHD Instructor in Clinical Pediatrics, Pediatrics
Mary A Davis, MD Assistant Professor Emeritus of Clinical Psychiatry, Psychiatry
Ray S Davis, MD Professor of Clinical Pediatrics, Pediatrics
Thomas Keefe Davis Instructor in Pediatrics, Pediatrics
Gene Layton Davis Jr, MBA, MD Assistant Professor of Clinical Radiology, Radiology
Jeffrey G Dawson, MD Associate Professor of Pediatrics, Pediatrics
Brian Keith Day, MD, PHD Instructor in Neurology, Neurology
Gabriela De Bruin Assistant Professor of Neurology, Neurology
Thomas M De Fer, MD Professor of Medicine, Internal Medicine
Lisa De Las Fuentes, MD Assistant Professor of Biostatistics, Division of Biostatistics
Lisa De Las Fuentes, MD Assistant Professor of Medicine, Internal Medicine
Vincent R De Mello, MD, MS Assistant Professor of Clinical Medicine, Internal Medicine
Charl Johan De Wet, MBCHB Associate Professor of Anesthesiology, Anesthesiology
Charl Johan De Wet, MBCHB Associate Professor of Surgery (Cardiothoracic Surgery), Surgery
Anne V Dean, MD Instructor in Clinical Medicine, Internal Medicine
Jon Todd Dean, MD Instructor in Clinical Psychiatry, Psychiatry
Michael R Debaun, MD, MPH, MS Adjunct Professor of Pediatrics, Pediatrics
Indranil Debnath, MD Assistant Professor of Otolaryngology, Otolaryngology
James Allen Declue, OD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Corey Renee Deeken, PHD Instructor in Surgery (General Surgery), Surgery
Jane E. Defalco, MD, MS Assistant Professor of Clinical Pediatrics, Pediatrics
John James Deguire, MD Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Farrokh Dehdashti, MD Professor of Radiology, Radiology
Louis P Dehner, MD Professor of Pathology and Immunology, Pathology and Immunology
Louis P Dehner, MD Professor of Pathology in Pediatrics, Pediatrics
Angeline Diane DeSantis, MD Assistant Professor of Medicine, Internal Medicine
Jennifer A. Delaney, MD Instructor in Clinical Medicine, Internal Medicine
James Albert Delmez, MD Professor of Medicine, Internal Medicine
Rowena Bayudan Delos Santos  Assistant Professor of Medicine, Internal Medicine
Bethany L Dement , MD Instructor in Medicine, Internal Medicine
Jennifer Lee Demertzis , MD Assistant Professor of Radiology, Radiology
Maureen Elaine Dempsey  Instructor in Clinical Pediatrics, Pediatrics
David G. DeNardo , PHD Assistant Professor of Medicine, Internal Medicine
David G. DeNardo , PHD Assistant Professor of Pathology and Immunology, Pathology and Immunology
Carmen S Dence , MS Research Associate Professor of Radiology, Radiology
Alex Eugene Denes , MD Associate Professor of Medicine, Internal Medicine
Alexander E Denes Siteman Cancer Center, Associate Professor of Medicine, Division of Oncology, Section of Medical Oncology, Washington University School of Medicine, 1973-1975: Intern and resident, medicine, Johns Hopkins University, Baltimore, 1975-1977: Epidemiologist, Centers for Disease Control and Prevention, Atlanta, 1977-1979: Fellow, hematology/oncology, Washington University, St. Louis, 1973: MD, University of Missouri, Columbia, Primary Specialty: Medical oncology, Board Certified; 1976: American Board of Internal Medicine
1979: American Board of Internal Medicine, Medical Oncology
1988: American Board of Internal Medicine, Geriatric Medicine
Leanne Michelle DePalma , MD Instructor in Pediatrics, Pediatrics
Colin Pieter Derdeyn , MD Professor of Neurological Surgery, Neurological Surgery
Colin Pieter Derdeyn , MD Professor of Neurology, Neurology
Colin Pieter Derdeyn , MD Professor of Radiology, Radiology
Alana C Desai , MD Assistant Professor of Surgery (Urologic Surgery), Surgery
Sunny Desai , MS Instructor in Clinical Medicine, Internal Medicine
Gerry Deschamps , MD, PHD Instructor in Clinical Pediatrics, Pediatrics
Anjali Desai Deshpande , MPH, PHD Research Assistant Professor of Medicine, Internal Medicine
George J Despotis , MD Associate Professor of Anesthesiology, Anesthesiology
George J Despotis , MD Associate Professor of Pathology and Immunology, Pathology and Immunology
Vladimir Novak Despotovic , MD Assistant Professor of Medicine (Pending Executive Faculty Approval), Internal Medicine
Robert H Deusinger , MS, PHD Associate Professor of Medicine, Internal Medicine
Robert H Deusinger , MS, PHD Associate Professor of Orthopaedic Surgery, Orthopaedic Surgery
Robert H Deusinger , MS, PHD Associate Professor of Physical Therapy, Program in Physical Therapy
Susan S. Deusinger , MA, PHD Executive Director of the Program in Physical Therapy, Program in Physical Therapy
Susan S. Deusinger , MA, PHD Professor of Neurology, Neurology
Susan S. Deusinger , MA, PHD Professor of Physical Therapy, Program in Physical Therapy
Michelle R Devera , MD Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Steven M Devine Siteman Cancer Center, Co-Director, Alvin J. Siteman Cancer Center Good Manufacturing Practice Facility, Assistant Professor of Medicine, Division of Oncology, Section of Bone Marrow Transplantation and Stem Cell Biology, Washington University School of Medicine, 1987-1990: Internship and Residency, Internal Medicine, Michael Reese Medical Center, Chicago, IL, 1990-1992: Medical Hematology/Oncology Fellowship, University of Chicago Hospital, Chicago, IL, 1992-1993: Medical Hematology/Oncology Fellowship, Emory Uni, 1983-1987: MD, University of Massachusetts Medical School, Worcester, MA, Primary Specialty: Bone Marrow Transplantation, Leukemia and Lymphoma, Board Certified; 1990: Diplomate, American Board of Internal Medicine
1993: Diplomate, American Board of Internal Medicine, Medical Oncology

526
Venkata Rao Devineni, MD Associate Professor of Clinical Radiation Oncology, Radiation Oncology

Paul Dewald, MD Assistant Professor of Clinical Psychiatry, Psychiatry

Neelendu Dey, MD Instructor in Medicine, Internal Medicine

Plaridel C Deza, MD Assistant Professor of Clinical Psychiatry (On Staff at Malcolm Bliss Mental Health Center), Psychiatry

Rajat Dhar, MD Assistant Professor of Neurology, Neurology

Sekhar Dharmarajan, MD Assistant Professor of Surgery (General Surgery), Surgery

Vikas Ramnath Dharnidharka, Associate Professor of Pediatrics, Pediatrics

Marc I Diamond, MD David Clayson Professor of Neurology, Neurology

Michael Diamond, MD, PhD Professor of Medicine, Internal Medicine

Michael Diamond, MD, PhD Professor of Molecular Microbiology, Molecular Microbiology

Michael Diamond, MD, PhD Professor of Pathology and Immunology, Pathology and Immunology

Aaron Diantonio, M Phil, MD, PhD Professor of Developmental Biology, Molecular Biology and Pharmacology

Judith A Dibble, MD Instructor in Clinical Medicine, Internal Medicine

Donald V. Dichsen, MD Instructor in Clinical Pediatrics, Pediatrics

Jeffrey M Dicke, MD Professor of Obstetrics and Gynecology, Obstetrics and Gynecology

Lizbeth H Didriksen, Assistant Professor of Clinical Pediatrics, Pediatrics

Brian K Dieckgraefe, MD, PhD Associate Professor of Medicine, Internal Medicine

Brian K Dieckgraefe Siteman Cancer Center, Assistant Professor of Medicine, Division of Gastroenterology, Washington University School of Medicine, 1988-1991: Resident, internal medicine, Washington University, St. Louis, 1991-1993: Clinical fellow, gastroenterology, Washington University, 1993-1996: Postdoctoral research fellow, medicine, Washington University, 1988: MD/PhD, molecular and cell biology, Washington University, St. Louis

Paul E Diehl, OD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

Kathryn M Diemer, MD Assistant Dean for Career Counseling, Associate Dean Curriculum

Kathryn M Diemer, MD Associate Professor of Medicine, Internal Medicine

James A Diestelhorst, MD Instructor in Clinical Medicine, Internal Medicine

Russell B Dieterich, MD Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology

Hans H Dietrich, MS, PhD Assistant Professor of Neurological Surgery, Neurological Surgery

Dennis J. Dietzen, PhD Associate Professor of Pathology and Immunology, Pathology and Immunology

Dennis J. Dietzen, PhD Associate Professor of Pediatrics, Pediatrics

Krikor T Dikranian, MD, PhD Associate Professor of Anatomy, Anatomy and Neurobiology

Krikor T Dikranian, MD, PhD Associate Professor of Physical Therapy, Program in Physical Therapy

Patrick A Dillon, MD Associate Professor of Pediatrics, Pediatrics

Patrick A Dillon, MD Associate Professor of Surgery (Pediatric Surgery), Surgery


1998: American Board of Surgery, Pediatric Surgery

Mary C Dinauer, MD, PhD Professor of Pathology and Immunology, Pathology and Immunology

Mary C Dinauer, MD, PhD Professor of Pediatrics, Pediatrics

Tulay F Dincer, MD Assistant Professor of Clinical Pediatrics, Pediatrics

Li Ding, PhD Assistant Professor of Medicine, Internal Medicine
John F Dipersio, MD, PHD Associate Professor of Pathology and Immunology, Pathology and Immunology
John F Dipersio, MD, PHD Associate Professor of Pediatrics, Pediatrics
John F Dipersio, MD, PHD Virginia E and Sam J Golman Professor of Medicine, Internal Medicine
John F DiPersio Siteman Cancer Center, Deputy Director, Alvin J. Siteman Cancer Center; Virginia E. and Samuel J. Golman Endowed Professor of Oncology; and Chief, Division of Oncology, Washington University School of Medicine, 1980-1984: Intern and resident, internal medicine, University of Texas Southwestern Medical Center, Dallas, 1984-1987: Fellow, hematology/oncology, University of California, Los Angeles, 1980: MD/PhD, microbiology, University of Rochester, Rochester, N.Y., Primary Specialty: Bone marrow transplantation and leukemia, Board Certified; 1984: American Board of Internal Medicine, Internal Medicine
1987: American Board of Internal Medicine, Medical Oncology
1988: American Board of Internal Medicine, Hematology
Michael N Diringer, MA, MD Professor of Anesthesiology, Anesthesiology
Michael N Diringer, MA, MD Professor of Neurological Surgery, Neurological Surgery
Michael N Diringer, MA, MD Professor of Neurology, Neurology
Michael N Diringer, MA, MD Professor of Occupational Therapy, Program in Occupational Therapy
Brianne Marie Disabato, MD Assistant Professor of Psychiatry, Psychiatry
Marilyn Disch, MD Instructor in Clinical Medicine, Internal Medicine
Richard M Divalerio, MD Instructor in Clinical Medicine, Internal Medicine
Abhinav Diwan, MD Assistant Professor of Medicine, Internal Medicine
Matthew Barrett Dobbs, MD Associate Professor of Orthopaedic Surgery, Orthopaedic Surgery
Deborah E Dobson, PHD Research Associate Professor of Molecular Microbiology, Molecular Microbiology
Martin A Docherty, MD Assistant Professor of Emergency Medicine in Medicine, Internal Medicine
Allan Doctor, MD Associate Professor of Biochemistry and Molecular Biophysics, Biochemistry and Molecular Biophysics
Allan Doctor, MD Associate Professor of Pediatrics, Pediatrics
Karen W Dodson, PHD Research Instructor in Molecular Microbiology, Molecular Microbiology
William Edwin Dodson, MD Associate Dean for Admissions, Medical School Student Affairs
William Edwin Dodson, MD Associate Dean for Continuing Medical Education, Continuing Medical Education
William Edwin Dodson, MD Associate Vice Chancellor for Admissions, Medical School Student Affairs
William Edwin Dodson, MD Associate Vice Chancellor for Continuing Medical Education, Continuing Medical Education
William Edwin Dodson, MD Professor of Neurology, Neurology
William Edwin Dodson, MD Professor of Pediatrics, Pediatrics
Irl Joseph Don, MD Associate Professor of Clinical Medicine, Internal Medicine
Steven Don, MD Associate Professor of Radiology, Radiology
James W Donnelly, MD Instructor in Clinical Medicine (Dermatology), Internal Medicine
Joseph M Dooley Jr, MD Associate Professor of Clinical Neurology, Neurology
David J. Dooling, BE, PHD Research Instructor in Genetics, Genome Center
Balraj Doray, PHD Research Instructor in Medicine, Internal Medicine
Alla Dorfman, MD Instructor in Clinical Pediatrics, Pediatrics
Gerald W. Dom II, MD Philip and Sima K Needleman Professor of Medicine, Internal Medicine
Catherine J Doty, Instructor in Clinical Pediatrics, Pediatrics
Charles H Dougherty, MD Professor of Clinical Pediatrics, Pediatrics
Joseph D Dougherty, PHD Assistant Professor of Genetics (Pending Executive Faculty Approval), Genetics

528
Matthew P Dougherty  Instructor in Clinical Pediatrics, Pediatrics
Joshua L Dowling  , MD Associate Professor of Neurological Surgery, Neurological Surgery
Joan Catherine Downey  , M PH, MD Assistant Dean, College of Arts & Sciences, College of Arts and Sciences
Joan Catherine Downey  , M PH, MD Assistant Professor of Pediatrics, Pediatrics
Maria Bernadette Majella Doyle  , MD Assistant Professor of Surgery (General Surgery), Surgery
M.B. Majella Doyle Siteman Cancer Center, Assistant Professor of Surgery, Division of General Surgery, Sections of Transplant Surgery and Pancreatic, Hepatobiliary and Gastrointestinal Surgery, Washington University School of Medicine, 1997-2005: Resident, surgery, Royal College of Surgeons in Ireland, 1999-2001: Clinical research fellow, National University of Ireland and Cork University Hospital, Cork, 2005-2006: Fellow, hepatobiliary, pancreatic and liver transplant surgery, Washington, 1996: MB BCh, Royal College of Surgeons in Ireland, Dublin, 2004: MD, University College Cork, Cork, Ireland, Primary Specialty: Liver transplantation, hepatobiliary surgery, pancreatic surgery

Bettina F. Drake  , M PH, PHD Assistant Professor of Surgery (General Surgery), Surgery
Bettina F. Drake Siteman Cancer Center, Assistant Professor of Surgery, Division of Public Health Sciences, Washington University School of Medicine, 2006-2009: Postdoctoral fellow, social epidemiology, Harvard University, Boston, 2003: MPH, epidemiology, University of North Texas Health Science Center, Fort Worth, 2006: PhD, epidemiology, University of South Carolina, Columbia

Andrew J. Drescher  , MD Assistant Professor of Otolaryngology, Otolaryngology
Anne Meredith Drewry  , MD Instructor in Anesthesiology, Anesthesiology
William H Dribben  , MD Assistant Professor of Emergency Medicine in Medicine, Internal Medicine
Alexander W Dromerick  , MD Adjunct Associate Professor of Neurology, Neurology
Alexander W Dromerick  , MD Adjunct Associate Professor of Occupational Therapy, Program in Occupational Therapy
Alexander W Dromerick  , MD Adjunct Associate Professor of Physical Therapy, Program in Physical Therapy

Norman Steven Druck  , MD Assistant Professor of Clinical Otolaryngology, Otolaryngology

Todd Druley  , MD, PHD Assistant Professor of Genetics, Genetics

Todd Druley  , MD, PHD Assistant Professor of Pediatrics, Pediatrics
Robert E Drzymala  , PHD Professor of Neurological Surgery, Neurological Surgery
Robert E Drzymala  , PHD Professor of Radiation Oncology, Radiation Oncology
Erik R Dubberke  , MD, MPH Assistant Professor of Medicine, Internal Medicine
James Matthew DuBois  , BFA, M PHIL, PHD Adjunct Professor of Medicine, Internal Medicine
Maria C Dumadag-Sabio  , MD Instructor in Clinical Medicine, Internal Medicine
William C Dunagan  , MD, MS Professor of Medicine, Internal Medicine
James R Duncan  , MD, PHD Associate Professor of Radiology, Radiology
Jennifer Gries Duncan  , MD Professor of Pathology and Immunology, Pathology and Immunology
Lakshmi Vijaya Dundoo  , MS Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Jennifer M Dunn  , MD Assistant Professor of Clinical Pediatrics, Pediatrics
Julia Passyn Dunn  , MD, MS Assistant Professor of Medicine, Internal Medicine
William Michael Dunne Jr., PHD Adjunct Professor of Pathology and Immunology, Pathology and Immunology

Stephen P Duntley  , MD Professor of Neurology, Neurology
Nicole Marie Durko  , DOST Instructor in Anesthesiology, Anesthesiology
Susan K. Dutcher  , PHD Professor of Cell Biology and Physiology, Cell Biology and Physiology
Susan K. Dutcher  , PHD Professor of Genetics, Genetics
Joseph W Eades, MD  Assistant Professor of Clinical Surgery (Plastic and Reconstructive Surgery), Surgery

William Charles Eades Jr, BEE  Research Assistant Professor of Medicine, Internal Medicine

J. Chris Eagon, MD, MS  Associate Professor of Surgery (General Surgery), Surgery


Gammon Marie Earhart, MS, PHD  Associate Professor of Neurobiology, Anatomy and Neurobiology

Gammon Marie Earhart, MS, PHD  Associate Professor of Neurology, Neurology

Gammon Marie Earhart, MS, PHD  Associate Professor of Physical Therapy, Program in Physical Therapy

James Benjamin Earl, MD  Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

Dayna S Early, MD  Professor of Medicine, Internal Medicine

Dayna S Early  Siteman Cancer Center, Professor of Medicine, Division of Gastroenterology, Washington University School of Medicine, 1990-1993: Resident, internal medicine, Vanderbilt University, Nashville, Tenn., 1993-1995: Fellow, gastroenterology, Vanderbilt University, 1990: MD, University of Missouri, Columbia, Primary Specialty: Colorectal cancer screening, endoscopic ultrasound, gastrointestinal cancers, Board Certified; 1993, 2003: American Board of Internal Medicine, Internal Medicine

1995, 2005: American Board of Internal Medicine, Gastroenterology

Adam C. Eaton, MD  Instructor in Clinical Pediatrics, Pediatrics

Royal J Eaton, MD  Instructor in Clinical Medicine, Internal Medicine

Stephen Ray Eaton  Instructor in Surgery (General Surgery) (Pending Dean's Approval), Surgery

Lori L Eberhart  Instructor in Clinical Pediatrics, Pediatrics

Timothy J Eberlein, MA, MD  Bixby Professor of Surgery (General Surgery), Surgery

Timothy J Eberlein, MA, MD  Director of The Alvin J. Siteman Cancer Center, Cancer Center

Timothy J Eberlein, MA, MD  Head of the Department of Surgery, Surgery

Timothy J Eberlein, MA, MD  Professor of Pathology and Immunology, Pathology and Immunology

Timothy J Eberlein, MA, MD  Spencer T. and Ann W. Olin Distinguished Professor, Cancer Center

Timothy J Eberlein  Siteman Cancer Center, Director, Alvin J. Siteman Cancer Center; Spencer T. and Ann W. Olin Distinguished Professor; and Bixby Professor and Chairman, Department of Surgery, Washington University School of Medicine, 1977-1979: Intern and resident, surgery, Peter Bent Brigham Hospital, Boston, 1979-1982: Research fellow, Surgery Branch, National Cancer Institute, Bethesda, Md., 1982-1984: Resident and chief resident, surgery, Brigham and Women's Hospital, Boston, 1985, 1977: MD, University of Pittsburgh, Primary Specialty: Breast cancer, Board Certified; 1987, 1995: American Board of Surgery, General Surgery

Charles S Eby, MD  Professor of Medicine, Internal Medicine

Charles S Eby  Professor of Pathology and Immunology, Pathology and Immunology

Brian T. Edelson, MD, PHD  Assistant Professor of Pathology and Immunology, Pathology and Immunology

Robert W Edmonds, MD  Assistant Professor Emeritus of Clinical Pediatrics, Pediatrics

Steven A. Edmundowicz, MD  Professor of Medicine, Internal Medicine

Charmaine E. Edwards, MD  Instructor in Clinical Medicine, Internal Medicine

Dorothy F Edwards, PHD  Adjunct Associate Professor of Neurology, Neurology

Dorothy F Edwards, PHD  Adjunct Associate Professor of Occupational Therapy, Program in Occupational Therapy

James Earl Edwards, MD  Assistant Professor of Clinical Psychiatry (Child Psychiatry), Psychiatry

John R. Edwards, PHD  Assistant Professor of Medicine, Internal Medicine

John R. Edwards  Siteman Cancer Center, Assistant Professor of Medicine, Center for Pharmacogenomics, Washington University School of Medicine, 2003-2006: Postdoctoral researcher, Columbia University, New York, 2001: MS, chemical engineering and applied chemistry, Columbia University, New York, 2003: PhD, chemical engineering (genomics), Columbia University
Tatiana Efimova, MS, PHD Assistant Professor of Medicine (Dermatology), Internal Medicine

Tatiana Efimova Siteman Cancer Center, Assistant Professor of Medicine, Division of Dermatology, Washington University School of Medicine, 1987-1992: Research fellow, Institute of Biological Physics, Russian Academy of Sciences, Pushchino, 2000-2003: Postdoctoral fellow, Case Western Reserve University, Cleveland, 1987: MS, physics, Moscow Institute of Physics and Technology, 2000: PhD, cell physiology, Case Western Reserve University, Cleveland

Takeshi Egawa, MD, PHD Assistant Professor of Pathology and Immunology, Pathology and Immunology

Russell E Eggbrecht, MD Associate Professor of Clinical Medicine, Internal Medicine

Pirooz Eghtesady, D SC, MD, MS Professor of Pediatrics, Pediatrics

Pirooz Eghtesady, D SC, MD, MS Professor of Surgery (Cardiothoracic Surgery), Surgery

Tamara Kay Ehlert, MD Instructor in Clinical Otolaryngology, Otolaryngology

Carl F Ehrlich, MD Assistant Professor of Otolaryngology, Otolaryngology

Ali A Ehsani, MD Professor of Medicine, Internal Medicine

Zamir Eidelman, MD Associate Professor of Clinical Medicine, Internal Medicine

John Robert Eigenbrodt, OD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

Arthur Z Eisen, MD, MS Professor of Medicine (Dermatology), Internal Medicine

Seth A Eisen, MD, MS Adjunct Professor of Medicine, Internal Medicine

Seth A Eisen Siteman Cancer Center, Professor of Medicine, Division of Rheumatology, Washington University School of Medicine, 1966: MD, Washington University, St. Louis, 1989: M Sc, epidemiology, Harvard Medical School, Boston, Board Certified: 1975: American Board of Internal Medicine, Internal Medicine

David Louis Eisenberg, M PH, MD Assistant Professor of Obstetrics and Gynecology, Obstetrics and Gynecology

Lawrence N Eisenman, MD, PHD Associate Professor of Neurology, Neurology

Linda G Eissenberg, PHD Research Instructor in Medicine, Internal Medicine

Josiah O. Ekunno, MD Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology

Lamice R. El-Kholy, MS Instructor in Clinical Medicine, Internal Medicine

Samir Khattab El-Mofty, DDENT, DDENT1, MS, PHD Associate Professor of Otolaryngology, Otolaryngology

Samir Khattab El-Mofty, DDENT, DDENT1, MS, PHD Associate Professor of Pathology and Immunology, Pathology and Immunology

Samir K El-Mofty Siteman Cancer Center, Associate Professor of Pathology and Immunology, Division of Anatomic and Molecular Pathology, Washington University School of Medicine, 1961: DDS, Cairo University, Cairo, Egypt, 1966: MS, Oral surgery, University of Pennsylvania, Philadelphia, 1976: PhD, Pathology, Temple University, Philadelphia, 1987: DMD, Washington University St. Louis, Primary Specialty: Head and neck pathology, Board Certified: American Board of Oral and Maxillofacial Surgery

Charles David Eldridge Instructor in Pediatrics (Pending Dean’s Approval), Pediatrics

John Ellena, MD Associate Professor of Clinical Medicine, Internal Medicine

Thomas E Ellenberger, DVM, PHD Chairman of the Executive Council of the Division of Biology and Biomedical Sciences, Division of Biology and Biomedical Sciences

Thomas E Ellenberger, DVM, PHD Professor of Biochemistry and Molecular Biophysics, Biochemistry and Molecular Biophysics


Alysa G. Ellis, MD Instructor in Pediatrics, Pediatrics

Matthew James Ellis, MBBCH, PHD Professor of Medicine, Internal Medicine

Charlene Ann Ellsworth, MD, PHD Instructor in Clinical Medicine, Internal Medicine

Mohamed Elsafi Assistant Professor of Clinical Otolaryngology, Otolaryngology

Mohamed Elsafi Siteman Cancer Center, Assistant Professor of Otolaryngology, Division of Head and Neck Surgery, Washington University School of Medicine, 2006-2009: Resident, prosthodontics, University of Florida, Gainesville, 2009-2010: Fellow,
maxillofacial prosthetics and dental oncology, MD Anderson Cancer Center, Houston, 2003: DDS, University of Southern California, Los Angeles, 2009: MS, dental sciences, University of Florida, Gainesville, Primary Specialty: Dental medical oncology, facial prosthetics, dental reconstruction, speech rehabilitation, radiation stents, Board Certified.: 2010: American Board of Prosthodontics

Elliot L Elson  , PHD Adjunct Professor of Physics, Department of Physics
Elliot L Elson  , PHD Alumni Endowed Professor of Biochemistry and Molecular Biophysics, Biochemistry and Molecular Biophysics
Elliot L Elson  , PHD Professor of Biomedical Engineering, Department of Biomedical Engineering
Alexis M Elward  , MD, MPH Associate Professor of Pediatrics, Pediatrics
Jill Elizabeth Elwing  , MD Assistant Professor of Medicine, Internal Medicine
Amanda R. Emke  , MD Instructor in Pediatrics, Pediatrics
Daniel Emmert  Assistant Professor of Anesthesiology, Anesthesiology
Daniel Emmert  Assistant Professor of Surgery (Cardiothoracic Surgery), Surgery
Nicholas Earl Engelbrecht  Assistant Professor of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Sarah K England  , PHD Professor of Cell Biology and Physiology, Cell Biology and Physiology
Sarah K England  , PHD Professor of Obstetrics and Gynecology, Obstetrics and Gynecology
Jack R. Engsberg  , MS, MS1, PHD Professor of Neurological Surgery, Neurological Surgery
Jack R. Engsberg  , MS, MS1, PHD Professor of Occupational Therapy, Program in Occupational Therapy
Jack R. Engsberg  , MS, MS1, PHD Professor of Orthopaedic Surgery, Orthopaedic Surgery
James Michael Epstein  , MD Instructor in Clinical Medicine, Internal Medicine
Jay S Epstein  , MD, MS Professor of Clinical Pediatrics, Pediatrics
Lawrence W Ernst  , OD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Christopher R. Erwin  , MS, PHD Research Associate Professor of Surgery (Pediatric Surgery), Surgery
Juan Escandon  , MD Assistant Professor of Clinical Neurology, Neurology
Diane M Eschmann  , MD Instructor in Clinical Pediatrics, Pediatrics
Jennifer Ess  Instructor in Clinical Pediatrics, Pediatrics
Laura Ann Esswein  , MD Instructor in Clinical Pediatrics, Pediatrics
Michele Marie Estabrook  , MA, MD Professor of Pediatrics, Pediatrics
Jacqueline Esthappan  , PHD Associate Professor of Radiation Oncology, Radiation Oncology
Neil A Ettinger  , MD Assistant Professor of Clinical Medicine, Internal Medicine
Bradley A Evanoff  , M PH, MD Assistant Dean for Clinical and Translational Research, Assoc. Dean for Research
Bradley A Evanoff  , M PH, MD Professor of Occupational Therapy, Program in Occupational Therapy
Bradley A Evanoff  , M PH, MD Richard A and Elizabeth Henby Sutter Professor of Occupational, Industrial, and Environmental Medicine in Medicine, Internal Medicine
1994: American Board of Preventive Medicine, Occupational and Environmental Medicine
Alex S Evers  , MD Head of the Department of Anesthesiology, Anesthesiology
Alex S Evers  , MD Henry E Mallinckrodt Professor of Anesthesiology, Anesthesiology
Alex S Evers  , MD Professor of Developmental Biology, Molecular Biology and Pharmacology
Alex S Evers  , MD Professor of Medicine, Internal Medicine
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<tr>
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<td>Thomas W Ferkol</td>
<td>MD Alexis Hartmann MD Professor of Pediatrics, Pediatrics</td>
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<td>MD Professor of Cell Biology and Physiology, Cell Biology and Physiology</td>
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<td>Isabel Fernandez-Holtzman</td>
<td>Instructor in Clinical Pediatrics, Pediatrics</td>
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<td>MD Instructor in Clinical Otolaryngology, Otolaryngology</td>
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<td>Herman L Ferrell</td>
<td>MD Instructor in Clinical Medicine, Internal Medicine</td>
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<td>Beverly J. Field</td>
<td>B MUS, M MUS, PHD Associate Professor of Anesthesiology, Anesthesiology</td>
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<td>MD Assistant Professor of Surgery (General Surgery), Surgery</td>
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<td>MD Taylor Family and Ralph V. Claman, M.D. Professor of Surgery (Urologic Surgery), Surgery</td>
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<td>Debra Fink</td>
<td>DDENT, MS Instructor in Clinical Otolaryngology (DMD), Otolaryngology</td>
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<td>OD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences</td>
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<td>Adjunct Research Associate Professor of Otolaryngology, Otolaryngology</td>
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<td>Jill B Firszt</td>
<td>MS, PHD Associate Professor of Audiology and Communication Sciences, Program in Audiology and Communication Sciences</td>
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<td>Keith C Fischer</td>
<td>MD Associate Professor of Radiology, Radiology</td>
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<td>Peter Uwe Fischer</td>
<td>MS, PHD Research Associate Professor of Medicine, Internal Medicine</td>
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<td>Marsha Nicole Fisher</td>
<td>MD Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology</td>
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<td>Norman Fishman</td>
<td>MD Assistant Professor of Clinical Medicine, Internal Medicine</td>
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<tr>
<td>Anna M Fitz-James</td>
<td>M PH, MD Assistant Professor of Clinical Pediatrics, Pediatrics</td>
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<tr>
<td>Sean C. Fitzmaurice</td>
<td>MD Instructor in Emergency Medicine in Medicine, Internal Medicine</td>
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<td>Susan M Fitzpatrick</td>
<td>PhD Adjunct Associate Professor of Neurobiology, Anatomy and Neurobiology</td>
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<td>Jaquelyn F Fleckenstein</td>
<td>MD Professor of Medicine, Internal Medicine</td>
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<td>Timothy Peter Fleming</td>
<td>PHD Research Professor of Surgery (General Surgery), Surgery</td>
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<td>James W Fleshman Jr</td>
<td>MD Professor of Surgery (General Surgery), Surgery</td>
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<td>Edward B Fliesher</td>
<td>MD Assistant Professor of Clinical Pediatrics, Pediatrics</td>
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<td>Julaine Marie Florence</td>
<td>DPT, MS Research Professor of Neurology, Neurology</td>
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</tbody>
</table>
Julaine Marie Florence, DPT, MS Research Professor of Physical Therapy, Program in Physical Therapy
Cynthia Florin, MD Instructor in Clinical Psychiatry, Psychiatry
Justin Douglas Floyd, DOST Assistant Professor of Clinical Medicine, Internal Medicine
Gregory DeWitt Folkert, MD Instructor in Medicine in Emergency Medicine, Internal Medicine
Emily Fondahn, MD Instructor in Medicine, Internal Medicine
Frank Donald Fontana, OD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Luigi Fontana, MD, PHD Research Associate Professor of Medicine, Internal Medicine
Andria L Ford, MD Assistant Professor of Neurology, Neurology
Shanon Alex Forseter Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Kathryn Fowler, MD Instructor in Radiology, Radiology
Ida K Fox, MD Assistant Professor of Surgery (Plastic and Reconstructive Surgery), Surgery
Seymour Fox, MS, PHD Instructor in Radiation Oncology, Radiation Oncology
2010: American Board of Plastic Surgery, Hand Surgery
Myrto Frangos, MD Instructor in Clinical Pediatrics, Pediatrics
Bennett David Frank, MD, PHD Instructor in Clinical Neurology, Neurology
Bruce S Frank, MD Assistant Professor of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Victoria J Fraser, MD Busch Professor of Medicine, Internal Medicine
Victoria J Fraser, MD Head of the Department of Internal Medicine, Internal Medicine
John Lawrence Frater, MD Assistant Professor of Pathology and Immunology, Pathology and Immunology
William A Frazier III, PHD Professor of Biochemistry and Molecular Biophysics, Biochemistry and Molecular Biophysics
William A Frazier III, PHD Professor of Biomedical Engineering, Department of Biomedical Engineering
William A Frazier III, PHD Professor of Cell Biology and Physiology, Cell Biology and Physiology
Kenneth E Freedland, MA, PHD Professor of Psychiatry, Psychiatry
Kenneth E Freedland, MA, PHD Professor of Psychology, Department of Psychology
Bradley D. Freeman, MD Professor of Surgery (General Surgery), Surgery
James Matthew Freer, MD Assistant Professor of Medicine, Internal Medicine
Daved H Fremont, PHD Associate Professor of Biochemistry and Molecular Biophysics, Biochemistry and Molecular Biophysics
Daved H Fremont, PHD Associate Professor of Pathology and Immunology, Pathology and Immunology
Anthony Raymond French, MD, MS, PHD Assistant Professor of Pathology and Immunology, Pathology and Immunology
Anthony Raymond French, MD, MS, PHD Assistant Professor of Pediatrics, Pediatrics
Deborah Frenchie, MD Instructor in Clinical Medicine, Internal Medicine
Theresa Marie Frey, MD Instructor in Pediatrics, Pediatrics
Carl Frieden, PHD Professor of Biochemistry and Molecular Biophysics, Biochemistry and Molecular Biophysics
David Alan Friedman, MD Instructor in Anesthesiology, Anesthesiology
Ira J Friedman, MD Assistant Professor of Clinical Pediatrics, Pediatrics
Darrin Friesen, MD Instructor in Clinical Psychiatry, Psychiatry
Stuart Howard Friess, MD Assistant Professor of Pediatrics (Pending Executive Faculty Approval), Pediatrics
Stephanie Ann Fritz, MD, MS Assistant Professor of Pediatrics, Pediatrics
Brian R. Froelke, MD Assistant Professor of Emergency Medicine in Medicine, Internal Medicine
Robert P. Fucetola, MA, PHD Adjunct Assistant Professor of Psychology, Department of Psychology
Robert P. Fucetola, MA, PHD Associate Professor of Neurology, Neurology
Anja G. Fuchs, MS, PHD Research Instructor in Pathology and Immunology, Pathology and Immunology
Brian M Fuller, MD Assistant Professor of Anesthesiology, Anesthesiology
Brian M Fuller, MD Assistant Professor of Anesthesiology, Internal Medicine
Michael Paul Fuller, MD Associate Professor of Clinical Medicine, Internal Medicine
Robert S. Fulton, MS Research Instructor in Genetics, Genome Center
Suzanne Furesz Instructor in Clinical Medicine, Internal Medicine
Mokhtar H Gado, MBBCH, MS Professor of Neurological Surgery, Neurological Surgery
Mokhtar H Gado, MBBCH, MS Professor of Radiology, Radiology
Michael S Gaffrey, PHD Instructor in Psychiatry, Psychiatry
Brian F Gage, MD, MS Professor of Medicine, Internal Medicine
Carrie S Gaines, OD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Daniel Gaitan, MD Associate Professor of Clinical Medicine, Internal Medicine
Andrew E Galakatos, MD Professor of Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Leesa Galatz, MD Associate Professor of Orthopaedic Surgery, Orthopaedic Surgery
Eric A Galburt, PHD Assistant Professor of Biochemistry and Molecular Biophysics, Biochemistry and Molecular Biophysics
Arthur H Gale, MD Associate Professor of Clinical Medicine, Internal Medicine
John P Galgani Jr, MD Associate Professor of Clinical Pediatrics, Pediatrics
Ira Clyde Gall, MD Professor Emeritus of Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Roberto Galletto, MS, PHD Assistant Professor of Biochemistry and Molecular Biophysics, Biochemistry and Molecular Biophysics
Jacob M Gandimayr, MD Instructor in Medicine, Internal Medicine
Maria Virginia Ganninger Instructor in Clinical Pediatrics, Pediatrics
Lawrence A Gans, MD Assistant Professor of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Feng Gao, PHD Research Assistant Professor of Biostatistics, Division of Biostatistics
Feng Gao, PHD Research Assistant Professor of Medicine, Internal Medicine
Joel Richard Garbow, PHD Research Associate Professor of Radiology, Radiology
Joel R Garbow Siteman Cancer Center, Research Associate Professor of Radiology, Division of Radiological Sciences, Mallinckrodt Institute of Radiology, Washington University School of Medicine, 1983-1984: Postdoctoral fellow, Monsanto, St. Louis, 1985-1995: Staff scientist, Monsanto, 1995-1999: Science fellow, Monsanto, 1983: PhD, chemistry, University of California, Berkeley
Jane M. Garbutt, MBCHB, MHS Research Associate Professor of Medicine, Internal Medicine
Jane M. Garbutt, MBCHB, MHS Research Associate Professor of Pediatrics, Pediatrics
Rafael Samuel Garcia-Cortes, MD Instructor in Medicine, Internal Medicine
John A Garcia, MBA, MD Instructor in Clinical Medicine, Internal Medicine
Jose L Garcia, MS Assistant Professor of Radiation Oncology, Radiation Oncology
Kathleen M Garcia, MD Assistant Professor of Medicine, Internal Medicine
Tessa D Gardner, MD Assistant Professor of Clinical Pediatrics, Pediatrics
Bernard T Garfinkel, MD Professor of Clinical Medicine, Internal Medicine
Nick S. Garg Instructor in Clinical Psychiatry (Child Psychiatry), Psychiatry
Marcie Epstein Garland Instructor in Psychiatry, Psychiatry
Stephen M Garnett, OD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Heather Vallhonrat Garrett, MD Assistant Professor of Radiology, Radiology
Jacquelyn B Garrett, MD Instructor in Clinical Medicine (Dermatology), Internal Medicine
Caryn Garriga Assistant Professor of Clinical Pediatrics, Pediatrics
Francisco J Garriga, MD Instructor in Clinical Medicine, Internal Medicine
Charles F Garvin, MD Instructor in Clinical Radiology, Radiology
Sarah Kathryn Garwood, MD Instructor in Pediatrics, Pediatrics
Karen J Garzia Instructor in Clinical Pediatrics, Pediatrics
Dawn Lee Garzon Adjunct Instructor in Psychiatry, Psychiatry
Fred W Gaskin, MD Associate Professor of Clinical Psychiatry, Psychiatry
Felicitas Z Gatachalian, MD Instructor in Clinical Medicine, Internal Medicine
Joseph H Gatewood, MD Instructor in Emergency Medicine in Medicine, Internal Medicine
Joseph P. Gaut, MD, PHD Instructor in Pathology and Immunology, Pathology and Immunology
Narasimhan Gautam, MS, PHD Professor of Anesthesiology, Anesthesiology
Narasimhan Gautam, MS, PHD Professor of Genetics, Genetics
Karen Marie Gauvain, MD Assistant Professor of Pediatrics (Pending Executive Faculty Approval), Pediatrics
Hiram Alberto Gay, MD Assistant Professor of Radiation Oncology, Radiation Oncology
William A Gay, MD Professor of Surgery (Cardiothoracic Surgery), Surgery
Avihu Gazit, MD Assistant Professor of Pediatrics, Pediatrics
William M Gee, MD Instructor in Clinical Medicine, Internal Medicine
Richard A Geisman, MD Instructor in Clinical Medicine, Internal Medicine
Judith Rebecca Gelber, DPT Instructor in Neurology, Neurology
Judith Rebecca Gelber, DPT Instructor in Physical Therapy, Program in Physical Therapy
Richard H Gelberman, MD Fred C Reynolds Professor of Orthopaedic Surgery, Orthopaedic Surgery
Richard H Gelberman, MD Head of the Department of Orthopaedic Surgery, Orthopaedic Surgery
Elliot Field Gellman, MD Professor of Pediatrics, Pediatrics
Andrew E. Gelman, PHD Assistant Professor of Pathology and Immunology, Pathology and Immunology
Andrew E. Gelman, PHD Assistant Professor of Surgery (Cardiothoracic Surgery), Surgery
Edward M Geltman, MD Assistant Professor of Radiology, Radiology
Edward M Geltman, MD Professor of Medicine, Internal Medicine
Patrick J Geraghty, MD Associate Professor of Surgery (General Surgery), Surgery
Robert W Gereau, PHD Professor of Anesthesiology, Anesthesiology
Robert W Gereau, PHD Professor of Neurobiology, Anatomy and Neurobiology
James A Gerst, MD Professor of Clinical Pediatrics, Pediatrics
Anne Elizabeth Getz, MD Assistant Professor of Otolaryngology, Otolaryngology
N. Rex Ghormley, OD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Nupur Ghoshal, MD, PHD Assistant Professor of Neurology, Neurology
Randall K. Gibb  , MD Adjunct Associate Professor of Obstetrics and Gynecology, Obstetrics and Gynecology
Jeffrey M. Gidday  , PHD Associate Professor of Cell Biology and Physiology, Cell Biology and Physiology
Jeffrey M. Gidday  , PHD Associate Professor of Neurological Surgery, Neurological Surgery
Jeffrey M. Gidday  , PHD Associate Professor of Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Stephen James Giddings  , MD, PHD Associate Professor of Medicine, Internal Medicine
David S Gierada  , MD Professor of Radiology, Radiology
Susan Gilfillan  , PHD Research Assistant Professor of Pathology and Immunology, Pathology and Immunology
William Ewald Gillanders  , MD, MS, MS1 Professor of Surgery (General Surgery), Surgery
William Scott Gilmore  , MD Assistant Professor of Emergency Medicine in Medicine, Internal Medicine
Louis Arnold Gilula  , MD Professor of Orthopaedic Surgery, Orthopaedic Surgery
Louis Arnold Gilula  , MD Professor of Radiology, Radiology
Louis Arnold Gilula  , MD Professor of Surgery (Plastic and Reconstructive Surgery), Surgery
Louis A Gilula Siteman Cancer Center, Professor of Radiology and Chief of Musculoskeletal Radiology, Mallinckrodt Institute of Radiology, Washington University School of Medicine, 1973: Resident, radiology, St. Louis City Hospital, 1967: MD, University of Illinois College of Medicine, Chicago, Primary Specialty: Vertebroplasty, musculoskeletal radiology, Board Certified:, 1973: American Board of Radiology
Margo Renee Girardi  , MD Instructor in Medicine, Internal Medicine
Luis Giuffra  , MD, MS, PHD Associate Professor of Clinical Psychiatry, Psychiatry
Harvey S Glazer  , MD Professor of Radiology, Radiology
Harvey S Glazer Siteman Cancer Center, Professor of Radiology, Division of Diagnostic Radiology, Section of Chest Radiology, Mallinckrodt Institute of Radiology, Washington University School of Medicine, 1976-1981: Resident, radiology, Washington University, St. Louis, 1981: Fellow, diagnostic radiology, Washington University, 1976: MD, Washington University, St. Louis, Primary Specialty: Diagnostic radiology, chest radiology, Board Certified:, 1981: American Board of Radiology
John F Gleeson Jr Instructor in Clinical Pediatrics, Pediatrics
Marye J Gleva  , MD Associate Professor of Medicine, Internal Medicine
Anne L Glowinski  , MD, MS Professor of Psychiatry (Child Psychiatry), Psychiatry
Dehra Anne Glueck  , MD Assistant Professor of Psychiatry (Child Psychiatry), Psychiatry
Alison Goate  , PHD Professor of Genetics, Genetics
Alison Goate  , PHD Professor of Genetics in Psychiatry, Psychiatry
Alison Goate  , PHD Professor of Neurology, Neurology
Thomas James Gobilsch  , MD Assistant Professor of Anesthesiology, Anesthesiology
Hemant Godara  , MD Instructor in Medicine, Internal Medicine
Sreekrishna M Goddu  , MS, PHD Associate Professor of Radiation Oncology, Radiation Oncology
Joel Goebel  , MD Professor of Otolaryngology, Otolaryngology
Joel Goebel  , MD Vice Chairman of Otolaryngology, Otolaryngology
Simon P Goedegebuure  , MA, PHD Research Associate Professor of Surgery (General Surgery), Surgery
Simon P Goedegebuure Siteman Cancer Center, Assistant Professor of Surgery, Section of General Surgery, Division of Endocrine and Oncologic Surgery, Washington University School of Medicine
George W Gokel  , PHD Adjunct Professor of Molecular Biology and Pharmacology, Molecular Biology and Pharmacology
Andrew S Gold  , MD Instructor in Clinical Medicine, Internal Medicine
Anne Carol Goldberg  , MD Associate Professor of Medicine, Internal Medicine
Daniel E Goldberg  , MD, PHD Howard Hughes Medical Institute Investigator in Medicine, Internal Medicine
Daniel E Goldberg  , MD, PHD Professor of Medicine, Internal Medicine
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<tr>
<td>Thomas J Graetz</td>
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<td>Associate Dean for Faculty Affairs, Assoc Dean Faculty Affairs</td>
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<tr>
<td>Diana Lee Gray, MD</td>
<td>Professor of Engineering, Engineering and Policy</td>
</tr>
<tr>
<td>Diana Lee Gray, MD</td>
<td>Professor of Obstetrics and Gynecology, Obstetrics and Gynecology</td>
</tr>
<tr>
<td>Diana Lee Gray, MD</td>
<td>Professor of Radiology, Radiology</td>
</tr>
<tr>
<td>Paul A. Gray, PHD</td>
<td>Assistant Professor of Neurobiology, Anatomy and Neurobiology</td>
</tr>
<tr>
<td>Jonathan M Green, MD</td>
<td>Associate Dean for Human Studies, Human Studies Committee</td>
</tr>
<tr>
<td>Jonathan M Green, MD</td>
<td>Professor of Medicine, Internal Medicine</td>
</tr>
<tr>
<td>Kenneth O Green, MD</td>
<td>Assistant Professor of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences</td>
</tr>
<tr>
<td>Olga Leonidovna Green, MS, PHD</td>
<td>Instructor in Radiation Oncology, Radiation Oncology</td>
</tr>
<tr>
<td>Marshall B Greenman, MD</td>
<td>Associate Professor of Clinical Pediatrics, Pediatrics</td>
</tr>
<tr>
<td>Aaron Greenspan</td>
<td>Instructor in Clinical Medicine, Internal Medicine</td>
</tr>
<tr>
<td>Mark H Gregory, MD</td>
<td>Instructor in Clinical Medicine, Internal Medicine</td>
</tr>
<tr>
<td>Kevin Williame Greuloch, MD</td>
<td>Instructor in Ophthalmology and Visual Science, Ophthalmology and Visual Sciences</td>
</tr>
<tr>
<td>Richard T Griffey Jr, M PH, MD</td>
<td>Assistant Professor of Emergency Medicine in Medicine, Internal Medicine</td>
</tr>
<tr>
<td>Malachi Griffith, PHD</td>
<td>Research Instructor in Genetics, Genome Center</td>
</tr>
<tr>
<td>Obi Lee Griffith, PHD</td>
<td>Research Assistant Professor of Medicine (Pending Executive Faculty Approval), Internal Medicine</td>
</tr>
<tr>
<td>Perry W Grigsby, MBA, MD, MS</td>
<td>Professor of Obstetrics and Gynecology, Obstetrics and Gynecology</td>
</tr>
<tr>
<td>Perry W Grigsby, MBA, MD, MS</td>
<td>Professor of Radiation Oncology, Radiation Oncology</td>
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<td>Perry W Grigsby, MBA, MD, MS</td>
<td>Professor of Radiology, Radiology</td>
</tr>
<tr>
<td>Linda Elizabeth Grismer, MD</td>
<td>Assistant Professor of Medicine, Internal Medicine</td>
</tr>
<tr>
<td>Russell J.I. Groener, MBCHB</td>
<td>Assistant Professor of Anesthesiology, Anesthesiology</td>
</tr>
<tr>
<td>Scott D. Groesch, MD</td>
<td>Instructor in Clinical Medicine, Internal Medicine</td>
</tr>
<tr>
<td>John R Groll, MD</td>
<td>Instructor in Clinical Medicine, Internal Medicine</td>
</tr>
<tr>
<td>Steven J Grondalski, OD</td>
<td>Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences</td>
</tr>
<tr>
<td>Ann Marie Gronowski, MS, PHD</td>
<td>Professor of Obstetrics and Gynecology, Obstetrics and Gynecology</td>
</tr>
<tr>
<td>Ann Marie Gronowski, MS, PHD</td>
<td>Professor of Pathology and Immunology, Pathology and Immunology</td>
</tr>
</tbody>
</table>
Robert John Gropler, MD  Associate Professor of Biomedical Engineering, Department of Biomedical Engineering
Robert John Gropler, MD  Associate Professor of Medicine, Internal Medicine
Robert John Gropler, MD  Professor of Radiology, Radiology
Richard Warren Gross, AB, MD, PHD  Professor of Chemistry, Department of Chemistry
Richard Warren Gross, AB, MD, PHD  Professor of Developmental Biology, Molecular Biology and Pharmacology
Richard Warren Gross, AB, MD, PHD  Professor of Medicine, Internal Medicine
Brenda Jean Grossman, MD, MS  Associate Professor of Pathology and Immunology, Pathology and Immunology
Robert Lee Grubb III, MD  Assistant Professor of Surgery (Urologic Surgery), Surgery
Robert L Grubb Jr, MD  Professor of Neurological Surgery, Neurological Surgery
Robert L Grubb Jr, MD  Professor of Radiology, Radiology
Richard Grucza, MS, PHD  Assistant Professor of Psychiatry, Psychiatry
Royal Gene Grueneich, PHD  Assistant Professor of Clinical Neurology, Neurology
Brian Anthony Grus, MD  Instructor in Clinical Medicine, Internal Medicine
Chi Gu, MS, PHD  Associate Professor of Biostatistics, Division of Biostatistics
Chi Gu, MS, PHD  Associate Professor of Genetics, Genetics
Anthony Herbert Guarino, MA, MD  Associate Professor of Anesthesiology, Anesthesiology
Nancy Z Guggenheim, MD  Instructor in Clinical Medicine, Internal Medicine
C. Richard Gulick, MD  Assistant Professor of Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Guner B Gulmen, MD, PHD  Assistant Professor of Clinical Medicine, Internal Medicine
Vyjanthanath R. Gunasingham, MD  Instructor in Clinical Medicine, Internal Medicine
Mark Cobb Gunby, DOST  Assistant Professor of Clinical Medicine, Internal Medicine
Joseph Donald Gunn, MD  Associate Professor of Pediatrics, Pediatrics
Jun Guo, MS, PHD  Research Assistant Professor of Surgery (Pediatric Surgery), Surgery
Punita Gupta, MD, MPH  Instructor in Radiology, Radiology
Santosh K Gupta, DC  Assistant Professor of Clinical Pediatrics, Pediatrics
Christina A. Gurnett, MD, PHD  Assistant Professor of Pediatrics, Pediatrics
Christina A. Gurnett, MD, PHD  Associate Professor of Neurology, Neurology
Christina A. Gurnett, MD, PHD  Associate Professor of Orthopaedic Surgery, Orthopaedic Surgery
Maria Gurrieri, DIP, MD  Instructor in Clinical Medicine, Internal Medicine
Christine Hilleary Gustus  Instructor in Audiology and Communication Sciences, Program in Audiology and Communication Sciences
Alexandra Gutierrez, M PH, MD  Assistant Professor of Medicine, Internal Medicine
Fernando R Gutierrez, MD  Professor of Radiology, Radiology
David H Gutmann, MD, MS, PHD Donald O. Schnuck Family Professor of Neurology, Neurology
David H Gutmann, MD, MS, PHD Professor of Genetics, Genetics
David H Gutmann, MD, MS, PHD Professor of Neurological Surgery, Neurological Surgery
David H Gutmann, MD, MS, PHD Professor of Pediatrics, Pediatrics
Chandra Prakash Gyawali, MD Professor of Medicine, Internal Medicine
Ramsey R Hachem, MD Associate Professor of Medicine, Internal Medicine
Hicham Hachem Baydoun, MS, PHD Research Instructor in Medicine, Internal Medicine
Brian P Hackett, MD, PHD Professor of Pediatrics, Pediatrics
Matthew D Hageman, MD Instructor in Clinical Medicine, Internal Medicine
Andrea Ruth Hagemann, MD Assistant Professor of Obstetrics and Gynecology, Obstetrics and Gynecology
Ashfaq H Hakim, MBBS, MD Instructor in Clinical Medicine, Internal Medicine
Sarah Eliza Halcomb, MD Assistant Professor of Emergency Medicine in Medicine, Internal Medicine
Lannis E Hall-Daniels, M PH, MD Assistant Professor of Clinical Radiation Oncology, Radiation Oncology
Angela Marie Hall, PHD Research Instructor in Medicine, Internal Medicine
Bruce Lee Hall, MBA, MD, PHD Fellow in the Center for Health Policy, Center for the Study of Health Policy
Bruce Lee Hall, MBA, MD, PHD Professor of Health Care Management (Olin School of Business), John M. Olin School of Business
Bruce Lee Hall, MBA, MD, PHD Professor of Surgery (General Surgery), Surgery
Kathleen Hall, PHD Professor of Biochemistry and Molecular Biophysics, Biochemistry and Molecular Biophysics
Dennis E Hallahan, MD Elizabeth H and James S McDonnell III Distinguished Professor of Medicine, Radiation Oncology
Dennis E Hallahan, MD Head of the Department of Radiation Oncology, Radiation Oncology
Dennis E Hallahan, MD Professor of Cell Biology and Physiology, Cell Biology and Physiology
Dennis E Hallahan, MD Professor of Molecular Microbiology, Molecular Microbiology
Dennis E Hallahan, MD Professor of Pathology and Immunology, Pathology and Immunology
Dennis E Hallahan, MD Professor of Radiation Oncology, Radiation Oncology
Mark E. Halstead, MD Assistant Professor of Orthopaedic Surgery, Orthopaedic Surgery
Mark E. Halstead, MD Assistant Professor of Pediatrics, Pediatrics
Kim P Hamlin, MD Assistant Professor of Pediatrics, Pediatrics
Stephanie M Hammer, MD Instructor in Clinical Medicine, Internal Medicine
Marc Randall Hammerman, MD Chromalloy Professor of Renal Diseases in Medicine, Internal Medicine
Marc Randall Hammerman, MD Professor of Cell Biology and Physiology, Cell Biology and Physiology
Roman E Hammes, MD Instructor in Clinical Pediatrics, Pediatrics
Melanie G Hampton, MD Assistant Professor of Clinical Pediatrics, Pediatrics
Aaron Hamvas, MD James P. Keating, M.D. Professor of Pediatrics, Pediatrics
Byung Hee Han, PHD Assistant Professor of Neurological Surgery, Neurological Surgery
Dong-Ho Han, MS, PHD Research Associate Professor of Medicine, Internal Medicine
Dong Hyun Han Visiting Instructor in Psychiatry, Psychiatry
Joseph Hanaway, MD  Assistant Professor of Clinical Neurology, Neurology
Elinor F Hancock, MD  Instructor in Clinical Pediatrics, Pediatrics
Scott A Handley, PHD  Research Instructor in Pathology and Immunology, Pathology and Immunology
Thomas Joseph Hannan, DVM  Research Instructor in Pathology and Immunology, Pathology and Immunology
Ted H Hansen, MS, PHD  Professor of Genetics, Genetics
Ted H Hansen, MS, PHD  Professor of Pathology and Immunology, Pathology and Immunology
Jason M. Hanson, MD  Instructor in Clinical Otolaryngology, Otolaryngology
Phyllis I Hanson, MD, PHD  Professor of Cell Biology and Physiology, Cell Biology and Physiology
Robin D Hanson, MD, PHD  Instructor in Clinical Pediatrics, Pediatrics
Suzanne M Hanson, MD  Assistant Professor of Clinical Pediatrics, Pediatrics
Charles B Hantler, MA, MD  Professor of Anesthesiology, Anesthesiology
Hoosna Haque, MD  Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Zahirul Haque  Instructor in Clinical Medicine, Internal Medicine
Melissa A. Harbit, MD  Associate Professor of Psychiatry, Psychiatry
David A. Hardy, MD  Instructor in Surgery (Urologic Surgery), Surgery
Archie B Harmon Jr, MA, PHD  Instructor in Otolaryngology, Otolaryngology
Matthew B Harms, MD  Assistant Professor of Neurology, Neurology
Michael P. Harms, BE, PHD  Research Assistant Professor of Psychiatry, Psychiatry
George J Harocopos, MD  Assistant Professor of Pathology and Immunology, Pathology and Immunology
George J Harocopos, MD  Associate Professor of Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Alexander D Harris, MA, OD  Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Charles R Harris  Instructor in Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Michael Raymond Harris, MD, MS, PHD  Associate Professor of Pediatrics, Pediatrics
Elizabeth Avis Harrison, MD  Instructor in Pediatrics, Pediatrics
Thomas J. Harrison Jr, MD  Instructor in Clinical Pediatrics, Pediatrics
William Hartel  Instructor in Clinical Otolaryngology, Otolaryngology
David E Hartenbach, MD  Associate Professor of Clinical Pediatrics, Pediatrics
Mary E Hartman, M PH, MD  Assistant Professor of Pediatrics, Pediatrics
Richard Alan Hartman, MD  Associate Professor of Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Jack Hartstein, MD  Professor of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
John Edward Hartweger  Instructor in Clinical Pediatrics, Pediatrics
Sarah McConnell Hartz, MD, PHD  Assistant Professor of Psychiatry, Psychiatry
Alan A Harvey  Instructor in Clinical Otolaryngology, Otolaryngology
Steven Arthur Harvey, MD  Instructor in Clinical Psychiatry, Psychiatry
James Larry Harwell, MD  Assistant Professor of Clinical Pediatrics, Pediatrics
David B Haslam, MD  Associate Professor of Molecular Microbiology, Molecular Microbiology
David B Haslam, MD  Associate Professor of Pediatrics, Pediatrics
Ahmed Hassan, MD  Assistant Professor of Neurology, Neurology
Anisa Hassan, MD  Instructor in Clinical Medicine, Internal Medicine
Anjum Hassan, MD  Assistant Professor of Pathology and Immunology, Pathology and Immunology
Anjum Hassan  Siteman Cancer Center, Assistant Professor of Pathology and Immunology, Division of Anatomic Pathology, Washington University School of Medicine, 1990: Intern, medicine and surgery, Aga Khan University Hospital, Karachi, Pakistan, 1991–1994: Resident, anatomic and clinical pathology, Westchester Medical Center-New York Medical College, Valhalla, 1994–1996: Resident, anatomic and clinical pathology., 1989: Aga Khan University, Karachi, Pakistan, Primary Specialty: General surgical pathology and hematopathology, Board Certified:, 1996: American Board of Pathology, Anatomic and Clinical Pathology

Jason J Hassenstab  B MUS, MS PSYC, PHD Assistant Professor of Neurology, Neurology

Mary Kent Hastings  DPT, MS Assistant Professor of Orthopaedic Surgery, Orthopaedic Surgery

Thomas F Hastings  MD Instructor in Clinical Medicine, Internal Medicine

J Michael Hatled  MD Associate Professor of Clinical Neurology, Neurology

Sherrrie M Haupt  MD Professor of Pediatrics, Pediatrics

Bruce H Haughey  MBCHB, MS Joseph B Kimbrough Professor of Otolaryngology, Otolaryngology

Jay Fredrick Hauser  DDENT Instructor in Clinical Otolaryngology, Otolaryngology

James J Havranek  PHD Assistant Professor of Genetics, Genetics

William G. Hawkins  MD Associate Professor of Surgery (General Surgery), Surgery

Robert J Hayashi  MD Associate Professor of Pediatrics, Pediatrics

Michael E Hayek  MD, MS Instructor in Clinical Surgery (General Surgery), Surgery

Ericka V. Hayes  MD Assistant Professor of Pediatrics, Pediatrics

Heather Hayes  M ED, PHD Assistant Professor of Audiology and Communication Sciences, Program in Audiology and Communication Sciences

Heather Hayes  M ED, PHD Assistant Professor of Otolaryngology, Otolaryngology

Heather Hayes  M ED, PHD Director of Deaf Education Studies in Audiology and Communication Sciences, Program in Audiology and Communication Sciences

Marcie Harris Hayes  DPT, MS Assistant Professor of Orthopaedic Surgery, Orthopaedic Surgery

Marcie Harris Hayes  DPT, MS Assistant Professor of Physical Therapy, Program in Physical Therapy

Damon Joseph Louis Hays  MD Instructor in Clinical Orthopaedic Surgery, Orthopaedic Surgery

Richard D Head  MS Research Associate Professor of Genetics, Genetics

Richard D Head  MS Research Associate Professor of Pathology and Immunology, Pathology and Immunology

Andrew C Heath  PHD Associate Professor of Psychology, Department of Psychology

Andrew C Heath  PHD Professor of Genetics, Genetics

Andrew C Heath  PHD Spencer T. Olin Professor of Psychology in Psychiatry, Psychiatry

Jonathan William Heidt  MD Instructor in Emergency Medicine in Medicine, Internal Medicine

Jay Paul Heiden  MD Professor of Radiology, Radiology

Jay P Heiken  Siteman Cancer Center, Professor of Radiology and Chief, Section of Abdominal Imaging, Mallinckrodt Institute of Radiology, Washington University School of Medicine, 1978–1982: Resident, radiology, Columbia-Presbyterian Medical Center, New York, 1982–1983: Postdoctoral fellow, abdominal radiology, Washington University, St. Louis, 1978: MD, Columbia University, New York, Primary Specialty: Abdominal imaging, body computed tomography, Board Certified:, American Board of Radiology

James N Heins  MD Adjunct Professor of Medicine, Internal Medicine

Laura Elaina Heitsch  MD Assistant Professor of Emergency Medicine in Medicine (Pending Executive Faculty Approval), Internal Medicine

Daniel Luke Helsten  MD Assistant Professor of Anesthesiology, Anesthesiology

Mohammad Anas Helwani  Assistant Professor of Anesthesiology, Anesthesiology
Jeffrey P. Henderson, MD, PHD Assistant Professor of Medicine, Internal Medicine
Jeffrey P. Henderson, MD, PHD Assistant Professor of Molecular Microbiology, Molecular Microbiology
Katherine Eileen Henderson, MD Assistant Professor of Clinical Medicine, Internal Medicine
Kristina Louise Henderson, MD Instructor in Clinical Medicine, Internal Medicine
Nathan Henninger Instructor in Clinical Pediatrics, Pediatrics
Geetha G Herath, MD Instructor in Pediatrics, Pediatrics
William L Herbold, OD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Thomas Eugene Herman, MD Associate Professor of Radiology, Radiology
Cheryl R. Herman, Siteman Cancer Center, Assistant Professor of Radiology, Division of Diagnostic Radiology, Section of Breast Imaging, Washington University School of Medicine, 1990-1991: Intern, Medical College of Ohio, Toledo, 1991-1995: Resident, diagnostic radiology, Medical College of Ohio, 1995-1996: Fellow, nuclear medicine, University of Southern California, Los Angeles, 1996-1997: Fellow, breast imaging, University of V, 1990: MD, Meharry Medical College, Nashville, Tenn., Primary Specialty: Diagnostic radiology and breast imaging, Board Certified., 1996: American Board of Radiology, Diagnostic Radiology
Catherine Hermann, M ENG, MD Instructor in Clinical Medicine, Internal Medicine
Mary Jo Hernandez-Zipfel, MD Instructor in Clinical Pediatrics, Pediatrics
Robert E Herold, MD Assistant Professor of Anesthesiology, Anesthesiology
Pilar Herrero, ME, MS Research Associate Professor of Radiology, Radiology
Tamara G Hershey, PHD Adjunct Assistant Professor of Psychology (Courtesy), Department of Psychology
Tamara G Hershey, PHD Professor of Neurology, Neurology
Tamara G Hershey, PHD Professor of Psychiatry, Psychiatry
Tamara G Hershey, PHD Professor of Radiology, Radiology
Jacques A Herzog, MD Assistant Professor of Clinical Otolaryngology, Otolaryngology
Erik D. Herzog, Siteman Cancer Center, Professor of Biology, Neuroscience Program, Washington University, 1994-1998: Postdoctoral fellow, neuroscience, Duke University, Durham, N.C., 1994: PhD, neuroscience, Syracuse University, Syracuse, N.Y.
Albert E Hesker, MD Assistant Professor of Clinical Radiology, Radiology
Robert O Heuckeroth, MD, PHD Professor of Developmental Biology, Molecular Biology and Pharmacology
Robert O Heuckeroth, MD, PHD Professor of Pediatrics, Pediatrics
John E Heuser, MD Professor of Cell Biology and Physiology, Cell Biology and Physiology
Scot G Hickman, MD Professor of Medicine, Internal Medicine
Frederick G Hicks, MD Assistant Professor of Clinical Psychiatry, Psychiatry
Stuart T. Higano, MD Instructor in Clinical Medicine, Internal Medicine
Stephen M Highstein, MD, PHD Adjunct Professor of Otolaryngology, Otolaryngology
SueLin Ming Hilbert, MD Instructor in Emergency Medicine in Medicine, Internal Medicine
Charles F Hildebolt, DDENT, MA, PHD Adjunct Professor of Anthropology, Department of Anthropology
Charles F Hildebolt, DDENT, MA, PHD Professor of Radiology, Radiology
Laura Hill Assistant Professor of Clinical Pediatrics, Pediatrics
Thomas C Hill, MD Instructor in Emergency Medicine in Medicine, Internal Medicine
Travis J Hillen, MD, MS Assistant Professor of Radiology, Radiology
Elizabeth Hilliker, MA, MD Assistant Professor of Emergency Medicine in Medicine, Internal Medicine
Elizabeth Hilliker, MA, MD Assistant Professor of Surgery (General Surgery), Surgery
Claudia A Hilton, MBA, PHD Assistant Professor of Occupational Therapy, Program in Occupational Therapy
Claudia A Hilton, MBA, PHD Assistant Professor of Psychiatry, Psychiatry
David J. Hinkle, MD, PHD Instructor in Neurology, Neurology
Jennifer M Hinton Instructor in Clinical Pediatrics, Pediatrics
Paul Flack Hintze, MD Assistant Professor of Clinical Medicine, Internal Medicine
Angela Christine Hirbe, MD Instructor in Medicine, Internal Medicine
Keiko Hirose, MD Associate Professor of Audiology and Communication Sciences, Program in Audiology and Communication Sciences
Keiko Hirose, MD Associate Professor of Otolaryngology, Otolaryngology
Keiko Hirose, MD Associate Professor of Pediatrics, Pediatrics
Keiko Hirose, MD Vice Chairman of Otolaryngology, Otolaryngology
Gary E Hirshberg, MD Professor of Anesthesiology, Anesthesiology
Gary E Hirshberg, MD Professor of Anesthesiology in Pediatrics, Pediatrics
Stanley P Hmiel, M PHIL, MD, PHD Professor of Pediatrics, Pediatrics
Sharon Ho, MD Instructor in Clinical Pediatrics, Pediatrics
Sandra Jean Hodel Instructor in Clinical Pediatrics, Pediatrics
Dee Hodge III, MD Professor of Pediatrics, Pediatrics
Didier Hodzic, PHD Assistant Professor of Cell Biology and Physiology, Cell Biology and Physiology
Didier Hodzic, PHD Assistant Professor of Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Christine Michelle Hoehner, MS, PHS Assistant Professor of Surgery (General Surgery), Surgery
Amy L Hoerr, MD Instructor in Clinical Medicine, Internal Medicine
J. Langston Hoffman, MD Instructor in Clinical Medicine, Internal Medicine
Lawrence M Hoffman, DDENT Instructor in Clinical Otolaryngology (DMD), Otolaryngology
Robert J Hoffman, MD Professor of Clinical Pediatrics, Pediatrics
Russell G. Hoffmann, PHD Instructor in Clinical Pediatrics, Pediatrics
Sandra S Hoffmann, MD Instructor in Clinical Medicine, Internal Medicine
Kathleen M Hogan, MD Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Robert Edward Hogan III, MD Associate Professor of Neurology, Neurology
Nancy Melberg Holekamp, MD Professor of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Nicholas Alan Holekamp, MD Instructor in Clinical Pediatrics, Pediatrics
Abby Solomon Hollander, MD Associate Professor of Pediatrics, Pediatrics
Christopher Lee Holley, MD, PHD Instructor in Medicine, Internal Medicine
Susan O Holley, MD, PHD Assistant Professor of Radiology, Radiology
Holly H Hollingsworth, MA, PHD Research Associate Professor of Neurology, Neurology
Holly H Hollingsworth, MA, PHD Research Associate Professor of Occupational Therapy, Program in Occupational Therapy
Mary Ann Hollman, MD Instructor in Clinical Pediatrics, Pediatrics
John Otto Holloszy, MD Professor of Medicine, Internal Medicine
Robert Franklyn Holloway Jr Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Nancy E Holmes, MD Professor of Clinical Pediatrics, Pediatrics
Sheldon G Holstad, PHD, PHS Assistant Professor of Clinical Pharmacy in Psychiatry (On Staff at Jewish Hospital and St Louis College of Pharmacy), Psychiatry
Christopher Vincent Holthaus, MD Instructor in Emergency Medicine in Medicine, Internal Medicine
Barbel Holtmann, MD Associate Professor of Anesthesiology, Anesthesiology

Lori Rachel Holtz, MD Instructor in Pediatrics, Pediatrics

Sumner Holtz, MD Associate Professor of Clinical Radiology, Radiology

David Michael Holtzman, MD Andrew B. and Gretchen P. Jones Professor of Neurology, Neurology

David Michael Holtzman, MD Head of the Department of Neurology, Neurology

David Michael Holtzman, MD Professor of Developmental Biology, Molecular Biology and Pharmacology

Gregory William Holtzman, DPT, MS Assistant Professor of Orthopaedic Surgery, Orthopaedic Surgery

Gregory William Holtzman, DPT, MS Assistant Professor of Physical Therapy, Program in Physical Therapy

Michael J Holtzman, MD Professor of Cell Biology and Physiology, Cell Biology and Physiology

Michael J Holtzman, MD Selma and Herman Seldin Professor of Medicine, Internal Medicine

Rochelle LeAnn Holtzman, MS, PHD Instructor in Clinical Pediatrics, Pediatrics

Timothy E. Holy, MA, PHD Associate Professor of Neurobiology, Anatomy and Neurobiology

Neal Holzum Instructor in Clinical Medicine, Internal Medicine

Barry Allen Hong, MD, PhD Professor of Medicine, Internal Medicine

Barry Allen Hong, MD, PhD Professor of Psychiatry, Psychiatry

Barry Allen Hong, MD, PhD Professor of Psychology, Department of Psychology

Barry Allen Hong, MD, PhD Vice Chairman for Clinical Affairs, Department of Psychiatry, Psychiatry

Maria Cristina Honorato Cia Instructor in Anesthesiology, Anesthesiology

Joshua L. Hood, MD Research Instructor in Medicine, Internal Medicine

Bruce Jay Hookerman, MD Assistant Professor Emeritus of Clinical Medicine (Dermatology), Internal Medicine

J. Joseph Horan, MD Instructor in Clinical Pediatrics, Pediatrics

Barbra A Horn, MD Instructor in Clinical Medicine, Internal Medicine

Linda S Horne, MD Instructor in Clinical Psychiatry, Psychiatry

Caroline Clare Horner, MD Assistant Professor of Pediatrics, Pediatrics

Ian Kerst Hornstra, MD, PhD Assistant Professor of Medicine (Dermatology), Internal Medicine

Helen Hornfeck Host Research Assistant Professor of Medicine, Internal Medicine

Helen Hornfeck Host Research Assistant Professor of Physical Therapy, Program in Physical Therapy

Terri L Hosto, BSW, MSW Research Instructor in Neurology, Neurology

Richard S Hotchkiss, MD Professor of Anesthesiology, Anesthesiology

Richard S Hotchkiss, MD Professor of Developmental Biology, Molecular Biology and Pharmacology

Richard S Hotchkiss, MD Professor of Medicine, Internal Medicine

Richard S Hotchkiss, MD Professor of Surgery (General Surgery), Surgery

William Edward Houck, MD Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology

Dennis Emil Hourcade, MA, PHD Research Associate Professor of Medicine, Internal Medicine

Stacey L House, MD, PHD Instructor in Emergency Medicine in Medicine, Internal Medicine

Jacqueline Howard Instructor in Clinical Medicine, Internal Medicine

Matthew A Howard Adjunct Assistant Professor of Neurological Surgery, Neurological Surgery

Randall A Howell, MD Assistant Professor of Emergency Medicine in Medicine, Internal Medicine

Christine M Hrach, BSW, MD Assistant Professor of Pediatrics, Pediatrics

Keith A Hruska, MD Professor of Cell Biology and Physiology, Cell Biology and Physiology

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Keith A Hruska, MD  Professor of Medicine, Internal Medicine
Keith A Hruska, MD  Professor of Pediatrics, Pediatrics
Paul W. Hruz, MD, PHD  Associate Professor of Cell Biology and Physiology, Cell Biology and Physiology
Paul W. Hruz, MD, PHD  Associate Professor of Pediatrics, Pediatrics
Chyi-Song Hsieh, MD, PHD  Assistant Professor of Medicine, Internal Medicine
Chyi-Song Hsieh, MD, PHD  Assistant Professor of Pathology and Immunology, Pathology and Immunology
Chyi-Song Hsieh  Siteman Cancer Center, Assistant Professor of Medicine, Division of Rheumatology, Washington University School of Medicine, 1996-1999: Resident, internal medicine, University of Washington, Seattle, 1999-2001: Fellow, rheumatology, University of Washington, 2001-2005: Postdoctoral fellow, immunology, University of Washington, 1990: BA/MS, biochemistry, University of Chicago, 1996: MD/PhD, immunology, Washington University, St. Louis, Board Certified:, 1999: American Board of Internal Medicine, Internal Medicine
2002: American Board of Internal Medicine, Rheumatology
Chung Hsu, MD, PHD  Adjunct Professor of Neurology, Neurology
Fong Fu Hsu, MS, PHD  Research Professor of Medicine, Internal Medicine
Hawpeng Stephen Hsu, MD, MS  Assistant Professor of Anesthesiology, Anesthesiology
Raymond J Hu, MD  Instructor in Clinical Medicine, Internal Medicine
Yanle Hu, MS, MS1, PHD  Assistant Professor of Radiation Oncology, Radiation Oncology
David Hua  Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Frederick Szujuei Huang, MD  Associate Professor of Pediatrics, Pediatrics
Henry V Huang, PHD  Associate Professor of Molecular Microbiology, Molecular Microbiology
Howard Jeng Huang, MD  Assistant Professor of Medicine, Internal Medicine
Jiayi Huang, MD  Assistant Professor of Radiation Oncology, Radiation Oncology
Jing-Wei Huang, MD  Professor of Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Ren-Huai Huang, MA, PHD  Research Instructor in Medicine, Internal Medicine
Wei-Wei Huang  Instructor in Clinical Medicine (Dermatology), Internal Medicine
Dee Jay Hubbard, MA, MA1, PHD  Adjunct Assistant Professor of Otolaryngology (Speech Pathology), Otolaryngology
John W Hubert, MD  Associate Professor of Clinical Medicine, Internal Medicine
Richard W Hudgens, MD  Professor of Psychiatry, Psychiatry
M'liess Ann Hudson, MD  Associate Professor of Surgery (Urologic Surgery), Surgery
Donald V Huebener, DDENT, MA, MS  Instructor in Pediatric Dentistry, Pediatrics
Donald V Huebener, DDENT, MA, MS  Professor of Surgery (Plastic and Reconstructive Surgery), Surgery
James E Huettner, PHD  Assistant Professor of Biomedical Engineering, Department of Biomedical Engineering
James E Huettner, PHD  Associate Professor of Cell Biology and Physiology, Cell Biology and Physiology
Phyllis C Huettner, MD  Associate Professor of Pathology and Immunology, Pathology and Immunology
Douglas Lee Huff, OD  Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Michael S. Hughes, MA, PHD  Research Associate Professor of Medicine, Internal Medicine
Laura Hulbert, MD  Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Monica L Hulbert  Assistant Professor of Pediatrics, Pediatrics
Rebecca L Hulett, AB, MD Assistant Professor of Radiology, Radiology
Timothy Everett Hullar, MD Associate Professor of Audiology and Communication Sciences, Program in Audiology and Communication Sciences
Timothy Everett Hullar, MD Associate Professor of Neurobiology, Anatomy and Neurobiology
Timothy Everett Hullar, MD Associate Professor of Otolaryngology, Otolaryngology
Scott James Hultgren, PHD Helen L Stoever Professor of Molecular Microbiology, Molecular Microbiology
Peter A Humphrey, MD, PHD Ladenson Professor of Pathology in Pathology and Immunology, Pathology and Immunology
Peter A Humphrey, MD, PHD Professor of Surgery (Urologic Surgery), Surgery
Peter A Humphrey Siteman Cancer Center, Ladenson Professor of Pathology and Chief, Division of Anatomic and Molecular Pathology, Washington University School of Medicine, 1984-1988: Resident, pathology, Duke University, Durham, N.C., 1985-1987: Postdoctoral fellow, immunology, Duke University, 1984: MD/PhD, biochemistry, University of Kansas Medical Center, Kansas City, Primary Specialty: Urological pathology, Board Certified.; 1988: American Board of Pathology, Anatomic Pathology
Rocco Huneke, MD Assistant Professor of Anesthesiology, Anesthesiology
David A Hunstad, MD Assistant Professor of Molecular Microbiology, Molecular Microbiology
David A Hunstad, MD Assistant Professor of Pediatrics, Pediatrics
Devyani M. Hunt, MD Assistant Professor of Neurology, Neurology
Devyani M. Hunt, MD Assistant Professor of Orthopaedic Surgery, Orthopaedic Surgery
Linda Ann Hunt Adjunct Associate Professor of Neurology, Neurology
Linda Ann Hunt Adjunct Associate Professor of Occupational Therapy, Program in Occupational Therapy
Steven R Hunt, MD Associate Professor of Surgery (General Surgery), Surgery
Eva A Hurst, MD Assistant Professor of Medicine (Dermatology), Internal Medicine
Eva A. Hurst Siteman Cancer Center, Assistant Professor of Medicine, Division of Dermatology, Washington University School of Medicine, 2002-2003: Resident, internal medicine, St. Mary’s Health Center, St. Louis, 2003-2006: Resident and chief resident, dermatology, University of California, San Francisco, 2006-2007: Fellow, procedural dermatology/Mohs micrographic surgery, University of C, 2002: MD, Washington University, St. Louis, Primary Specialty: Dermatology, skin cancer, dermatologic surgery, Mohs micrographic surgery, Board Certified.; 2006: American Board of Dermatology, Dermatology
Mark Albert Hurt, MD Instructor in Clinical Medicine (Dermatology), Internal Medicine
Kareem D. Husain, MD Assistant Professor of Surgery (General Surgery), Surgery
Thy N Huskey, MD Associate Professor of Neurology, Neurology
Krzysztof L Hyrc, MS, PHD Research Assistant Professor of Neurology, Neurology
Catherine Ifune, MD, PHD Associate Professor of Anesthesiology, Anesthesiology
Richard G. Ihnat, MD Instructor in Clinical Medicine, Internal Medicine
Maxenia Garcia Ilagan, PHD Instructor in Developmental Biology, Molecular Biology and Pharmacology
Shin-Ichiro Imai, MD, PHD Associate Professor of Developmental Biology, Molecular Biology and Pharmacology
Shin-Ichiro Imai, MD, PHD Associate Professor of Medicine, Internal Medicine
Shin-Ichiro Imai Siteman Cancer Center, Assistant Professor of Developmental Biology, Washington University School of Medicine, 1997-1999: Postdoctoral fellow, biology, Massachusetts Institute of Technology, Cambridge, Mass., 1999-2001: Postdoctoral associate, biology, Massachusetts Institute of Technology, 1989: MD, Keio University, Tokyo, 1995: PhD, preventive medicine, Keio University
Terrie Eleanor Inder, MBBS, MD Professor of Neurology, Neurology
Terrie Eleanor Inder, MBBS, MD Professor of Pediatrics, Pediatrics
Terrie Eleanor Inder, MBBS, MD Professor of Radiology, Radiology
Carl S Ingber, MD Instructor in Clinical Pediatrics, Pediatrics
Aidan W Ip, MD Instructor in Clinical Pediatrics, Pediatrics
Belinda K. Ireland, MD Adjunct Assistant Professor of Medicine, Internal Medicine

Warren Isakow, MD Assistant Professor of Medicine, Internal Medicine

Selma E.h.o. Ishag, MD, PHD Assistant Professor of Anesthesiology, Anesthesiology

Michael J Isserman, MD Assistant Professor of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

Eva Susanne Istvan, PHD HHMI Research Specialist II, Howard Hughes Institute

Eva Susanne Istvan, PHD Research Assistant Professor of Medicine, Internal Medicine

Jennifer Lynn Ivanovich, MBA, MS Research Assistant Professor of Surgery (General Surgery), Surgery

Jennifer L Ivanovich Siteman Cancer Center, Research Assistant Professor of Surgery, Washington University School of Medicine, 1992: MS, biology, University of Cincinnati, 2000: MBA, University of Missouri-St. Louis, Primary Specialty: Medical genetics, Board Certified: 1993: American Board of Genetic Counseling

Renee A. Ivens, DPT, MHS Assistant Professor of Orthopaedic Surgery, Orthopaedic Surgery

Renee A. Ivens, DPT, MHS Assistant Professor of Physical Therapy, Program in Physical Therapy

Enrique Wilmar Izaguirre, MS, PHD Assistant Professor of Radiation Oncology, Radiation Oncology

Yukitoshi Izumi, MD, PHD Research Professor of Psychiatry, Psychiatry

Jerry Jeff Jaboin, MD, PHD Assistant Professor of Radiation Oncology, Radiation Oncology

Jerry J Jaboin Siteman Cancer Center, Assistant Professor of Radiation Oncology, Washington University School of Medicine, 2005-2006: Intern, Franklin Square Hospital Center, Baltimore, 2006-2010: Resident and chief resident, radiation oncology, Vanderbilt University, Nashville, Tenn., 2004: MD/PhD, molecular biology and genetics, Howard University, Washington, D.C., Primary Specialty: Radiation oncology

Carolyn M Jachna, MD Assistant Professor of Medicine, Internal Medicine

Ronald R Jackups Jr. Assistant Professor of Pathology and Immunology, Pathology and Immunology

Jeffrey H Jacob, OD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

Saji Jacob, DIP, MD, MS Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology

Sindhu Saji Jacob, MD Assistant Professor of Neurology, Neurology

Daryl Jacobs, MD, ME Instructor in Clinical Medicine, Internal Medicine

Myron H Jacobs, MD Instructor in Clinical Medicine, Internal Medicine

Arnold Scott Jacobson, DDENT, MS Instructor in Clinical Otolaryngology (DMD), Otolaryngology

Steven Jacobson, MD Instructor in Clinical Medicine, Internal Medicine

Meagan A. Jacoby, MD, PHD Instructor in Medicine, Internal Medicine

Mark F Jacquin, PHD Professor of Neurology, Neurology

David M Jaffe, MD Dana Brown Professor of Pediatrics, Pediatrics

Sue E Jagler Instructor in Clinical Pediatrics, Pediatrics

Sanjay Jain, MD, PHD Assistant Professor of Medicine, Internal Medicine

Sanjay Jain, MD, PHD Assistant Professor of Pathology and Immunology, Pathology and Immunology

Sudhir Kumar Jain, MBBS Associate Professor of Medicine, Internal Medicine

Patricia A Jamerson Instructor in Clinical Pediatrics, Pediatrics

Aimee S. James, M PH, MA, PHD Assistant Professor of Surgery (General Surgery), Surgery

William P James, MD Assistant Professor of Radiology, Radiology

Aleksandar Janca, MD Adjunct Professor of Psychiatry, Psychiatry

William Edward Janes Instructor in Neurological Surgery, Neurological Surgery

William Edward Janes Instructor in Occupational Therapy, Program in Occupational Therapy
James W Janetka, PHD Research Associate Professor of Biochemistry and Molecular Biophysics, Biochemistry and Molecular Biophysics

Judy Lee Jang, MD, MHS Assistant Professor of Medicine, Internal Medicine

Timothy Bock Jang, MD Instructor in Emergency Medicine in Medicine, Internal Medicine

David P. Jaques Professor of Surgery (General Surgery), Surgery

George Jarad, MD Assistant Professor of Medicine, Internal Medicine

Michael R Jarvis, MD, MS, PHD Professor of Psychiatry, Psychiatry

Michael R Jarvis, MD, MS, PHD Vice Chairman for Clinical Affairs, Department of Psychiatry, Psychiatry

Daniel Ragin Jasper, MD Instructor in Clinical Medicine, Internal Medicine

Cylene Javidan-Nejad, MD Associate Professor of Radiology, Radiology

Patrick Y Jay, MD, PHD Associate Professor of Genetics, Genetics

Patrick Y Jay, MD, PHD Associate Professor of Pediatrics, Pediatrics

Yasangi Maina Jayasiha, MD Instructor in Clinical Pediatrics, Pediatrics

Donna Beth Jeffe, MA, PHD Research Professor of Medicine, Internal Medicine

Rachel Brown Jefferson Instructor in Emergency Medicine in Medicine, Internal Medicine

Christopher M. Jenkins, PHD Research Instructor in Medicine, Internal Medicine

Jack W Jennings, MD, MS, PHD Assistant Professor of Radiology, Radiology

Susan Jerger Adjunct Research Professor of Otolaryngology, Otolaryngology

Li Jia, PHD Assistant Professor of Medicine, Internal Medicine

Daojun Jiang, MS, PHD Research Instructor in Developmental Biology, Molecular Biology and Pharmacology

Xuntian Jiang, PHD Research Instructor in Medicine, Internal Medicine

Sharon Leslie Jick Instructor in Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

Jeffrey Jim, MD, MS Assistant Professor of Surgery (General Surgery), Surgery

Morris Joftus, MD Assistant Professor of Clinical Medicine, Internal Medicine

Denise R Johnson, MD Associate Professor of Clinical Pediatrics, Pediatrics

Eric Keith Johnson, MD Instructor in Medicine, Internal Medicine

Jeffrey E Johnson, MD Professor of Orthopaedic Surgery, Orthopaedic Surgery

Joyce D Johnson, MD Assistant Professor of Clinical Pediatrics, Pediatrics

Mark C Johnson, MD Associate Professor of Pediatrics, Pediatrics

Mark C. Johnson, MD Associate Professor of Clinical Psychiatry, Psychiatry

Michael K Johnson, MD Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology

Philip J Johnson, BE, ME, PHD Assistant Professor of Surgery (Plastic and Reconstructive Surgery), Surgery

Staci R. Johnson, MD Instructor in Clinical Pediatrics, Pediatrics

Stephen L Johnson, PHD Professor of Genetics, Genetics

William Lee Johnson, MD Adjunct Associate Professor of Pediatrics, Pediatrics

William Lee Johnson, MD Associate Professor of Clinical Pediatrics, Pediatrics

Eugene Malcolm Johnson Jr, PHD Professor of Developmental Biology, Molecular Biology and Pharmacology

Eugene Malcolm Johnson Jr, PHD Professor of Neurology, Neurology

Kimberly J. Johnson Siteman Cancer Center, Assistant Professor of Public Health, George Warren Brown School of Social Work, Washington University, 2007-2010: Postdoctoral fellow, pediatric cancer epidemiology, University of Minnesota, Minneapolis, 2004: MPH, epidemiology, University of Minnesota, Minneapolis, 2007: PhD, epidemiology/human genetics, University of Minnesota
Stephen L Johnson, Siteman Cancer Center, Professor of Genetics, Washington University School of Medicine, 1991-1996: Postdoctoral associate, developmental psychology, University of Oregon, Eugene, 1990: PhD, genetics, University of Washington, Seattle

Angela Marie Jones, MD, Instructor in Clinical Pediatrics, Pediatrics

James S Jones, Instructor in Anesthesiology, Anesthesiology

Katherine McMullin Jones, MD, Instructor in Pediatrics (Pending Dean's Approval), Pediatrics

La Rhonda Jones, Instructor in Clinical Psychiatry (Child Psychiatry), Psychiatry

Larry A Jones, MBA, MD, Assistant Professor of Clinical Pediatrics, Pediatrics

Amy M Joseph, MD, Associate Professor of Medicine, Internal Medicine

Daniel Paul Joseph, MD, PHD, Associate Professor of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

Susan M. Joseph, MD, Assistant Professor of Medicine, Internal Medicine

Barbara Jost, MD, MS, Instructor in Clinical Medicine, Internal Medicine

R. Gilbert Jost, MD, Director of the Edward Mallinckrodt Institute of Radiology, Radiology

R. Gilbert Jost, MD, Elizabeth E Mallinckrodt Professor of Radiology, Radiology

R. Gilbert Jost, MD, Head of The Department of Radiology, Radiology

Sandy Lynn Jost, Adjunct Instructor in Obstetrics and Gynecology, Obstetrics and Gynecology

Sarah C. Jost, Adjunct Assistant Professor of Neurological Surgery, Neurological Surgery

Mark J Jostes, MD, Assistant Professor of Clinical Obstetrics and Gynecology, Obstetrics and Gynecology

Randall S Jotte, MD, Associate Professor of Emergency Medicine in Medicine, Internal Medicine

Yo-El S Ju, MD, Assistant Professor of Neurology, Neurology

John Patrick Judd, MD, Assistant Professor of Obstetrics and Gynecology, Obstetrics and Gynecology

Neringa Juknis, MD, Assistant Professor of Neurology, Neurology

Erzsebet Jung, MD, Instructor in Clinical Pediatrics, Pediatrics

Emily Susan Jungheim, MD, Assistant Professor of Obstetrics and Gynecology, Obstetrics and Gynecology


James A Junker, MD, Instructor in Clinical Radiology, Radiology

Caroline Holleck Kahle, MD, Instructor in Medicine, Internal Medicine

Joseph A Kahn, MD, Assistant Professor of Clinical Pediatrics, Pediatrics

Dagmar Julika Kaiser, MBBCH, MD, Instructor in Anesthesiology, Anesthesiology

Heiko Andreas Kaiser, MD, PHD, Instructor in Anesthesiology, Anesthesiology

Timothy N Kaiser, MD, Assistant Professor of Clinical Otolaryngology, Otolaryngology

Sona Sharad Kamat, Instructor in Clinical Medicine, Internal Medicine

Vinay Gopal Kamat, MD, Instructor in Clinical Medicine, Internal Medicine

Stephen A Kamenetzky, MD, Professor of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

Daniel Thomas Kane, MD, Assistant Professor of Anesthesiology, Anesthesiology

Deborah Shipley Kane, MD, Instructor in Emergency Medicine in Medicine, Internal Medicine

Pamela B Kane, MD, Instructor in Clinical Pediatrics, Pediatrics
Ivan M Kangrga, MD, PHD  Associate Professor of Anesthesiology, Anesthesiology
Kimberly Anne Kaphingst, D SC, MA, MS  Assistant Professor of Surgery (General Surgery), Surgery
Humeyra Karacal, MD  Assistant Professor of Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Menelaos Karanikolas, MD  Assistant Professor of Anesthesiology, Anesthesiology
Wajiha Parveen Karatela  Instructor in Clinical Psychiatry (Child), Psychiatry
Eugenia Kardaris  Instructor in Clinical Otolaryngology (DDS), Otolaryngology
Morvarid Karimi, MD  Assistant Professor of Neurology, Neurology
Robert S Karsh, MD  Adjunct Professor of Medicine, Internal Medicine
Robert S Karsh, MD  Professor of Clinical Medicine, Internal Medicine
Roanne Kay Karzon, M ED, MS, PHD  Adjunct Assistant Professor of Audiology and Communication Science, Program in Audiology and Communication Sciences
Roanne Kay Karzon, M ED, MS, PHD  Adjunct Assistant Professor of Otolaryngology, Otolaryngology
Rojano Kashani, MS, PHD  Instructor in Radiation Oncology, Radiation Oncology
Victoria Kaskutas, MHS, OTD  Assistant Professor of Occupational Therapy, Program in Occupational Therapy
Thomas J Kasper  Instructor in Clinical Pediatrics, Pediatrics
Michael A Kass, MD, MS  Bernard Becker Professor of Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Michael A Kass, MD, MS  Head of the Department of Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Andrew M. Kates, MD  Associate Professor of Medicine, Internal Medicine
Ryotaro Kato, JD, MD  Instructor in Medicine, Internal Medicine
Demetrios Katsikas, MD  Instructor in Clinical Surgery (Urological Surgery), Surgery
Richard T. Katz, MA, MD  Professor of Clinical Neurology, Neurology
David A Katzman, MD  Instructor in Clinical Medicine, Internal Medicine
Robert L Kaufman, MD  Assistant Professor of Clinical Medicine, Internal Medicine
Jack Kayes, MD  Professor Emeritus of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
James P Keating, MD, MS  W. Mckim O. Marriott Professor of Pediatrics, Pediatrics
Robert S Keber, MD  Instructor in Clinical Pediatrics, Pediatrics
Dalius Kedainis, MD  Instructor in Clinical Medicine, Internal Medicine
Katherine Keech, MD  Instructor in Anesthesiology, Anesthesiology
Kathryn A. Keeler, MD  Assistant Professor of Orthopaedic Surgery, Orthopaedic Surgery
Jay Donovan Keener, MD  Assistant Professor of Orthopaedic Surgery, Orthopaedic Surgery
James A Keeney, MD  Assistant Professor of Orthopaedic Surgery, Orthopaedic Surgery
Jacob Brian Keeperman, MD  Assistant Professor of Anesthesiology (Pending Executive Faculty Approval), Anesthesiology
Vladimir Jivkov Kefalov, PHD  Associate Professor of Neurobiology, Anatomy and Neurobiology
Vladimir Jivkov Kefalov, PHD  Associate Professor of Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Martin S Keller, MD  Associate Professor of Pediatrics, Pediatrics
Martin S Keller, MD  Associate Professor of Surgery (Pediatric Surgery), Surgery
Sarah Lynn Keller, MD  Assistant Professor of Obstetrics and Gynecology, Obstetrics and Gynecology
Robert V Kellow  Assistant Professor of Clinical Pediatrics, Pediatrics
Brian J Kelly, MD  Assistant Professor of Clinical Pediatrics, Pediatrics
Daniel P Kelly, MD  Adjunct Professor of Medicine, Internal Medicine
James E. Kelly, MA, MD  Instructor in Radiology, Radiology
John J Kelly, MD  Associate Professor of Clinical Medicine, Internal Medicine
Michael Patrick Kelly, MD  Assistant Professor of Neurological Surgery, Neurological Surgery
Michael Patrick Kelly, MD  Assistant Professor of Orthopaedic Surgery, Orthopaedic Surgery
Cheryl M. Kelly  Siteman Cancer Center, Assistant Professor of Community Health, Division of Behavioral Science and Health Education, Saint Louis University School of Public Health, 1999: MA, cultural studies of sport, University of Iowa, Iowa City, 2003: MPH, behavioral science and health education, Saint Louis University, 2006: PhD, behavioral science and health education, Saint Louis University
James Scott Kemp, MD  Professor of Pediatrics, Pediatrics
Michele E Kemp, MD  Associate Professor of Clinical Pediatrics, Pediatrics
Charlotte J Kennedy, MD, PhD  Assistant Professor of Clinical Medicine, Internal Medicine
Robert M Kennedy, MD  Professor of Pediatrics, Pediatrics
Rainer Kentner, MD  Assistant Professor of Anesthesiology, Anesthesiology
Joseph L Kenzora, MD  Associate Professor of Medicine, Internal Medicine
Deborah Lynn Kerber, OD  Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Paul William Kerby, MBBS  Instructor in Anesthesiology, Anesthesiology
Thomas Archibald Kerr, MD, PhD  Assistant Professor of Medicine, Internal Medicine
Martin Hurley Kerrigan, MD  Assistant Professor of Medicine, Internal Medicine
Daniel Kerschensteiner, PhD  Assistant Professor of Neurobiology, Anatomy and Neurobiology
Daniel Kerschensteiner, PhD  Assistant Professor of Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Sheldon Kessler, MD  Instructor in Clinical Pediatrics, Pediatrics
Rafi Thomas Kevorkian, MD  Assistant Professor of Clinical Medicine, Internal Medicine
Salah G. Keyrouz, MD  Assistant Professor of Neurology, Neurology
Syed Ahmed Khader, MD  Instructor in Clinical Neurology, Neurology
Asis Khan, MS, PhD  Research Instructor in Molecular Microbiology, Molecular Microbiology
Geetika Khanna, MBBS, MS  Associate Professor of Radiology, Radiology
Sangeeta Khanna  Instructor in Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Evan David Kharasch, MD, PhD  Professor of Biochemistry and Molecular Biophysics, Biochemistry and Molecular Biophysics
Evan David Kharasch, MD, PhD  Russell and Mary Shelden Professor of Anesthesiology, Anesthesiology
Evan David Kharasch, MD, PhD  Vice Chancellor for Research, Vice Chancellor For Research
Evan D. Kharasch  Siteman Cancer Center, Russell D. and Mary B. Shelden Professor of Anesthesiology and Chief, Division of Clinical and Translational Research, Washington University School of Medicine, 1984-1987: Intern and resident, University of Washington, Seattle, 1987-1988 Research fellow, anesthesiology, University of Washington, 1979: MD, Northwestern University, Chicago, 1983: PhD, pharmacology, Northwestern University, Primary Specialty: Anesthesiology, Board Certified.; 1989: American Board of Anesthesiology, Anesthesiology
Shahrdad Khodamoradi, MD  Assistant Professor of Anesthesiology, Anesthesiology
Saaid Khojasteh, MD  Assistant Professor of Clinical Psychiatry, Psychiatry
Lynnette C Khoo-Summers, DPT, MS  Assistant Professor of Orthopaedic Surgery, Orthopaedic Surgery
Lynnette C Khoo-Summers, DPT, MS  Assistant Professor of Physical Therapy, Program in Physical Therapy
Thomas B Kibby, MD, MPH  Instructor in Emergency Medicine in Medicine (Pending Dean's Approval), Internal Medicine
George Kichura, MD Instructor in Clinical Medicine, Internal Medicine
William F Kiefer Jr, OD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Mary Kiehl, AS, MD Assistant Professor of Clinical Medicine, Internal Medicine
Kent Leon Killian, MD Instructor in Clinical Pediatrics, Pediatrics
Charles Kilo, MD Professor of Medicine, Internal Medicine
Charles Kilo, MD Professor of Pathology and Immunology, Pathology and Immunology
Charles John Kilo, MD Instructor in Clinical Medicine, Internal Medicine
Helen Young Kim-James, MD Instructor in Clinical Medicine (Dermatology), Internal Medicine
Albert H Kim, MA, MD, PHD Assistant Professor of Developmental Biology, Molecular Biology and Pharmacology
Albert H Kim, MA, MD, PHD Assistant Professor of Neurological Surgery, Neurological Surgery
Albert H Kim, MA, MD, PHD Assistant Professor of Neurology, Neurology
Alfred Kim, MD, PHD Instructor in Medicine, Internal Medicine
Andrew M Kim, DDENT, MS Assistant Professor of Clinical Surgery (Plastic and Reconstructive Surgery), Surgery
Andrew M Kim, DDENT, MS Instructor in Clinical Otolaryngology, Otolaryngology
Joong Hee Kim, MS, PhD Instructor in Radiology, Radiology
Jungsu Kim, PHD Assistant Professor of Neurology, Neurology
Seung Kwon Kim, MD Assistant Professor of Radiology, Radiology
Seung Kwon Kim, MD Assistant Professor of Surgery (General Surgery), Surgery
Seung K. Kim Siteman Cancer Center, Assistant Professor of Radiology, Division of Diagnostic Radiology, Section of Interventional Radiology, Mallinckrodt Institute of Radiology, Washington University School of Medicine, 1995-1996: Intern, Sungkyunkwan University, Seoul, South Korea, 1996-2000: Resident, diagnostic radiology, Sungkyunkwan University, 2001-2002: Fellow, abdominal imaging, Sungkyunkwan University, 2007-2008: Fellow, vascular and interventional radiology, Ha, 1995: MD, Kyung Hee University, Seoul, South Korea, Primary Specialty: Chemoembolization, radiofrequency ablation, cryoablation, portal interventions

Rosa Anne Kincaid, MD Instructor in Clinical Medicine, Internal Medicine
Allison A King, MD Assistant Professor of Occupational Therapy, Program in Occupational Therapy
Allison A King, MD Assistant Professor of Pediatrics, Pediatrics
Donald Kevin King, MD Assistant Professor of Clinical Medicine, Internal Medicine
Erin L King, MD Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Kevin Patrick King, MD Instructor in Clinical Medicine, Internal Medicine
Tessa Marie King, MD Assistant Professor of Anesthesiology, Anesthesiology
Tinna P King Instructor in Clinical Medicine, Internal Medicine
John P. Kirby, MD, MS Associate Professor of Surgery (General Surgery), Surgery
Erik Paul Kirk, MS, PHD Adjunct Assistant Professor of Medicine, Internal Medicine
Nigar Kirmani, MD Professor of Medicine, Internal Medicine
Neha Navsaria Kirtane, MA, PHD Instructor in Psychiatry (Pending Dean's Approval), Psychiatry
Sameer M. Kirtane, MD Instructor in Clinical Medicine, Internal Medicine
Zulfia Kisrieva-Ware, MD, PHD Research Instructor in Radiology, Radiology
John M Kissane, MD Retiree - Professor of Pathology and Immunology, Pathology and Immunology
Mohammad A. Kizilbash, MD, MS Assistant Professor of Medicine, Internal Medicine
Laurie Klabi, MD Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Joseph W. Klaesner, MS, PHD
Research Associate Professor of Physical Therapy, Program in Physical Therapy

Joseph W. Klaesner, MS, PHD
Research Associate Professor of Radiology, Radiology

Jeffery M. Klco, MD, PHD
Research Instructor in Pathology and Immunology, Pathology and Immunology

Michael K Klebert, BN, MSN, PHD
Research Instructor in Medicine, Internal Medicine

Eynav Yafit Klechevsky, PHD
Assistant Professor of Pathology and Immunology, Pathology and Immunology

Eynav Y Klechevsky
Siteman Cancer Center, Assistant Professor of Pathology and Immunology, Division of Immunobiology, Washington University School of Medicine, 2007: PhD, immunology, Baylor Institute of Immunology Research, Dallas

Robert E Kleiger, MD
Professor of Medicine, Internal Medicine

Christina L Klein, MD
Assistant Professor of Medicine, Internal Medicine

Eric E. Klein, MS, PHD
Professor of Radiation Oncology, Radiation Oncology

Jacob Klein, MD
Professor of Clinical Obstetrics and Gynecology, Obstetrics and Gynecology

Robyn Sue Klein, MD, MS, PHD
Associate Professor of Medicine, Internal Medicine

Robyn Sue Klein, MD, MS, PHD
Associate Professor of Neurobiology, Anatomy and Neurobiology

Robyn Sue Klein, MD, MS, PHD
Associate Professor of Pathology and Immunology, Pathology and Immunology

Samuel Klein, MD, MS
Danforth Professor of Medicine, Internal Medicine

Samuel Klein, MD, MS
Professor of Cell Biology and Physiology, Cell Biology and Physiology

Sandra E. Klein, BE, MD
Assistant Professor of Orthopaedic Surgery, Orthopaedic Surgery

Saul Klein, MD
Instructor in Clinical Surgery (Urologic Surgery), Surgery

Seth Jonathan Klein, BSA, MD
Instructor in Radiology, Radiology

Eric E. Klein
Siteman Cancer Center

Mark Alan Kleindorfer, OD
Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

June Leslie Kleinfeld, DDENT
Instructor in Clinical Otolaryngology (DMD), Otolaryngology

George R Kletzker, MD
Assistant Professor of Clinical Otolaryngology, Otolaryngology

Mary E Klingensmith, MD
Mary Culver Distinguished Professor, Surgery

Mary E Klingensmith, MD
Professor of Surgery (General Surgery), Surgery

Vivian Marie Kloke, OD
Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

Linda Marie Klutho, MD
Instructor in Clinical Medicine, Internal Medicine

Carl G Klutke, MD
Professor of Surgery (Urologic Surgery), Surgery

Vitaly A Klyachko, MS, PHD
Assistant Professor of Cell Biology and Physiology, Cell Biology and Physiology

Vitaly A Klyachko, MS, PHD
Assistant Professor of Neurobiology, Anatomy and Neurobiology

Kathleen Marie Kniepmann, DED, M PH
Instructor in Neurology, Neurology

Kathleen Marie Kniepmann, DED, M PH
Instructor in Occupational Therapy, Program in Occupational Therapy

Richard D Knight
Instructor in Clinical Pediatrics, Pediatrics

Shirley M Knight, MD
Professor of Clinical Pediatrics, Pediatrics

Teresa Lee Knight, MD, MS
Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology

Henry L Knock, MD
Assistant Professor of Clinical Pediatrics, Pediatrics

Harry L Knopf, MD
Professor of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

Valerie S. Knopik, MA, PHD
Adjunct Assistant Professor of Psychiatry, Psychiatry

Ronald Joseph Knox, OD
Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

Dale K Kobayashi, MBA
Research Instructor in Medicine, Internal Medicine
Ira Joe Kodner, MD Solon and Bettie Gershman Professor of Surgery (General Surgery), Surgery

Ira J Kodner Siteman Cancer Center, Solon and Bettie Gershman Professor of Surgery, Division of General Surgery, Section of Colon and Rectal Surgery, Washington University School of Medicine, 1967-1974: Resident, surgery, Washington University, St. Louis, 1974-1975: Fellow, colon and rectal surgery, The Cleveland Clinic, Cleveland, Ohio, 1967: MD, Washington University, St. Louis, Primary Specialty: Colon and rectal cancer, Board Certified; 1975: American Board of Surgery, General Surgery

1975: American Board of Colon and Rectal Surgery

Carolyn Koenig, MD Instructor in Clinical Medicine, Internal Medicine

Joel S Koenig, MD Professor of Clinical Pediatrics, Pediatrics

Kenneth A Koerner, MD Associate Professor of Clinical Pediatrics, Pediatrics

Ismail Kola, PhD Adjunct Professor of Medicine, Internal Medicine

Marin H Kollef, MD Professor of Medicine, Internal Medicine

Hermmann M Koller, MD Instructor in Emergency Medicine in Medicine, Internal Medicine

Sri Devi Kolli, MBBS Instructor in Clinical Medicine, Internal Medicine

Nikoleta S. Kolovos, MD Assistant Professor of Pediatrics, Pediatrics

Mary E. Koly, MD Instructor in Clinical Medicine, Internal Medicine

Yosuke Komatsu Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology

Katherine L Komendowski, MD Assistant Professor of Clinical Pediatrics, Pediatrics

Kevin L Konzen, MD Assistant Professor of Clinical Medicine, Internal Medicine

Raphael Kopan, MS, PhD Alan A and Edith L Wolff Professor, Molecular Biology and Pharmacology

Raphael Kopan, MS, PhD Professor of Developmental Biology, Molecular Biology and Pharmacology

Raphael Kopan, MS, PhD Professor of Medicine (Dermatology), Internal Medicine

Robert G Kopitsky, MD Assistant Professor of Clinical Medicine, Internal Medicine

Kevin Marc Korenblat, MD Associate Professor of Medicine, Internal Medicine

Phillip E Korenblat, MD Professor of Clinical Medicine, Internal Medicine

Michael S Korenfeld, MD Assistant Professor of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

Stephen K Kornfeld, MD, PhD Professor of Developmental Biology, Molecular Biology and Pharmacology

Stuart A Kornfeld, MD David C and Betty Farrell Professor of Medicine, Internal Medicine

Stuart A Kornfeld, MD Professor of Biochemistry and Molecular Biophysics, Biochemistry and Molecular Biophysics

Kerry Kornfeld Siteman Cancer Center, Associate Professor of Developmental Biology, Washington University School of Medicine, 1991-1995: Postdoctoral fellow, biology, Massachusetts Institute of Technology, Cambridge, Mass., 1991: MD/PhD, biochemistry, Stanford University, Stanford, Calif.

Alex H Kosloff, MD Instructor in Clinical Medicine, Internal Medicine

Lawrence M Kotner, MD Associate Professor of Radiology, Radiology

John Jay Kotyk, MA, PHD Research Associate Professor of Radiology, Radiology

Paul Thomas Kotzbauer, MD, PhD Assistant Professor of Developmental Biology, Molecular Biology and Pharmacology

Paul Thomas Kotzbauer, MD, PhD Assistant Professor of Neurology, Neurology

Attila Kovacs, MD Associate Professor of Medicine, Internal Medicine

Maria Kovacs Visiting Professor of Psychiatry, Psychiatry

Sandor J Kovacs, MD, MS, PhD Adjunct Professor of Physics, Department of Physics

Sandor J Kovacs, MD, MS, PhD Professor of Biomedical Engineering, Department of Biomedical Engineering

Sandor J Kovacs, MD, MS, PhD Professor of Cell Biology and Physiology, Cell Biology and Physiology
Sandor J Kovacs, MD, MS, PHD Professor of Medicine, Internal Medicine
Beth Ann Kozel, MD, PHD Instructor in Pediatrics, Pediatrics
Alexander Kozlov, MS, PHD Research Instructor in Biochemistry and Molecular Biophysics, Biochemistry and Molecular Biophysics
Amanda Kracen Siteman Cancer Center, Psychologist, Psycho-Oncology Service, Siteman Cancer Center, 2003-2005: Research fellow, cancer prevention and control, National Cancer Institute, Bethesda, Md., 2010-2011: Postdoctoral fellow, St. Louis Veterans Affairs Medical Center, 2005: MS, counseling psychology, Virginia Commonwealth University, Richmond, Va., 2010: PhD, counseling psychology, Virginia Commonwealth University, Primary Specialty: Psychology, Board Certified.; 2011: State of Missouri, Psychologist
Thomas Errol Kraemer, OD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
James M Krafcik Instructor in Clinical Pediatrics, Pediatrics
Aldi T Kraja, PHD Research Associate Professor of Genetics, Genetics
David Paul Krajcovic, MD Instructor in Clinical Surgery (General Surgery), Surgery
Robert S Kramer, MD Instructor in Clinical Orthopaedic Surgery, Orthopaedic Surgery
Joseph F Kras, DDENT, MD Associate Professor of Anesthesiology, Anesthesiology
Claudia Krasnoff, MA, MD Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Mark S Krasnoff, MD Instructor in Clinical Medicine, Internal Medicine
Frederick Thier Kraus, MD Adjunct Professor of Obstetrics and Gynecology, Obstetrics and Gynecology
Richard A Kraus, MD Assistant Professor of Radiology, Radiology
Lily Tadayyon Kregenow Instructor in Clinical Pediatrics, Pediatrics
Daniel Kreisel, MD, PHD Associate Professor of Pathology and Immunology, Pathology and Immunology
Daniel Kreisel, MD, PHD Associate Professor of Surgery (Cardiothoracic Surgery), Surgery
Friederike H. Kreisel, MD Associate Professor of Pathology and Immunology, Pathology and Immunology
Friederike Kreisel Siteman Cancer Center, Assistant Professor of Pathology and Immunology, Division of Anatomic and Molecular Pathology, Washington University School of Medicine, 1995-1996: Intern, internal medicine, Goethe University, Frankfurt, Germany, 1999-2002: Resident, anatomic and clinical pathology, University of Pennsylvania, Philadelphia, 2002-2003: Fellow, hematopathology, University of Pennsylvania, 1995: MD, Goethe University, Frankfurt, Germany, Primary Specialty: Hematopathology, Board Certified.; 2002: American Board of Pathology, Anatomic and Clinical Pathology 2007: American Board of Pathology, Hematopathology
Maxwell M. Krem, MD, PHD Instructor in Clinical Medicine, Internal Medicine
Katherine L Kreusser, MD Professor of Clinical Pediatrics, Pediatrics
Andrzej Modest Krezel, MS, PHD Research Associate Professor of Biochemistry and Molecular Biophysics (Pending Executive Faculty Approval), Biochemistry and Molecular Biophysics
Sean D. Kristjansson, MS, PHD Research Instructor in Psychiatry, Psychiatry
Kristen Louise Kroll, PHD Associate Professor of Developmental Biology, Molecular Biology and Pharmacology
Ronald J Krone, MD John E Simon Scholar in Medicine, Internal Medicine
Ronald J Krone, MD Professor of Medicine, Internal Medicine
Norton S Kronemer, MD Associate Professor of Clinical Pediatrics, Pediatrics
Catherine P Kruclayk, MD Assistant Professor of Anesthesiology, Anesthesiology
Elaine Susan Krul, PHD Adjunct Associate Professor of Medicine, Internal Medicine
Alexander S. Krupnick, MD Assistant Professor of Surgery (Cardiothoracic Surgery), Surgery
Thomas Kuciejczyk-Kernan, MD Instructor in Clinical Medicine, Internal Medicine
Ralph F Kuhlman, MD Assistant Professor of Clinical Medicine, Internal Medicine
Frederick Matthew Kuhlmann, MD Instructor in Medicine, Internal Medicine
Anthony Kulczycki Jr, MD Associate Professor of Medicine, Internal Medicine
Anthony Kulczycki Jr, MD Associate Professor of Molecular Microbiology, Molecular Microbiology
Shashikant Kulkarni, MS, PHD Associate Professor of Genetics, Genetics
Shashikant Kulkarni, MS, PHD Associate Professor of Pathology and Immunology, Pathology and Immunology
Shashikant Kulkarni, MS, PHD Associate Professor of Pediatrics, Pediatrics
Shashikant Kulkarni Siteman Cancer Center, Associate Professor of Pathology and Immunology, Division of Laboratory and Genomic Medicine, Washington University School of Medicine, 1998-2000: Visiting fellow, Imperial College, London, 2000-2004: Postdoctoral fellow, hematology, Washington University, St. Louis, 2004-2006: Research fellow, clinical cytogenetics, Harvard University, Boston, 1992: MS, medicine/human anatomy, SMS Medical College, Jaipur, India, 1998: PhD, medical genetics, All India Institute of Medical Sciences, New Dehli, India, Board Certified: 2006: American Board of Clinical Genetics, Clinical Cytogenetics
Ashok Kumar, MD Assistant Professor of Clinical Neurology, Neurology
Terrance T. Kummer, MD, PHD Instructor in Neurology (Pending Dean's Approval), Neurology
Robin A. Kundra, MD, PHD Instructor in Clinical Medicine, Internal Medicine
Denise Kung, MD Assistant Professor of Clinical Pediatrics, Pediatrics
David I. Kuperman, MD, PhD Instructor in Clinical Medicine, Internal Medicine
David I Kuperman Siteman Cancer Center, Instructor of Medicine, Division of Oncology, Section of Medical Oncology, Washington University School of Medicine, 2001-2002: Intern, medicine, Johns Hopkins University, Baltimore, 2002-2004: Resident, medicine, Johns Hopkins University, 2004-2007: Fellow, hematology and oncology, Washington University, St. Louis, 2001: MD, University of Arkansas for Medical Sciences, Little Rock, Primary Specialty: Head and neck cancer, Board Certified: 2004: American Board of Internal Medicine, Internal Medicine
Howard I. Kurz, MD, MEE Professor of Medicine, Internal Medicine
Abby Kushnir, MD Instructor in Pediatrics, Pediatrics
Steven M Kymes, PHD Research Associate Professor of Biostatistics, Division of Biostatistics
Steven M Kymes, PHD Research Associate Professor of Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Michael Kyriakos, MD Professor of Pathology and Immunology, Pathology and Immunology
Suzanne Nicole L'Ecuyer Instructor in Clinical Psychiatry (Child Psychiatry), Psychiatry
Adam J. LaBore, MD Associate Professor of Neurology, Neurology
Adam J. LaBore, MD Associate Professor of Orthopaedic Surgery, Orthopaedic Surgery
Michael J Lachtrup, OD Instructor in Ophthalmology and Visual Science, Ophthalmology and Visual Sciences
Jennifer S Ladage, MD Instructor in Clinical Pediatrics, Pediatrics
Christine Marie Ladd, MD Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Jack H Ladenson, PHD Oreel M Carroll and Lillian B Ladenson Professor of Clinical Chemistry in Pathology and Immunology, Pathology and Immunology
Jack H Ladenson, PHD Professor of Clinical Chemistry in Medicine, Internal Medicine
Stacie Sharon Laff, B MUS, MD Instructor in Clinical Pediatrics, Pediatrics
Richard Laforest, MS, PHD Associate Professor of Radiology, Radiology
Hing Hung H Lai, MD Assistant Professor of Surgery (Urologic Surgery), Surgery
Li-Ling Lai, Instructor in Clinical Pediatrics, Pediatrics

Anand Lakshminarasimhachar, MBBS, Assistant Professor of Anesthesiology, Anesthesiology

Roop Lal, MS, Instructor in Clinical Medicine, Internal Medicine

Tony C Lam, MD, Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology

Robert Louis Lamberg, MD, Associate Professor of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

Jack A Land, MD, Associate Professor of Clinical Pediatrics, Pediatrics

Robert Craig Lander, MD, Instructor in Clinical Orthopaedic Surgery, Orthopaedic Surgery

Daniel K Lane, MD, Instructor in Clinical Medicine (Dermatology), Internal Medicine

Michael A. Lane, MD, MS, Assistant Professor of Medicine, Internal Medicine

Barbara A Lanfer, Instructor in Audiology and Communication Sciences, Program in Audiology and Communication Sciences

Catherine Eckels Lang, MS, PHD, Associate Professor of Neurology, Neurology

Catherine Eckels Lang, MS, PHD, Associate Professor of Occupational Therapy, Program in Occupational Therapy

Catherine Eckels Lang, MS, PHD, Associate Professor of Physical Therapy, Program in Physical Therapy

Susan M Langhorst, ME, PHD, Assistant Professor of Radiology, Radiology

Gregory Mark Lanza, MD, MS, PHD, Professor of Biomedical Engineering, Department of Biomedical Engineering

Gregory Mark Lanza, MD, MS, PHD, Professor of Medicine, Internal Medicine

Susan Elizabeth Lanzendorf, AA, AS, PHD, Associate Professor of Obstetrics and Gynecology, Obstetrics and Gynecology

Susan E. Lanzendorf, Siteman Cancer Center, Associate Professor of Obstetrics and Gynecology, Division of Reproductive Endocrinology and Infertility, Washington University School of Medicine, 1988-1989: Postdoctoral research associate, Oregon Regional Primate Research Center, Beaverton, OR. 1987: PhD, biology, Old Dominion University/Eastern Virginia Medical School, Norfolk, Va.

Suzanne Elizabet Lapi, MS, PHD, Assistant Professor of Radiology, Radiology

Suzanne Lapi, Siteman Cancer Center, Assistant Professor of Radiology, Division of Radiological Sciences, Mallinckrodt Institute of Radiology, Washington University School of Medicine, 2007-2008: Postdoctoral fellow, radiochemistry, University of California, San Francisco, 2003: MSc, nuclear chemistry, Simon Fraser University, Burnaby, Canada, 2007: PhD, nuclear chemistry, Simon Fraser University

Paul Arthur Lapoint, AA, OD, Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

Claudia Gloria Lares, Instructor in Pediatrics, Pediatrics

Gina N LaRossa, MD, Instructor in Medicine, Internal Medicine

Douglas P. Larsen, MD, Assistant Professor of Neurology, Neurology

Linda J Larson-Prior, MA, PHD, Research Associate Professor of Neurology, Neurology

Linda J Larson-Prior, MA, PHD, Research Associate Professor of Radiology, Radiology

David Ernfrid Larson, PHD, Research Instructor in Genetics, Genome Center

John M Lasala, MD, PHD, Professor of Medicine, Internal Medicine

John M Lasala, MD, PHD, Professor of Surgery (Cardiothoracic Surgery), Surgery

Andrei Laszlo, MS, PHD, Associate Professor of Radiation Oncology, Radiation Oncology

Chakrapol Lattanand, MD, Assistant Professor of Anesthesiology, Anesthesiology

Steven A Lauter, MD, Assistant Professor of Clinical Medicine, Internal Medicine

Russell K Lawrence, MD, Adjunct Instructor in Pediatrics, Pediatrics

Steven J Lawrence, MD, MS, Assistant Professor of Medicine, Internal Medicine

Steven J Lawrence, Siteman Cancer Center, Assistant Professor of Medicine, Division of Infectious Diseases, Washington University School of Medicine, 1997-1998: Intern, internal medicine, Washington University, St. Louis, 1998-2000: Resident, internal
Jennifer S Lawton  , MD Professor of Surgery (Cardiothoracic Surgery), Surgery
Leland M Laycob  , MD Instructor in Clinical Pediatrics, Pediatrics
Patricia Lazaroff  , BN, MSN Adjunct Instructor in Obstetrics and Gynecology, Obstetrics and Gynecology
Richard Lee Lazaroff  , MD Professor of Clinical Pediatrics, Pediatrics
Susana Maria Lazarte  , MD Instructor in Medicine, Internal Medicine
Daniel Joseph Leary Jr, MD Assistant Professor of Clinical Radiology, Radiology
Caroline Kim Lee  , MD Assistant Professor of Pediatrics, Pediatrics
Cecilia Sungmin Lee  , MD Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Chris Cheng-Fu Lee  , MD, PHD Assistant Professor of Anesthesiology, Anesthesiology
Eileen May Lee  , MD Instructor in Medicine, Internal Medicine
Gary G Lee  , DOST Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Jin-Moo Lee  , MD, PHD Associate Professor of Neurology, Neurology
Jin-Moo Lee  , MD, PHD Associate Professor of Radiology, Radiology
Junsoo Alexander Lee  , MD Instructor in Medicine, Internal Medicine
Kim Lynette Lee  , MD Instructor in Clinical Medicine, Internal Medicine
Kirstin Lee Abel Lee  , MD Instructor in Pediatrics, Pediatrics
Steven F Lee  , MD Instructor in Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Wang Sik Lee  , MA, PHD Research Instructor in Medicine, Internal Medicine
Stephen S Lefrak  , MD Assistant Dean for the Humanities Program in Medicine, Associate Dean Curriculum
Stephen S Lefrak  , MD Professor of Medicine, Internal Medicine
Robert B Lehman  , MD Instructor in Clinical Medicine, Internal Medicine
Barbara L. Leighton  , MD Professor of Anesthesiology, Anesthesiology
Fanee J Lekkas  , MD, MS Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Walter Lemann III, MD Associate Professor of Clinical Neurology, Neurology
Sarah Jean Lenhardt  , MD Instructor in Pediatrics (Pending Dean's Approval), Pediatrics
Lawrence G Lenke  , MD Jerome J. Gilden M.D. Distinguished Professor of Orthopaedic Surgery, Orthopaedic Surgery
Lawrence G Lenke  , MD Professor of Neurological Surgery, Neurological Surgery
Deborah J. Lenschow  , MD, PHD Assistant Professor of Medicine, Internal Medicine
Deborah J. Lenschow  , MD, PHD Assistant Professor of Pathology and Immunology, Pathology and Immunology
Deborah J. Lenschow  Siteman Cancer Center, Assistant Professor of Medicine, Division of Rheumatology, Washington University School of Medicine, 1998-2000: Intern and resident, internal medicine, Washington University, St. Louis, 2000-2002: Fellow, rheumatology, Washington University, 2002-2004: Research fellow, rheumatology, Washington University, 1998: PhD, immunology, University of Chicago, 1998: MD, University of Chicago
Eric J Lenze  , MD Professor of Psychiatry, Psychiatry
Shannon N Lenze  , MA, PHD Assistant Professor of Psychiatry, Psychiatry
Jeffrey R. Leonard  , MD Associate Professor of Neurological Surgery, Neurological Surgery
Jeffrey R. Leonard  , MD Associate Professor of Pediatrics, Pediatrics
Julie C. Leonard  , BBA, M PH, MD Assistant Professor of Pediatrics, Pediatrics

F. Timothy Leonberger , MS, PHD Instructor in Clinical Medical Psychology in Psychiatry (On Staff at Malcolm Bliss Mental Health Center), Psychiatry

Christina Lessov-Schlaggar , PHD Research Assistant Professor of Psychiatry, Psychiatry

Alison M Leston , MD, PHD Assistant Professor of Clinical Neurology, Neurology

Daisy W Leung , PHD Research Assistant Professor of Biochemistry and Molecular Biophysics, Biochemistry and Molecular Biophysics

Daisy W Leung , PHD Research Assistant Professor of Pathology and Immunology, Pathology and Immunology

Eric Claude Leuthardt , MD Associate Professor of Neurobiology, Anatomy and Neurobiology

Eric Claude Leuthardt , MD Associate Professor of Neurological Surgery, Neurological Surgery


Marc Stephen Levin , MD Professor of Medicine, Internal Medicine

Mark David Levin , MD Instructor in Pediatrics, Pediatrics

Marvin E Levin , MD Professor of Clinical Medicine, Internal Medicine

Laurence A Levine , DDENT, MA, MD Associate Professor of Clinical Otolaryngology, Otolaryngology

Mark D Levine , MD Associate Professor of Emergency Medicine in Medicine, Internal Medicine

Robert G Levitt , MD Associate Professor of Radiology, Radiology

Edward S Levy , MD Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology

Jerome F Levy  Professor Emeritus of Surgery (General Surgery), Surgery

Kenneth C Levy , MD Instructor in Clinical Pediatrics, Pediatrics

Amanda Lark Lewis , PHD Assistant Professor of Molecular Microbiology, Molecular Microbiology

Amanda Lark Lewis , PHD Assistant Professor of Obstetrics and Gynecology, Obstetrics and Gynecology

Collins E Lewis , M PH, MD Associate Professor Emeritus of Psychiatry, Psychiatry

Lawrence M Lewis , AA, MD Professor of Emergency Medicine in Medicine, Internal Medicine

Scott W Lewis , OD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

Warren Graybill Lewis , PHD Research Instructor in Medicine, Internal Medicine

James S. Lewis Jr, MD Associate Professor of Otolaryngology, Otolaryngology

James S. Lewis Jr, MD Associate Professor of Pathology and Immunology, Pathology and Immunology

Timothy J Ley , MD Lewis T and Rosalind B Apple Professor of Medicine, Internal Medicine

Timothy J Ley , MD Professor of Genetics, Genetics

Ben Wen Li , MD, PHD Research Associate Professor of Medicine, Internal Medicine

Hua Li , PHD Assistant Professor of Radiation Oncology, Radiation Oncology

Hui Li , MS, PHD Assistant Professor of Radiation Oncology, Radiation Oncology

Li Li , MD, PHD Instructor in Clinical Medicine, Internal Medicine

Mingjie Li , MD, PHD Research Assistant Professor of Neurology, Neurology

Shunqiang Li , PHD Research Instructor in Medicine, Internal Medicine
Tingting Li, MD Assistant Professor of Medicine, Internal Medicine
Weikai Li, MS, PHD Assistant Professor of Biochemistry and Molecular Biophysics, Biochemistry and Molecular Biophysics
Wenjun Li, MD, MS Research Assistant Professor of Surgery (Cardiothoracic Surgery), Surgery
Min Lian, M PH, MD, PHD Research Assistant Professor of Medicine, Internal Medicine
Stephen Yuan-Tung Liang, MD Instructor in Medicine, Internal Medicine
Steve Ming-Che Liao, MD Instructor in Pediatrics, Pediatrics
Helen Liapis, MD Professor of Medicine, Internal Medicine
Helen Liapis, MD Professor of Pathology and Immunology, Pathology and Immunology
Jeffery Lichtenhan, BAS, MSSH, PHD Research Instructor in Otolaryngology, Otolaryngology
Amy K Licis, MD Instructor in Neurology, Neurology
James Walter Lieber, OD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Harvey Liebhaber, MD Associate Professor of Clinical Medicine, Internal Medicine
Huiping C Lieser Research Instructor in Occupational Therapy (Pending Dean's Approval), Program in Occupational Therapy
Charles H Lieu, MD Instructor in Clinical Medicine, Internal Medicine
Judith E Lieu, MD Associate Professor of Otolaryngology, Otolaryngology
Barry Light, MD, PHD Associate Professor of Clinical Pediatrics, Pediatrics
Anna Lijowska, MD Assistant Professor of Pediatrics, Pediatrics
Stephen Bradley Lillard, MD Instructor in Clinical Medicine, Internal Medicine
Michael Lillmars, DDS Instructor in Clinical Otolaryngology (DDS), Otolaryngology
David D Limbrick Jr, MD, PHD Assistant Professor of Neurological Surgery, Neurological Surgery
David D Limbrick Jr, MD, PHD Assistant Professor of Pediatrics, Pediatrics
Cheng Ho Jimmy Lin, MS, PHD Research Instructor in Pathology and Immunology, Pathology and Immunology
Congxing Lin, PHD Research Instructor in Medicine, Internal Medicine
Hsiu-San Lin, MD, PHD Professor Emeritus of Radiation Oncology, Radiation Oncology
John Chao-Chun Lin, MD Assistant Professor of Pediatrics, Pediatrics
Michael Fu-Yen Lin, MD, MS Assistant Professor of Radiology, Radiology
Michael Yun Lin, MD Assistant Professor of Medicine, Internal Medicine
Tammy Lin, MD Adjunct Assistant Professor of Medicine, Internal Medicine
Yiing Lin, MD, PHD Assistant Professor of Surgery (General Surgery), Surgery
Penelope Alathea Lind Adjunct Instructor in Psychiatry, Psychiatry
Brian Richard Lindman, MA, MD Assistant Professor of Medicine, Internal Medicine
David C Linehan, MD Professor of Surgery (General Surgery), Surgery
Gerald P Linette, MD, PHD Associate Professor of Medicine, Internal Medicine
Gerald P Linette, MD, PHD Associate Professor of Neurology, Neurology
Christopher J Lingle, PHD Professor of Anesthesiology, Anesthesiology
Christopher J Lingle, PHD Professor of Neurobiology, Anatomy and Neurobiology
Daniel C Link, MD Alan A and Edith L Wolff Professor of Medicine, Internal Medicine
Daniel C Link, MD Professor of Pathology and Immunology, Pathology and Immunology
Robert D Lins, MD Instructor in Clinical Pediatrics, Pediatrics
Michael Brayer Lippmann, MD Professor of Medicine, Internal Medicine

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Mauricio Lisker-Melman, MD Professor of Medicine, Internal Medicine
Jay L Liss, MD Associate Professor of Clinical Psychiatry, Psychiatry
Mary Kathryn Liszewski Research Instructor in Medicine, Internal Medicine
Howard S Lite, MA, MD Instructor in Clinical Medicine, Internal Medicine
Adam Daniel Littich, MD Instructor in Medicine, Internal Medicine
Blake Allen Little, MD Instructor in Clinical Pediatrics, Pediatrics
Jianmei Liu, MD, MS Instructor in Clinical Medicine, Internal Medicine
Jingxia Liu, MS, PHD Research Instructor in Biostatistics, Division of Biostatistics
Qianjin Liu, MD, PHD Assistant Professor of Anesthesiology, Anesthesiology
Qin Liu Assistant Professor of Anesthesiology, Anesthesiology
Ta-Chiang Liu, MD, PHD Assistant Professor of Pathology and Immunology (Pending Executive Faculty Approval), Pathology and Immunology
Xinping Liu, MS, PHD Research Instructor in Medicine, Internal Medicine
Ying Liu, MD, PHD Instructor in Surgery (Public Health Sciences), Surgery
Yongjian Liu, MS, PHD Research Assistant Professor of Radiology (Pending Executive Faculty Approval), Radiology
Zhenyi Liu, MS, PHD Research Instructor in Developmental Biology, Molecular Biology and Pharmacology
Rebecca Lobb, PHD Assistant Professor of Surgery (Public Health Sciences), Surgery
Albert C Lockhart, MD, MHS Associate Professor of Medicine, Internal Medicine
Ellen M Lockhart, MD Associate Professor of Anesthesiology, Anesthesiology
Ellen M Lockhart, MD Vice Chairman of Anesthesiology, Anesthesiology
Thomas J Lockhart Instructor in Anesthesiology, Anesthesiology
Christina M. Lockwood, PHD Assistant Professor of Pathology and Immunology, Pathology and Immunology
Jennifer K Lodge, PHD Associate Dean for Research, Assoc. Dean for Research
Jennifer K Lodge, PHD Professor of Molecular Microbiology, Molecular Microbiology
Irfan J Lodhi, MS, PHD Research Instructor in Medicine, Internal Medicine
Lola J Loeb, MA, MD Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Arthur D Loewy, PHD Professor of Anatomy and Neurobiology, Anatomy and Neurobiology
Beverly A Logan-Morrison, MD Instructor in Clinical Medicine, Internal Medicine
Timothy M Lohman, PHD Brennecke Professor of Biophysics in Biochemistry and Molecular Biophysics, Biochemistry and Molecular Biophysics
Andrea Loiselle, M PH, MD Instructor in Medicine (Pending Dean's Approval), Internal Medicine
Jane Loitman, MD, MS Assistant Professor of Clinical Neurology, Neurology
Jane Loitman, MD, MS Instructor in Clinical Medicine, Internal Medicine
Alan M Londe, MD Instructor in Clinical Surgery (General Surgery), Surgery
Stanley L London, MD Associate Professor Emeritus of Clinical Surgery (General Surgery), Surgery
Fanxin Long, MA, PHD Associate Professor of Developmental Biology, Molecular Biology and Pharmacology
Fanxin Long, MA, PHD Associate Professor of Medicine, Internal Medicine
Ryan Eric Longman, MD Assistant Professor of Obstetrics and Gynecology, Obstetrics and Gynecology
Gregory D Longmore, MD, MS Professor of Cell Biology and Physiology, Cell Biology and Physiology
Gregory D Longmore, MD, MS Professor of Medicine, Internal Medicine
**Greg D Longmore**  Siteman Cancer Center, Professor of Medicine, Division of Oncology, and Co-Director, Section of Molecular Oncology, Washington University School of Medicine, 1983-1985: Intern and resident, internal medicine, New England Deaconess Hospital and Harvard Medical School, Boston, 1985-1986: Visiting scientist, Massachusetts Institute of Technology, Boston, 1986-1987: Chief resident, internal medicine, New England D, 1979: MS, biochemistry, University of Toronto, 1983: MD, McGill University, Montreal, Board Certified., 1986: American Board of Internal Medicine, Internal Medicine

1989: American Board of Medicine, Medical Oncology

**James F Loomis Jr, MBA, MD** Instructor in Clinical Medicine, Internal Medicine

**Glenn Lopate , MD** Associate Professor of Neurology, Neurology

**Latisha D Love-Gregory , PHD** Research Assistant Professor of Medicine, Internal Medicine

**Michael Lovett , PHD** Professor of Genetics, Genetics

**Michael Lovett , PHD** Professor of Pediatrics, Pediatrics

**Robert Douglas Lowe , DDENT** Instructor in Clinical Otolaryngology (DMD), Otolaryngology

**Jeffrey A Lowell , MD** Professor of Pediatrics, Pediatrics

**Jeffrey A Lowell , MD** Professor of Surgery (General Surgery), Surgery

**Zhi Hong Lu , PHD** Research Assistant Professor of Surgery (Urologic Surgery), Surgery

**Olga Y. Lubman , PHD** Research Instructor in Pathology and Immunology, Pathology and Immunology

**Anthony J Lubniewski , MD** Professor of Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

**Herbert Lubowitz , MD** Associate Professor of Clinical Medicine, Internal Medicine

**Joan L Luby , MD** Professor of Psychiatry (Child Psychiatry), Psychiatry

**Brendan Patrick Lucey , MD** Instructor in Neurology, Neurology

**Philip A Ludbrook , MBBS** Professor of Medicine, Internal Medicine

**Philip A Ludbrook , MBBS** Professor of Psychiatry, Psychiatry

**Philip A Ludbrook , MBBS** Professor of Radiology, Radiology

**Kenneth M Ludmerer , MA, MD** Mabel Dorn-Reeder Distinguished Professor of the History of Medicine, Internal Medicine

**Kenneth M Ludmerer , MA, MD** Professor of Medicine, Internal Medicine

**Mark A Ludwig , MD** Instructor in Clinical Surgery (General Surgery), Surgery

**Lauren Michelle Ludwig Lee , MD** Instructor in Clinical Medicine, Internal Medicine

**Gregg T Lueder , MD** Professor of Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

**Gregg T Lueder , MD** Professor of Pediatrics, Pediatrics


1992: American Board of Ophthalmology

**Susan L Luedke , MD** Instructor in Clinical Medicine, Internal Medicine

**Janet D Luhmann , MD** Associate Professor of Pediatrics, Pediatrics

**Scott J Luhmann , MD** Associate Professor of Orthopaedic Surgery, Orthopaedic Surgery

**Peter David Lukasiewicz , PHD** Professor of Neurobiology, Anatomy and Neurobiology

**Peter David Lukasiewicz , PHD** Professor of Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

**Angela Kumari Lumba , AS, MD** Instructor in Pediatrics (Pending Dean's Approval), Pediatrics

**Jingqin Luo , MS, MS1, PHD** Instructor in Biostatistics, Division of Biostatistics

**Jingqin (Rosy) Luo** Siteman Cancer Center, Instructor of Biostatistics, Washington University School of Medicine, 2001: MS, statistics, Renmin University, Beijing, 2004: MS, statistics, Duke University, Durham, N.C., 2006: PhD, statistics, Duke University
Patrick Joseph Lustman, MSW, PHD Professor of Psychiatry, Psychiatry
Patrick Joseph Lustman, MSW, PHD Professor of Psychology, Department of Psychology
Barbara A Lutey, MD, MLS Instructor in Medicine, Internal Medicine
Isaac P Lynch, MD Assistant Professor of Anesthesiology, Anesthesiology
John P Lynch, MD Professor of Medicine, Internal Medicine
Michael T. Lynskey, MS, PHD Professor of Psychiatry, Psychiatry
Alan P Lyss, MD Associate Professor of Clinical Medicine, Internal Medicine
Carl A Lyss, MD Assistant Professor of Clinical Medicine, Internal Medicine
Cynthia Xiuguang Ma, MD, PHD Associate Professor of Developmental Biology, Molecular Biology and Pharmacology
Liang Ma, PHD Associate Professor of Medicine (Dermatology), Internal Medicine
Richard W Maack, MD Instructor in Clinical Otolaryngology, Otolaryngology
Robert R Mac Donald III, MD Instructor in Clinical Otolaryngology, Otolaryngology
Luigi Maccotta, MD, PHD Assistant Professor of Neurology, Neurology
Christine L. MacDonald, MS, PHD Research Instructor in Neurology, Neurology
Robert H Mach, PHD Professor of Biochemistry and Molecular Biophysics, Biochemistry and Molecular Biophysics
Robert H Mach, PHD Professor of Cell Biology and Physiology, Cell Biology and Physiology
Robert H Mach, PHD Professor of Radiology, Radiology
Robert H Mach Siteman Cancer Center, Professor of Radiology, Division of Radiological Sciences, Mallinckrodt Institute of Radiology, Washington University School of Medicine, 1983-1985: Predoctoral fellow, medicinal chemistry, State University of New York, Buffalo, 1985: PhD, medicinal chemistry, State University of New York, Buffalo
Colin Mackenzie Instructor in Clinical Psychiatry, Psychiatry
Lisa Marie Mackey, OD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Susan E Mackinnon, MD Professor of Occupational Therapy, Program in Occupational Therapy
Susan E Mackinnon, MD Professor of Otolaryngology, Otolaryngology
Susan E Mackinnon, MD Sydney M., Jr. and Robert H. Shoenberg Professor of Surgery (Plastic and Reconstructive Surgery), Surgery
George Andrew Macones, MD, MS Head of the Department of Obstetrics and Gynecology, Obstetrics and Gynecology
George Andrew Macones, MD, MS Mitchell and Elaine Yanow Professor of Obstetrics and Gynecology, Obstetrics and Gynecology
John C. Madden, MD Instructor in Clinical Pediatrics, Pediatrics
Lisa Marie Madden, MD, MS Assistant Professor of Pediatrics, Pediatrics
Pamela A Madden, MS, PHD Professor of Psychiatry, Psychiatry
Tessa E Madden, M PHD, MD Assistant Professor of Obstetrics and Gynecology, Obstetrics and Gynecology
Pamela AF Madden Siteman Cancer Center, Professor of Psychiatry, Washington University School of Medicine, 1992-1994: Postdoctoral fellow, psychiatry, Washington University, St. Louis, 1983: MS, child development and care, University of Pittsburgh, 1992: PhD, psychology in education, University of Pittsburgh
Jose A Madrazo, MD Assistant Professor of Medicine, Internal Medicine
William Edwin Magee, MD Associate Professor of Clinical Medicine, Internal Medicine
Leonard B Maggi Jr, PHD Research Assistant Professor of Medicine, Internal Medicine
Faidon Magkos, PHD Research Assistant Professor of Medicine, Internal Medicine
Vincent J Magrini, PHD Research Assistant Professor of Genetics, Genome Center
Christopher A Maher, PHD Assistant Director of The Genome Institute, Genome Center
Christopher A Maher, PHD Assistant Professor of Medicine, Internal Medicine
Mohamed Mahjoub Assistant Professor of Medicine, Internal Medicine
Muhammad Saleem Mahmood, MD Instructor in Clinical Radiation Oncology, Radiation Oncology
Robert John Mahoney, MD Assistant Professor of Medicine, Internal Medicine
Sarah Graham Majcina, MD Instructor in Pediatrics, Pediatrics
Elaine Michelle Majerus, MD, PHD Assistant Professor of Cell Biology and Physiology, Cell Biology and Physiology
Elaine Michelle Majerus, MD, PHD Assistant Professor of Medicine, Internal Medicine
Philip W Majerus, MD Professor of Biochemistry and Molecular Biophysics, Biochemistry and Molecular Biophysics
Philip W Majerus, MD Professor of Medicine, Internal Medicine
Surajit Majumdar, MD Instructor in Clinical Medicine, Internal Medicine
Majesh Makan, MD Associate Professor of Medicine, Internal Medicine
Kamlesh R Makwana, DDENT Instructor in Clinical Otolaryngology (DDS), Otolaryngology
Ranjan P Malhotra, MD Instructor in Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Mohsin Ilyas Malik, MBBS Instructor in Clinical Medicine, Internal Medicine
Omar Malik, MD Instructor in Anesthesiology, Anesthesiology
Virgil Lee Malmberg, MD, MS Instructor in Clinical Psychiatry, Psychiatry
Horacio M Maluf Associate Professor of Pathology and Immunology, Pathology and Immunology
Gita J Malur Instructor in Clinical Pediatrics, Pediatrics
Daniel T. Mamah, MD Assistant Professor of Psychiatry, Psychiatry
Maria Maminta-Streiff Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Mark John Manary, MD Helene B. Roberson Professor of Pediatrics, Pediatrics
David Jon Mancuso, MS, PHD Research Instructor in Medicine, Internal Medicine
Mary Elizabeth Mani Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Naganathan B Mani, MBBS, MS Assistant Professor of Radiology, Radiology
Naganathan B. Mani Siteman Cancer Center, Assistant Professor of Radiology, Division of Diagnostic Radiology, Section of Interventional Radiology, Mallinckrodt Institute of Radiology, Washington University School of Medicine, 1999-2002: Senior resident, Post Graduate Institute of Medical Education and Research, Chandigarh, India, 2007-2008: Fellow, vascular interventional radiology, University of Miami, 1995: MBBS, Stanley Medical College, Madras, India, 1998: MD, Post Graduate Institute of Medical Education and Research, Chandigarh, India, Primary Specialty: Biliary drainage, chemoembolization, kidney cancer, liver cancer, port placement, radioembolization, radiofrequency ablation
Hersh Maniar, MD Assistant Professor of Medicine, Internal Medicine
Hersh Maniar, MD Assistant Professor of Surgery (Cardiothoracic Surgery), Surgery
Shivaprasad Gowda Manjappa, MBBS, MD Instructor in Clinical Medicine, Internal Medicine
Keith Mankowitz, MD Associate Professor of Medicine, Internal Medicine
Caroline Mann, MD, MS Assistant Professor of Medicine (Dermatology), Internal Medicine
Douglas L. Mann, MD Professor of Cell Biology and Physiology, Cell Biology and Physiology
Douglas L. Mann, MD Tobias and Hortense Lewin Professor of Medicine, Internal Medicine
Marshall S Manne, DDS, MS Instructor in Clinical Otolaryngology (DDS), Otolaryngology
Arun Reddy Mannem, MD Instructor in Medicine, Internal Medicine
Charles Irwin Mannis, MD Instructor in Clinical Orthopaedic Surgery, Orthopaedic Surgery
John F Mantovani, MD Assistant Professor of Clinical Pediatrics, Pediatrics
John F Mantovani, MD Associate Professor of Clinical Neurology, Neurology
Xianrong Mao, MS, PHD Research Instructor in Anesthesiology, Anesthesiology
Soe S Mar, MD Associate Professor of Neurology, Neurology
Soe S Mar, MD Associate Professor of Pediatrics, Pediatrics
Daniel Scott Marcus, PHD Assistant Professor of Radiology, Radiology
Daniel S. Marcus Siteman Cancer Center, Research Assistant Professor of Radiology, Washington University School of Medicine, 2001: PhD, neuroscience, Washington University, St. Louis
Elaine Rene Mardis, PHD Professor of Genetics, Genome Center
Elaine Rene Mardis, PHD Professor of Molecular Microbiology, Molecular Microbiology
Christopher R Maret, MD Instructor in Clinical Medicine, Internal Medicine
Julie Ann Margenthaler, MD Associate Professor of Surgery (General Surgery), Surgery
Robert P Margolis, MD Assistant Professor of Clinical Neurology, Neurology
Sarah K Margolis, MD Associate Professor of Clinical Medicine, Internal Medicine
Jay Michael Marion, MD Assistant Professor of Clinical Medicine, Internal Medicine
Joanne Markham, MS Research Associate Professor of Radiology, Radiology
Mary A. Markiewicz, PHD Research Assistant Professor of Pathology and Immunology, Pathology and Immunology
David Bradley Marrs, MD Instructor in Clinical Medicine (Dermatology), Internal Medicine
Jonas Marschall, MD Assistant Professor of Medicine, Internal Medicine
Bess Adkins Marshall, MD Assistant Professor of Cell Biology and Physiology, Cell Biology and Physiology
Bess Adkins Marshall, MD Associate Professor of Pediatrics, Pediatrics
Garland R Marshall, PHD Professor of Biochemistry and Molecular Biophysics, Biochemistry and Molecular Biophysics
Garland R Marshall, PHD Professor of Biomedical Engineering, Department of Biomedical Engineering
Jay Phillips Marshall II, MD Assistant Professor of Clinical Medicine, Internal Medicine
Ann G Martin, MD Associate Professor of Medicine (Dermatology), Internal Medicine
Carol R. Martin, MD Instructor in Clinical Medicine, Internal Medicine
Carolyn Marie Martin, MD Assistant Professor of Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Daniel Richard Martin, MS Research Instructor in Medicine, Internal Medicine
Nathan Russell Martin, MD Instructor in Medicine, Internal Medicine
Nicholas Gordon Martin Adjunct Instructor in Psychiatry, Psychiatry
Philip Latham Martin, MD Associate Professor of Clinical Otolaryngology, Otolaryngology
Thomas F Martin, MD Associate Professor of Medicine, Internal Medicine
Timothy J. Martin, MA, MD Assistant Professor of Medicine, Internal Medicine
Wade H Martin III, MD Associate Professor of Medicine, Internal Medicine
John C Martz, MD Associate Professor of Clinical Pediatrics, Pediatrics
Jerald Arthur Maslanko, MD Instructor in Clinical Medicine, Internal Medicine
Mary Vest Mason, MBA, MD  Instructor in Clinical Medicine, Internal Medicine
Joan Alice Mass, MD  Assistant Professor of Clinical Medicine, Internal Medicine
Leslie Stewart Massad, MD  Professor of Obstetrics and Gynecology, Obstetrics and Gynecology
Matthew J Matava, MD  Professor of Orthopaedic Surgery, Orthopaedic Surgery
Matthew J Matava, MD  Professor of Physical Therapy, Program in Physical Therapy
Alicia B Matayoshi  Instructor in Clinical Otolaryngology (DDS), Otolaryngology
Stanley Mathew, MBBS  Instructor in Clinical Medicine, Internal Medicine
Jose Mathews, MD  Assistant Professor of Psychiatry, Psychiatry
Katherine Jahnige Mathews, M PH, MA, MD  Adjunct Associate Professor of Obstetrics and Gynecology, Obstetrics and Gynecology
Patrice Mathews, MD  Instructor in Clinical Pediatrics, Pediatrics
Amit Mathur, MBBS, MD  Professor of Pediatrics, Pediatrics
Scot J. Matkovich, PHD  Assistant Professor of Medicine, Internal Medicine
Anthony J-P Mattaline, DOST  Assistant Professor of Clinical Medicine, Internal Medicine
Brent D. Matthews, MD  Professor of Surgery (General Surgery), Surgery
Claire Matthews, MA, PHD  Adjunct Assistant Professor of Otolaryngology (Speech Pathology), Otolaryngology
John W Matthews, D SC, MEE  Research Associate Professor of Radiation Oncology, Radiation Oncology
Gregory Warren Mattingly, MD  Assistant Professor of Clinical Psychiatry, Psychiatry
Henry E Mattis, MD  Instructor in Clinical Medicine, Internal Medicine
Marvin M Maurer Jr, MD  Assistant Professor of Clinical Pediatrics, Pediatrics
Ariane E May, M PH, MD  Associate Professor of Clinical Pediatrics, Pediatrics
Ben R Mayes Jr, MD  Assistant Professor of Clinical Radiology, Radiology
John E. Mazuski, MD, MS, PHD  Professor of Surgery (General Surgery), Surgery
Gabriel Mbalaviele, MA, PHD  Research Associate Professor of Medicine, Internal Medicine
James P Mc Carter, MD, PHD  Adjunct Professor of Genetics, Genome Center
Audrey McAlinden, PHD  Assistant Professor of Cell Biology and Physiology, Cell Biology and Physiology
Audrey McAlinden, PHD  Assistant Professor of Orthopaedic Surgery, Orthopaedic Surgery
Rebecca P McAlister, MD  Associate Dean for Graduate Medical Education, Graduate Medical Education
Rebecca P McAlister, MD  Professor of Obstetrics and Gynecology, Obstetrics and Gynecology
William H McAlister, MD  Professor of Radiology, Radiology
William H McAlister, MD  Professor of Radiology in Pediatrics, Pediatrics
John D McAllister, MD  Professor of Anesthesiology, Anesthesiology
John D McAllister, MD  Professor of Pediatrics, Pediatrics
Christopher M McAndrew, MD  Assistant Professor of Orthopaedic Surgery, Orthopaedic Surgery
Jina L McAtee  Assistant Professor of Clinical Pediatrics, Pediatrics
Mark P. McAvoy, MEE, PHD  Research Assistant Professor of Radiology, Radiology
Megan McBride, Instructor in Clinical Pediatrics, Pediatrics

Marcia June McCabe, MA, PHD, Associate Professor of Psychiatry, Psychiatry

Michael E McCadden, MD, Instructor in Clinical Medicine (Dermatology), Internal Medicine

Kimberli McCallum, MD, Assistant Professor of Clinical Psychiatry (Child Psychiatry), Psychiatry

Timothy Joseph McCann, MD, Instructor in Clinical Medicine, Internal Medicine

Christopher E McCarthy, MD, Instructor in Clinical Medicine, Internal Medicine

Margaret McCarthy, Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology

Scott A McClain, DDENT, Instructor in Clinical Otolaryngology (DDS), Otolaryngology

Donte D McClary, MD, Instructor in Clinical Medicine, Internal Medicine

Jonathan E McConathy, MD, PHD, Assistant Professor of Radiology, Radiology

Jeremy James McCormick, MD, Assistant Professor of Orthopaedic Surgery, Orthopaedic Surgery

Molly Ann McCormick, MD, Assistant Professor of Anesthesiology, Anesthesiology

Scott McCormick III, MD, Assistant Professor of Clinical Psychiatry, Psychiatry

Douglas E McCoy, MD, Instructor in Clinical Psychiatry, Psychiatry

Leslie Rose McCrary-Etuk, MD, Instructor in Clinical Medicine, Internal Medicine

Vivia Van Dyne McCutcheon, MD, MS, Research Assistant Professor of Psychiatry, Psychiatry

Michael L McDaniel, MS, PHD, Professor of Pathology and Immunology, Pathology and Immunology

Daniel S McDonald, MD, Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology

Douglas J. McDonald, MD, Professor of Orthopaedic Surgery, Orthopaedic Surgery

Jay R. McDonald, MD, Assistant Professor of Medicine, Internal Medicine

Douglas J McDonald, Siteman Cancer Center, Professor of Orthopaedic Surgery, Washington University School of Medicine, 1982-1987: Resident, orthopaedic surgery, Mayo Graduate School of Medicine, Rochester, Minn., 1987: Fellow, orthopaedic oncology, Mayo Graduate School of Medicine, 1988: Fellow, orthopaedic oncology, University di Bologna, Bologna, Italy, 1982: MD, University of Minnesota, Minneapolis, 1987: MS, Orthopaedic surgery, Mayo Graduate School of Medicine, Rochester, Minn., Primary Specialty: Benign and malignant bone tumors, Ewing's sarcoma, Board Certified.; 1990, 2001: American Board of Orthopaedic Surgery

Debra Ann McDonnell, AS, DPT, MS, Assistant Professor of Orthopaedic Surgery, Orthopaedic Surgery

Debra Ann McDonnell, AS, DPT, MS, Assistant Professor of Physical Therapy, Program in Physical Therapy

Mary Kate McDonnell, DPT, MHS, Assistant Professor of Orthopaedic Surgery, Orthopaedic Surgery

Mary Kate McDonnell, DPT, MHS, Assistant Professor of Physical Therapy, Program in Physical Therapy

Mary Kate McDonnell, DPT, MHS, Associate Director of Residencies and Fellowships in Physical Therapy, Program in Physical Therapy

Cheryl Riddle McDonough, MD, Instructor in Medicine, Internal Medicine

Patricia Navarro Mcgee, Instructor in Orthopaedic Surgery, Orthopaedic Surgery

Patricia Navarro Mcgee, Instructor in Physical Therapy, Program in Physical Therapy

Janet B McGill, MA, MD, Professor of Medicine, Internal Medicine

Murray D McGrady, MD, Instructor in Clinical Otolaryngology, Otolaryngology

Mark E. McGranahan, MD, Instructor in Clinical Pediatrics, Pediatrics

Patricia A McGuire, MD, Instructor in Clinical Surgery (Plastic and Reconstructive Surgery), Surgery

Leslie Denise McIntosh, MA, PHD, Research Instructor in Pathology and Immunology, Pathology and Immunology

Jonathan L McJunkin, MD, Assistant Professor of Otolaryngology, Otolaryngology

Oliver McKee, MD, Instructor in Clinical Medicine (Dermatology), Internal Medicine
Clark R McKenzie, MD Instructor in Clinical Medicine, Internal Medicine
Heather McKenzie, MD Instructor in Anesthesiology, Anesthesiology
Frances T McKinney Instructor in Clinical Medicine, Internal Medicine
John W McKinney, MD Instructor in Clinical Otolaryngology, Otolaryngology
Thomas Casey McKinney, MD Professor of Clinical Pediatrics, Pediatrics
Robert Carolin McKinstry III, MD, MS, PHD Professor of Pediatrics, Pediatrics
Robert Carolin McKinstry III, MD, MS, PHD Professor of Radiology, Radiology
Robert M McMahon, JD, MD Instructor in Clinical Medicine, Internal Medicine
William A McManus, MD Instructor in Pediatrics, Pediatrics
Amy McQueen, MA, PHD Research Assistant Professor of Medicine, Internal Medicine
Robert Paul Mecham, PhD Alumni Endowed Professor of Cell Biology and Physiology, Cell Biology and Physiology
Robert Paul Mecham, PhD Professor of Biomedical Engineering, Department of Biomedical Engineering
Robert Paul Mecham, PhD Professor of Medicine, Internal Medicine
Robert Paul Mecham, PhD Professor of Pediatrics, Pediatrics
Robert P Mecham Siteman Cancer Center, Alumni Endowed Professor of Cell Biology and Physiology, Washington University School of Medicine, 1976-1977: Postdoctoral fellowship, biochemistry, Boston University, 1967: PhD, biochemistry, Boston University
Denise Andrea Meckler, MD Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Gerald Medoff, MD Lecturer in Medicine, Internal Medicine
Gerald Medoff, MD Professor Emeritus of Medicine, Internal Medicine
Nalini K Mehta, MD Instructor in Clinical Pediatrics, Pediatrics
Fernando Melkun, MD Instructor in Anesthesiology, Anesthesiology
Vincent Michael Mennick, MD Instructor in Radiology, Radiology
Gary Jay Meltz, MD Instructor in Clinical Medicine, Internal Medicine
Robert S Mendelsohn, MD Associate Professor of Clinical Medicine, Internal Medicine
Maithilee D Menezes, MD Assistant Professor of Otolaryngology (Pending Executive Faculty Approval), Otolaryngology
Christine Onsy Menias, MD Professor of Radiology, Radiology
Steven James Mennerick, PhD Professor of Neurobiology, Anatomy and Neurobiology
Steven James Mennerick, PhD Professor of Psychiatry, Psychiatry
Paul A Mennes, MD Professor of Clinical Medicine, Internal Medicine
P Aravindaksha Menon, MD Instructor in Clinical Pediatrics, Pediatrics
Ronald L Mera, MD Instructor in Clinical Medicine, Internal Medicine
Robert W Mercer, PhD Professor of Cell Biology and Physiology, Cell Biology and Physiology
Sarah J. Mermelstein, MD Instructor in Pediatrics, Pediatrics
Diane F Merritt, MD Professor of Obstetrics and Gynecology, Obstetrics and Gynecology
John P Metzler, MD Associate Professor of Neurology, Neurology

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John P Metzler, MD  Associate Professor of Orthopaedic Surgery, Orthopaedic Surgery
Adam Vogeler Meyer, MD  Instructor in Medicine, Internal Medicine
Jay L Meyer, MD  Associate Professor of Clinical Psychiatry, Psychiatry
Mary Shaughnessy Meyer  Assistant Professor of Clinical Pediatrics, Pediatrics
Bryan F Meyers, MD  Patrick and Joy Williamson Endowed Professor of Surgery (Cardiothoracic Surgery), Surgery
Jerry R Meyers, MD  Associate Professor of Clinical Surgery (General Surgery), Surgery
1999: American Board of Thoracic Surgery, Thoracic Surgery
Rabya Mian, MBBS  Instructor in Clinical Medicine, Internal Medicine
Craig Anthony Micchelli, PHD  Assistant Professor of Developmental Biology, Molecular Biology and Pharmacology
Craig A. Micchelli Siteman Cancer Center, Assistant Professor of Developmental Biology, Washington University School of Medicine, 2000-2006: Postdoctoral fellow, Harvard Medical School, Boston, 1999: PhD, neurobiology, University of Wisconsin, Madison
Gina Michael, MD  Instructor in Clinical Medicine, Internal Medicine
Jeff Michael Michalski, MBA, MD  Carlos Perez Distinguished Professor of Radiation Oncology, Radiation Oncology
Jeff Michael Michalski, MBA, MD  Vice Chairman of Radiation Oncology, Radiation Oncology
Loren S. Michel, MBA, MD  Assistant Professor of Cell Biology and Physiology, Cell Biology and Physiology
Loren S. Michel, MBA, MD  Assistant Professor of Medicine, Internal Medicine
Peter Howard Michelson, MD, MS  Associate Professor of Pediatrics, Pediatrics
William Samuel Micka, MD  Instructor in Clinical Medicine, Internal Medicine
Jerry N Middleton, MD  Instructor Emeritus in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Mary Ann Middleton, MD  Assistant Professor of Radiology, Radiology
William D Middleton, MD  Professor of Radiology, Radiology
Jenny Lynn Miele, Instructor in Clinical Pediatrics, Pediatrics
Francis M Miezien, MS  Research Associate Professor of Neurology, Neurology
Francis M Miezien, MS  Research Associate Professor of Radiology, Radiology
Mary Kay Migneco, OD  Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
James R Mikolajczak, MD  Assistant Professor of Clinical Psychiatry, Psychiatry
Jeffrey D Milbrandt, MD, PHD  Head of the Deptartment of Genetics, Genetics
Jeffrey D Milbrandt, MD, PHD  James S McDonnell Professor of Genetics, Genetics
Jeffrey D Milbrandt, MD, PHD  Professor of Medicine, Internal Medicine
Jeffrey D Milbrandt, MD, PHD  Professor of Neurology, Neurology
Jeffrey D Milbrandt, MD, PHD  Professor of Pathology, Pathology and Immunology
Barry David Milder, MD  Associate Professor of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Michelle M Miller-Thomas, MD  Assistant Professor of Radiology, Radiology
Aaron Samuel Miller, MD, MS  Instructor in Pediatrics, Pediatrics
Brent William Miller, MD  Professor of Medicine, Internal Medicine
Charles William Miller, MD  Assistant Professor of Clinical Medicine (Dermatology), Internal Medicine
Donna C Miller, MD  Instructor in Clinical Pediatrics, Pediatrics
Gary Arthur Miller, MD  Associate Professor of Orthopaedic Surgery, Orthopaedic Surgery
Heidi B Miller, MD  Instructor in Clinical Medicine, Internal Medicine
James D. Miller, MA, PHD  Instructor in Audiology and Communication Sciences, Program in Audiology and Communication Sciences
J. Philip Miller  Professor of Biostatistics, Division of Biostatistics
J. Philip Miller  Professor of Medicine, Internal Medicine
J. Philip Miller  Tenure Held At-Large in the Medical School, Medical School Administration
Lara Elizabeth Miller, DOST  Instructor in Clinical Medicine, Internal Medicine
Mark James Miller, PHD  Associate Professor of Medicine, Internal Medicine
Mark James Miller, PHD  Associate Professor of Pathology and Immunology, Pathology and Immunology
Suzanne Lee Miller, MD  Instructor in Clinical Pediatrics, Pediatrics
Timothy M Miller, MD, PHD  Assistant Professor of Neurology, Neurology
Jule P. Miller Jr  Instructor in Clinical Psychiatry, Psychiatry
Jason C Mills, AB, MD, PHD  Associate Professor of Developmental Biology, Molecular Biology and Pharmacology
Jason C Mills, AB, MD, PHD  Associate Professor of Medicine, Internal Medicine
Jason C Mills, AB, MD, PHD  Associate Professor of Pathology and Immunology, Pathology and Immunology
Pamela F Millsap, BN, MSN  Research Instructor in Neurology, Neurology
Susan Minchin, MD, PHD  Instructor in Clinical Psychiatry, Psychiatry
Graeme Mindel, MBBCH, MS  Instructor in Clinical Medicine, Internal Medicine
Jeffrey H Miner, PHD  Professor of Cell Biology and Physiology, Cell Biology and Physiology
Jeffrey H Miner, PHD  Professor of Medicine, Internal Medicine
Marian A Minor, M PH, PHD  Research Associate Professor of Occupational Therapy, Program in Occupational Therapy
Mark A Mintun, MD  Visiting Professor of Radiology, Radiology
Khurram Rehman Mirza, MBBS  Instructor in Medicine, Internal Medicine
Marvin R Mishkin, MD  Assistant Professor of Clinical Orthopaedic Surgery, Orthopaedic Surgery
Elizabeth Tracy Mishler, AUD, MA  Instructor in Audiology and Communication Sciences, Program in Audiology and Communication Sciences
Stanley Misler, MD, MS, PHD  Associate Professor of Biomedical Engineering, Department of Biomedical Engineering
Stanley Misler, MD, MS, PHD  Associate Professor of Cell Biology and Physiology, Cell Biology and Physiology
Stanley Misler, MD, MS, PHD  Associate Professor of Medicine, Internal Medicine
Tehmton S Mistry, MD  Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Kevin Joseph Mitchell, MD  Instructor in Clinical Surgery (General Surgery), Surgery
Robi D. Mitra, PHD  Associate Professor of Genetics, Genetics
Makedonka Mitreva, MS, PHD  Assistant Professor of Medicine, Internal Medicine
Bettina Mittendorfer, MS, PHD  Research Associate Professor of Medicine, Internal Medicine
Duane L Mitzel, MD  Assistant Professor of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Eugene James Mobley, OD  Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Robert L Mobley, OD  Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

573
Stephen M Moerlein, MA, PHARMD, PHD Associate Professor of Biochemistry and Molecular Biophysics, Biochemistry and Molecular Biophysics

Stephen M Moerlein, MA, PHARMD, PHD Associate Professor of Radiology, Radiology

Stephen M Moerlein Siteman Cancer Center, Associate Professor of Radiology, Division of Radiological Sciences, Mallinckrodt Institute of Radiology, Washington University School of Medicine, 1979: MA, nuclear and radiochemistry, Washington University, St. Louis, 1982: PhD, nuclear and radiochemistry, Washington University, 2008: PharmD, University of Florida, Gainesville

Shakir Mohamed, MD Instructor in Pediatrics, Pediatrics

Thalachallour Mohanakumar, PHD Jacqueline G. and William E. Maritz Professor of Surgery (General Surgery), Surgery

Thalachallour Mohanakumar, PHD Professor of Medicine, Internal Medicine

Thalachallour Mohanakumar, PHD Professor of Pathology and Immunology, Pathology and Immunology

C. Scott Molden, MD Instructor in Clinical Medicine, Internal Medicine

Jeffrey F Moley, MD Professor of Surgery (General Surgery), Surgery

Kelle Harbert Moley, MD Associate Professor of Cell Biology and Physiology, Cell Biology and Physiology

Kelle Harbert Moley, MD James Crane Professor of Obstetrics and Gynecology, Obstetrics and Gynecology

Kelle Harbert Moley, MD Vice Chairman for Basic Research, Department of Obstetrics and Gynecology, Obstetrics and Gynecology


2003: American Board of Obstetrics and Gynecology, Reproductive Endocrinology and Infertility

Hector D Molina-Vicenty, MD Associate Professor of Medicine, Internal Medicine

Hector D Molina-Vicenty, MD Associate Professor of Pathology and Immunology, Pathology and Immunology

Christopher Molitor Instructor in Clinical Pediatrics, Pediatrics

David W. Molter, MD Professor of Otolaryngology, Otolaryngology

Michael David Monaco, MD Instructor in Medicine, Internal Medicine

Kelly Renee Monk, PHD Assistant Professor of Developmental Biology, Molecular Biology and Pharmacology

Barbara S Monsees, MD Professor of Radiology, Radiology

Barbara S Monsees Siteman Cancer Center, Professor of Radiology, Section of Breast Imaging, Washington University School of Medicine, 1975: MD, Washington University, St. Louis, Primary Specialty: Breast Imaging and diagnostic radiology, Board Certified: American Board of Radiology, Diagnostic Radiology

David M Montani, MD Instructor in Clinical Psychiatry, Psychiatry

Austin F Montgomery, MD Instructor in Clinical Medicine, Internal Medicine

Grant William Montgomery Adjunct Instructor in Psychiatry, Psychiatry

Mary Ann Montgomery, MBA, MD Associate Professor of Clinical Psychiatry, Psychiatry

Gail Lynn Moolsintong, MD Instructor in Clinical Pediatrics, Pediatrics

Marc R Moon, MD Professor of Surgery (Cardiothoracic Surgery), Surgery

Amy M. Moore, MD Assistant Professor of Surgery (Plastics and Reconstructive Surgery)(Pending Executive Faculty Approval), Surgery

Darlene A. Moore, MD Instructor in Clinical Pediatrics, Pediatrics
Robert Paul Moore, MD Assistant Professor of Anesthesiology, Anesthesiology
Stephen M Moore, MEE Research Assistant Professor of Radiology, Radiology
Alvaro Mora, MD Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Christopher J Moran, MD Professor of Neurological Surgery, Neurological Surgery
Christopher J Moran, MD Professor of Radiology, Radiology
Christopher J Moran Siteman Cancer Center, Professor of Radiology, Division of Diagnostic Radiology, Section of Neuroradiology, Mallinckrodt Institute of Radiology, Washington University School of Medicine, Resident, diagnostic radiology, Washington University, St. Louis, Fellow, neuroradiology, Washington University, 1974; MD, Saint Louis University, Primary Specialty: Interventional neuroradiology, neurovascular disorders, neuroradiology, Board Certified: American Board of Radiology, Diagnostic Radiology
American Board of Radiology, Neuroradiology
Stewart Edward Moreland, DDENT Instructor in Clinical Otolaryngology (DMD), Otolaryngology
Sabine Morga Instructor in Clinical Medicine, Internal Medicine
Kerri A Morgan, MS Instructor in Neurology, Neurology
Kerri A Morgan, MS Instructor in Occupational Therapy, Program in Occupational Therapy
Mary R Morgan, MD Instructor in Clinical Pediatrics, Pediatrics
Sharon Celeste Morley, MD, PHD Assistant Professor of Pathology and Immunology, Pathology and Immunology
Sharon Celeste Morley, MD, PHD Assistant Professor of Pediatrics, Pediatrics
Jeffrey Stuart Mormol Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Daniel R. Morra Instructor in Clinical Pediatrics, Pediatrics
Alan H Morris, MD Instructor in Clinical Orthopaedic Surgery, Orthopaedic Surgery
Donald G Morris, MD, MS Instructor in Clinical Medicine, Internal Medicine
Gerald P. Morris, MD, PHD Research Instructor in Pathology and Immunology, Pathology and Immunology
John Carl Morris, MD Harvey A and Dorismae Hacker Friedman Professor of Neurology, Neurology
John Carl Morris, MD Professor of Occupational Therapy, Program in Occupational Therapy
John Carl Morris, MD Professor of Pathology and Immunology, Pathology and Immunology
John Carl Morris, MD Professor of Physical Therapy, Program in Physical Therapy
Lucy B Morris, M PH, MD Visiting Instructor in Radiology, Radiology
Aubrey R Morrison, MBBS Professor of Developmental Biology, Molecular Biology and Pharmacology
Aubrey R Morrison, MBBS Professor of Medicine, Internal Medicine
Jeremiah J Morrissey, PHD Research Professor of Anesthesiology, Anesthesiology
Jeremiah J. Morrissey Siteman Cancer Center, Research Professor of Anesthesiology, Division of Clinical and Translational Research, Washington University School of Medicine, 1973-1975: Postdoctoral fellow, Roche Institute of Molecular Biology, Nutley, N.J., 1975-1977: Staff fellow and senior staff fellow, National Heart, Lung and Blood Institute, Bethesda, Md., 1974: PhD, Saint Louis University
Nima Mosammaparast Assistant Professor of Pathology and Immunology, Pathology and Immunology
Lisa Mae Moscoso, MD, PHD Assistant Professor of Pediatrics, Pediatrics
Lisa Mae Moscoso, MD, PHD Associate Dean for Student Affairs, Medical School Student Affairs
Julian C Mosley, MD Instructor in Clinical Surgery (General Surgery), Surgery
Krista L Moulder, PHD Research Assistant Professor of Neurology, Neurology
Randi H Mozenter, MA, PHD Instructor in Clinical Medical Psychology in Psychiatry, Psychiatry
Richard Gerard Mrad Instructor in Clinical Medicine, Internal Medicine
Mike Max Mueckler, PHD Professor of Cell Biology and Physiology, Cell Biology and Physiology
Mike Max Mueckler, PHD  Professor of Medicine, Internal Medicine
Janet Gwen Mueller, MD  Assistant Professor of Clinical Pediatrics, Pediatrics
Margaret M Mueller  Instructor in Clinical Pediatrics, Pediatrics
Michael Jeffrey Mueller, MHS, PHD  Associate Director for Movement Science Curriculum in Physical Therapy, Program in Physical Therapy
Michael Jeffrey Mueller, MHS, PHD  Division Director of Research in Physical Therapy, Program in Physical Therapy
Michael Jeffrey Mueller, MHS, PHD  Professor of Physical Therapy, Program in Physical Therapy
Michael Jeffrey Mueller, MHS, PHD  Professor of Radiology, Radiology
Melanie Rose Mueth, MBA, MD  Instructor in Clinical Medicine, Internal Medicine
Steve Mueth  Instructor in Clinical Pediatrics, Pediatrics
Daniel Kast Mullady, MD  Assistant Professor of Medicine, Internal Medicine
Daniel K. Mullady  Siteman Cancer Center, Assistant Professor of Medicine, Division of Gastroenterology, Washington University School of Medicine, 2001-2004: Intern and resident, internal medicine, Boston University, 2004-2007: Fellow, gastroenterology, University of Pittsburgh, 2007-2008: Fellow, advanced endoscopy, Massachusetts General Hospital, Boston, 2001: MD, University of Connecticut, Farmington, Primary Specialty: Gastroenterology, advanced therapeutic endoscopy, endoscopic ultrasound, endoscopic retrograde cholangiopancreatography (ERCP), Board Certified, 2004: American Board of Internal Medicine, Internal Medicine 2007: American Board of Internal Medicine, Gastroenterology
Monalisa Mullick, MD  Instructor in Medicine, Internal Medicine
Monalisa Mullick, MD  Instructor in Pediatrics, Pediatrics
Michael E Mullins, MD  Associate Professor of Emergency Medicine in Medicine, Internal Medicine
Steven Robert Mumm, MS, PHD  Research Associate Professor of Medicine, Internal Medicine
Nabil A Munfakh, MD  Professor of Surgery (Cardiothoracic Surgery), Surgery
Manohara Munimuddappa  Instructor in Clinical Pediatrics, Pediatrics
Robert F Munsch, MD  Instructor in Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Faris Mohammed Murad, MD  Associate Professor of Medicine, Internal Medicine
Vasant Muralidharan, MS, PHD  Research Instructor in Medicine, Internal Medicine
Nathaniel H Murdock, MD  Associate Professor of Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Joshua J Murphy, MD  Assistant Professor of Pediatrics, Pediatrics
Kenneth M Murphy, MD, PHD  Eugene Opie First Centennial Professor of Pathology and Immunology, Pathology and Immunology
Kenneth M Murphy, MD, PHD  Howard Hughes Medical Institute Investigator in Pathology and Immunology, Pathology and Immunology
Kenneth M Murphy, MD, PHD  Professor of Pathology and Immunology, Pathology and Immunology
Kevin J Murphy, MD  Professor of Clinical Pediatrics, Pediatrics
Theresa L Murphy, PHD  Research Assistant Professor of Pathology and Immunology, Pathology and Immunology
David J Murray, MD  Carol B. and Jerome T. Loeb Professor of Anesthesiology, Anesthesiology
Nancy Tye Murray, MS, PHD  Professor of Audiology and Communication Sciences, Program in Audiology and Communication Sciences
Nancy Tye Murray, MS, PHD  Professor of Otolaryngology, Otolaryngology
Gian Marco Musarra, MD  Instructor in Pediatrics, Pediatrics
Amy Musiek, MD  Assistant Professor of Medicine (Dermatology), Internal Medicine
Laura P Musselman, PHD  Research Instructor in Medicine, Internal Medicine
Helen I-Yun Mussemann, MD  Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
David G Mutch, MD Ira C and Judith Gall Professor of Obstetrics and Gynecology, Obstetrics and Gynecology
Matthew G Mutch, MD Associate Professor of Surgery (General Surgery), Surgery

Umadevi Muthyala Instructor in Clinical Medicine, Internal Medicine
Sasa Munic, MS, PHD Professor of Radiation Oncology, Radiation Oncology
Terence M. Myckatyn, MD Associate Professor of Surgery (Plastic and Reconstructive Surgery), Surgery
John A Myers Instructor in Clinical Pediatrics, Pediatrics
Raymond I Myers, OD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Robert J Myerson, MD, PHD Professor Emeritus of Radiation Oncology, Radiation Oncology
Indira U Mysorekar, MS, PHD Assistant Professor of Obstetrics and Gynecology, Obstetrics and Gynecology
Indira U Mysorekar, MS, PHD Assistant Professor of Pathology and Immunology, Pathology and Immunology
Randall Earl Nacke Instructor in Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Rakesh Nagarajan, MD, PHD Associate Professor of Genetics, Genome Center
Rakesh Nagarajan, MD, PHD Associate Professor of Pathology and Immunology, Pathology and Immunology
Elna M Nagasako, MD, PHD Instructor in Medicine, Internal Medicine
Peter Nagele, MD Assistant Professor of Anesthesiology, Anesthesiology
Peter Nagele, MD Assistant Professor of Genetics, Genetics
Venkata S. Nagireddi Instructor in Clinical Pediatrics, Pediatrics
Anne Kathryn Nagler, MD Instructor in Clinical Medicine, Internal Medicine
Robert T Naismith II, MD Assistant Professor of Neurology, Neurology
Tasnim A Najaf, MD Assistant Professor of Pediatrics, Pediatrics
Ayesha Najib Instructor in Clinical Pediatrics, Pediatrics
Rashmi R Nakra Associate Professor of Clinical Psychiatry, Psychiatry
Ilke Nalbantoglu, MD Assistant Professor of Pathology and Immunology, Pathology and Immunology
Jyotirmaya Nanda Instructor in Clinical Medicine, Internal Medicine
Nicola Napoli Adjunct Research Assistant Professor of Medicine, Internal Medicine
Vamsi R. Narra, MD Professor of Radiology, Radiology
Alison C Nash, MD Professor of Clinical Pediatrics, Pediatrics
Homer E Nash Jr, MD Professor of Clinical Pediatrics, Pediatrics
Michael Edward Nassif, MD Instructor in Medicine, Internal Medicine
Fatiha Nassir, MS, PHD Research Assistant Professor of Medicine, Internal Medicine
Michael J. Naughton, MD Assistant Professor of Medicine, Internal Medicine
Rosanne S Naunheim, MD Associate Professor of Emergency Medicine in Medicine, Internal Medicine
Robert F Nease Jr, MA, PHD Adjunct Associate Professor of Medicine, Internal Medicine
Philip Needleman, MS, PHD Adjunct Professor of Molecular Biology and Pharmacology, Molecular Biology and Pharmacology
Burton M Needles, MD Instructor in Clinical Medicine, Internal Medicine
John Gail Neely, MD Professor of Occupational Therapy, Program in Occupational Therapy
Jeffrey J Neil, MD, PHD Allen P. and Josephine B. Green Professor of Neurology, Neurology
Jeffrey J Neil, MD, PHD Professor of Neurobiology, Anatomy and Neurobiology
Jeffrey J Neil, MD, PHD Professor of Pediatrics, Pediatrics
Jeffrey J Neil, MD, PHD Professor of Radiology, Radiology
Lynn G Nelms Instructor in Clinical Pediatrics, Pediatrics
Christopher A Nelson, PHD Research Instructor in Pathology and Immunology, Pathology and Immunology
Donald Michael Nelson, MD, PHD Virginia Lang Professor of Obstetrics and Gynecology, Obstetrics and Gynecology
Elliot C Nelson, MD Professor of Psychiatry, Psychiatry
Jeanne M Nerbonne, PHD Alumni Endowed Professor of Molecular Biology and Pharmacology in Developmental Biology, Molecular Biology and Pharmacology
Johanna Grant Nicholas, MA, PHD Associate Professor of Audiology and Communication Sciences, Program in Audiology and Communication Sciences
Neal Neuman, MD Instructor in Clinical Surgery (Urologic Surgery), Surgery
Tara Marie Neumayr, MD Instructor in Pediatrics, Pediatrics
Elizabeth P. Newberry, PHD Research Assistant Professor of Medicine, Internal Medicine
Rodney D Newberry, MD Associate Professor of Medicine, Internal Medicine
Rodney D. Newberry Siteman Cancer Center, Associate Professor of Medicine, Division of Gastroenterology, Washington University School of Medicine, 1991-1994: Intern and resident, internal medicine, Washington University, St. Louis, 1995-1999: Fellow, gastroenterology, Washington University, 1991: MD, Washington University, St. Louis
Matthew Newman, MD Assistant Professor of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Amy C Ney, MD Instructor in Clinical Medicine (Dermatology), Internal Medicine
Khai Ngo, MD Instructor in Clinical Pediatrics, Pediatrics
Kim Mai Thi Nguyen, MD Instructor in Medicine, Internal Medicine
Nguyet Minh Nguyen, MD Assistant Professor of Medicine, Internal Medicine
Tu-Dung Thi Nguyen, MD, PHD Assistant Professor of Pathology and Immunology, Pathology and Immunology
Ellen Margaret Nicastro Instructor in Clinical Pediatrics, Pediatrics
Johanna Grant Nicholas, MA, PHD Associate Professor of Audiology and Communication Sciences, Program in Audiology and Communication Sciences
Johanna Grant Nicholas, MA, PHD Research Associate Professor of Otolaryngology, Otolaryngology
Colin G Nichols, PHD  
Professor of Cell Biology and Physiology

Colin G Nichols, PHD  
Professor of Cell Biology and Physiology

Paul F Nichols III, MD  
Assistant Professor of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

Ginger E. Nicol, MD  
Assistant Professor in Psychiatry (Child), Psychiatry

Ramzi T Nicolas  
Adjunct Instructor in Pediatrics, Pediatrics

Joan M Niehoff, MD  
Assistant Professor of Anesthesiology, Anesthesiology

Carl Helge Nielsen, MD  
Professor of Anesthesiology, Anesthesiology

John Hart Niemeyer, MD  
Instructor in Clinical Radiology, Radiology

Thomas E Niesen, MD  
Instructor in Clinical Surgery (General Surgery), Surgery

Daniel C Nieva, MD  
Assistant Professor of Anesthesiology, Anesthesiology

Richard James Nissen, DDENT, MS  
Assistant Professor of Clinical Surgery (Plastic and Reconstructive Surgery), Surgery

Anne Fagan Niven, PHD  
Research Professor of Neurology, Neurology

Bruce L Nock, MS, PHD  
Associate Professor of Neurobiology, Anatomy and Neurobiology

Bruce L Nock, MS, PHD  
Associate Professor of Neurobiology in Psychiatry, Psychiatry

Michael Justin Noetzel, MD  
Professor of Neurology, Neurology

Michael Justin Noetzel, MD  
Professor of Pediatrics, Pediatrics

Kevin K. Noguchi, MA, PHD  
Research Assistant Professor of Psychiatry, Psychiatry

Michael L Nonet, PHD  
Associate Professor of Neurobiology, Anatomy and Neurobiology

Scott Monroe Nordlicht, MD  
Professor of Medicine, Internal Medicine

David Craig Norman, MD  
Assistant Professor of Clinical Pediatrics, Pediatrics

Barbara Jean Norton, MHS, PHD  
Associate Director for Postprofessional Education in Physical Therapy, Program in Physical Therapy

Barbara Jean Norton, MHS, PHD  
Professor of Neurology, Neurology

Barbara Jean Norton, MHS, PHD  
Professor of Physical Therapy, Program in Physical Therapy

Karen K Norton, MD  
Associate Professor of Clinical Pediatrics, Pediatrics

Oscar D. Norton, MD  
Instructor in Clinical Radiation Oncology, Radiation Oncology

Deborah Veis Novack, MD, PHD  
Associate Professor of Medicine, Internal Medicine

Deborah Veis Novack, MD, PHD  
Associate Professor of Pathology and Immunology, Pathology and Immunology

Petra Nowotny, PHD  
Research Associate Professor of Psychiatry, Psychiatry

Thomas John Nowotny, MD  
Assistant Professor of Clinical Psychiatry, Psychiatry

Douglase Susumu Nozaki, MD  
Instructor in Clinical Pediatrics, Pediatrics

Eric J Nuetzel, MA, MD  
Professor of Clinical Psychiatry, Psychiatry

Anthony Ian Nunez  
Instructor in Clinical Surgery (Cardio Surgery), Surgery

Marlynn Nunez  
Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology

Kara Sternhell Nunley, MA, MD  
Assistant Professor of Medicine (Dermatology), Internal Medicine

Ryan M. Nunley, MD  
Assistant Professor of Orthopaedic Surgery, Orthopaedic Surgery

Diana Robertovna Nurutdinova, MD  
Instructor in Medicine, Internal Medicine

Samuel R Nussbaum, MD  
Professor of Clinical Medicine, Internal Medicine

Brian Nussenbaum, MD  
Christy J. and Richard S. Hawes III Associate Professor of Otolaryngology, Otolaryngology

Brian Nussenbaum, MD  
Vice Chair for Clinical Affairs, Department of Otolaryngology, Otolaryngology
Brian Nussenbaum  Siteman Cancer Center, Christy J. and Richard S. Hawes III Professor and Vice Chairman for Clinical Affairs, Department of Otolaryngology, Washington University School of Medicine, 1996-2000: Resident, otolaryngology, University of Texas Southwestern Medical Center, Dallas, 2000-2002: Fellow, head and neck oncology and microvascular surgery, University of Michigan, Ann Arbor, 1994: MD, New York University, Primary Specialty: Head and neck cancers, thyroid cancer, salivary gland tumors, melanoma, Board Certified, 2001: American Board of Otolaryngology

Oroma Beatrice Afiong Nwanodi  Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology

Muhammad Akram Nyazee  Instructor in Clinical Medicine, Internal Medicine

Sydney Marie Nykiel-Bailey, MD  Assistant Professor of Anesthesiology, Anesthesiology

G Patrick O'Donnell, MD  Instructor in Clinical Medicine, Internal Medicine

Karen Laurel O'Malley, MS, PHD  Professor of Neurobiology, Anatomy and Neurobiology

Jerome H O'Neil Jr, MD  Assistant Professor of Clinical Pediatrics, Pediatrics

Margaret Mary Oakley, MD  Assistant Professor of Clinical Anesthesiology, Anesthesiology

Margaret Mary Oakley, MD  Instructor in Clinical Orthopaedic Surgery, Orthopaedic Surgery

Randall Odem, MD  Professor of Obstetrics and Gynecology, Obstetrics and Gynecology

Anthony O Odibo, MD  Associate Professor of Obstetrics and Gynecology, Obstetrics and Gynecology

Anthony O Odibo, MD  Vice Chair of Women and Fetal Imaging, Obstetrics and Gynecology

Audrey R Odom, MD, PHD  Assistant Professor of Molecular Microbiology, Molecular Microbiology

Audrey R Odom, MD, PHD  Assistant Professor of Pediatrics, Pediatrics

Justin O Ogbevden, MBBS  Instructor in Clinical Pediatrics, Pediatrics

Margaret A Ogden, MD  Assistant Professor of Otolaryngology, Otolaryngology

Judith Mosinger Ogilvie, MA, PHD  Adjunct Research Assistant Professor of Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

Kevin Kenneth Ohlemiller, PHD  Associate Professor of Audiology and Communication Sciences, Program in Audiology and Communication Sciences

Kevin Kenneth Ohlemiller, PHD  Research Associate Professor of Otolaryngology, Otolaryngology

Chukwuma Mbonu Okoroji  Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology

Adewole L. Okunade, PHD  Research Assistant Professor of Medicine, Internal Medicine

George A Oliver, MD  Assistant Professor Emeritus of Clinical Surgery (General Surgery), Surgery

George Charles Oliver, MD  Professor Emeritus of Clinical Medicine, Internal Medicine

Paul D Olivo, MD, PHD  Adjunct Assistant Professor of Molecular Microbiology, Molecular Microbiology

John William Olney, MD  John P Feighner Professor of Psychiatry, Psychiatry

John William Olney, MD  Professor of Pathology and Immunology (Neuropathology), Pathology and Immunology

Jeffrey Robert Olsen, MD  Assistant Professor of Radiation Oncology, Radiation Oncology

Margaret Olsen, MPH, PHD  Research Associate Professor of Medicine, Internal Medicine

Margaret Olsen, MPH, PHD  Research Associate Professor of Surgery (Public Health Sciences), Surgery

Margaret A Olsen  Siteman Cancer Center, Research Associate Professor of Medicine, Division of Infectious Diseases, Washington University School of Medicine, 1983-1985: Postdoctoral fellow, clinical and public health microbiology, North Carolina Memorial Hospital, Chapel Hill, 1986: PhD, microbiology, University of Pennsylvania, Philadelphia, 2001: MPH, Saint Louis University

Eugene Merle Oltz, PHD  Professor of Pathology and Immunology, Pathology and Immunology

Gary H Orell, MD  Assistant Professor of Clinical Radiology, Radiology

Robert F Onder Jr, MD  Assistant Professor of Clinical Medicine, Internal Medicine

Nur Fiona Onen, MBCHB  Assistant Professor of Medicine, Internal Medicine
Phineas Phillip Oren, MD  Assistant Professor of Pediatrics, Pediatrics
S. Michael Orgel, MD  Instructor in Clinical Medicine, Internal Medicine
Matthew J Orland, MD  Associate Professor of Clinical Medicine, Internal Medicine
David M Ornitz, MD, PHD  Alumni Endowed Professor of Developmental Biology, Molecular Biology and Pharmacology
Valerie Orrico  Instructor in Clinical Pediatrics, Pediatrics
Rachel C. Orscheln, MD  Assistant Professor of Pediatrics, Pediatrics
David William Ortbals, MD  Assistant Professor of Clinical Medicine, Internal Medicine
Cynthia M. Ortinau  Instructor in Pediatrics (Pending Dean's Approval), Pediatrics
Irma I Ortiz-Arroyo, MD  Assistant Professor of Clinical Pediatrics, Pediatrics
Daniel Scott Ory, MD  Professor of Cell Biology and Physiology, Cell Biology and Physiology
Daniel Scott Ory, MD  Professor of Medicine, Internal Medicine
Tiffany Medlin Osborn, M PH, MD  Associate Professor of Surgery (General Surgery), Surgery
Richard E Ostlund Jr, MD  Professor of Medicine, Internal Medicine
Alison H Oswald  Instructor in Clinical Pediatrics, Pediatrics
Hannah Clare Otepka, MD  Instructor in Medicine, Internal Medicine
Theodore Otti  Instructor in Clinical Medicine, Internal Medicine
Maryann Otto, MD  Instructor in Anesthesiology, Anesthesiology
Edgar Turner Overton, MD  Adjunct Assistant Professor of Medicine, Internal Medicine
Pamela L Owens, MS, PHD  Research Assistant Professor of Medicine, Internal Medicine
Pamela L Owens, MS, PHD  Research Assistant Professor of Surgery (Public Health Sciences), Surgery
Vani Pachalla, MD  Instructor in Clinical Medicine, Internal Medicine
Robert C Packman, MD  Professor of Clinical Medicine, Internal Medicine
Camillo Padoa-Schioppa, MS, PHD  Assistant Professor of Neurobiology, Anatomy and Neurobiology
Jeffrey Robert Padousis, MD  Instructor in Clinical Ophthalmology and Visual Science, Ophthalmology and Visual Sciences
Robert Paine, MD  Professor of Clinical Medicine, Internal Medicine
Ben Julian Palanca, MD  Assistant Professor of Anesthesiology, Anesthesiology
Ross Ian Palis, MD  Instructor in Clinical Medicine, Internal Medicine
Robert James Pallow Jr, MD  Assistant Professor of Radiology, Radiology
Allen S Palmer, DOST  Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Dipanjan Pan, MS, PHD  Research Assistant Professor of Medicine, Internal Medicine
Hua Pan, MS, PHD  Research Instructor in Medicine, Internal Medicine
Dipanjan Pan  Siteman Cancer Center, Research Assistant Professor of Medicine, Division of Cardiovascular Diseases, Washington University School of Medicine, 2002-2005: Postdoctoral research associate, Washington University, St. Louis, 1997: MS, organic chemistry, Vidyasagar University, Midnapore, India, 2002: PhD, synthetic chemistry, Indian Institute of Technology, Kharagpur
Peter D Panagos, MA, MD  Associate Professor of Emergency Medicine in Medicine, Internal Medicine
Dipanjan Pan  Siteman Cancer Center, Associate Professor of Otolaryngology, Otolaryngology
Jennifer Ann Panasci  Instructor in Clinical Pediatrics, Pediatrics
Elizabeth Whalen Paniagua, MD  Instructor in Medicine, Internal Medicine
Randal C Paniello, MBA, MD, MS  Associate Professor of Otolaryngology, Otolaryngology
Randal C Paniello  Siteman Cancer Center, Associate Professor of Otolaryngology, Division of Head and Neck Surgical Oncology, Washington University School of Medicine, 1984-1990: Resident, otolaryngology, Washington University, St. Louis, 1990-1992:
Fellow, McCollough Aesthetic Surgery Center, Birmingham, Ala., 1980: MS, immunochemistry, University of Illinois Urbana-Champaign, Urbana, 1984: MD, University of Illinois Urbana-Champaign, Primary Specialty: Head and neck cancer, thyroid cancer, reconstructive surgery, Board Certified.; 1991: American Board of Otolaryngology

1992: American Board of Facial Plastic and Reconstructive Surgery

Parag J. Parikh, MD Assistant Professor of Biomedical Engineering, Department of Biomedical Engineering

Parag J. Parikh, MD Assistant Professor of Radiation Oncology, Radiation Oncology

Sharad P Parikh Instructor in Clinical Surgery (General Surgery), Surgery

Parag J. Parikh Siteman Cancer Center, Assistant Professor of Radiation Oncology, Washington University School of Medicine, 2001-2002: Intern, internal medicine, Washington University, St. Louis, 2002-2006: Resident, radiation oncology, Washington University, 2001: MD, Washington University, St. Louis, Primary Specialty: Pancreatic cancer, colon and rectal cancer, hepatobiliary cancer, lung cancer, Board Certified.; 2007: American Board of Radiology, Radiation Oncology

Tae Sung Park, MD Professor of Neurobiology, Anatomy and Neurobiology

Tae Sung Park, MD Professor of Pediatrics, Pediatrics

Tae Sung Park, MD Shi Hui Huang Professor of Neurological Surgery, Neurological Surgery

TS Park Siteman Cancer Center, Shi H. Huang Professor of Neurosurgery and Chief, Division of Pediatric Neurosurgery, Washington University School of Medicine, 1976-1980: Resident, neurosurgery, University of Virginia, Charlottesville, 1979-1980: Research fellow, neuropathology, Massachusetts General Hospital and Harvard Medical School, Boston, 1980-1981: Resident, pediatric surgery, Columbus Children's Hospital, 1971: MD, Yonsei University College of Medicine, Seoul, South Korea, Primary Specialty: Pediatric neurosurgery, Board Certified.; 1985: American Board of Neurological Surgery

Becky J Parks, MD Associate Professor of Neurology, Neurology

Charles L Parks, MD Instructor in Clinical Surgery (General Surgery), Surgery

David A Parks, MBA, MD Associate Professor of Clinical Medicine, Internal Medicine

Deborah L Parks, MD Professor of Medicine, Internal Medicine

Laura Anne Parks, MD Assistant Professor of Obstetrics and Gynecology, Obstetrics and Gynecology

Jeffrey Andrew Parres, MD Instructor in Clinical Surgery (Urologic Surgery), Surgery

Matthew S Parsons, MD Assistant Professor of Radiology, Radiology

Robert T Paschall, MA, MD Professor of Pediatrics, Pediatrics

Michael K Pasque, MD Professor of Biomedical Engineering, Department of Biomedical Engineering

Michael K Pasque, MD Professor of Radiology, Radiology

Michael K Pasque, MD Professor of Surgery (Cardiothoracic Surgery), Surgery

Pablo Pastor, MD, PHD Visiting Instructor in Psychiatry, Psychiatry

Anand C Patel, MD Assistant Professor of Medicine, Internal Medicine

Anand C Patel, MD Assistant Professor of Pediatrics, Pediatrics

Dilip H. Patel Instructor in Clinical Medicine, Internal Medicine

Kamlesh Babulal Patel, MD Assistant Professor of Surgery (Plastic & Reconstructive Surgery), Surgery

Meera Raman Patel, MD Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology

Rajiv Nanu Patel, MD Instructor in Clinical Medicine, Internal Medicine

Anjali K Pathak, MD Assistant Professor of Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

Amanullah Pathan, MS Instructor in Clinical Medicine, Internal Medicine

Debabrata Patra, MS, PHD Research Assistant Professor of Orthopaedic Surgery, Orthopaedic Surgery

Bruce Patterson, PHD Research Professor of Medicine, Internal Medicine

G. Alexander Patterson, MD Evarts A. Graham Professor of Surgery (Cardiothoracic Surgery), Surgery

Alec Patterson Siteman Cancer Center, Evarts A. Graham Professor of Surgery and Chief, Division of Cardiothoracic Surgery,
Gary J Patti Jr, PHD Assistant Professor of Genetics (Pending Executive Faculty Approval), Genetics
Jacqueline Elise Payton , MD, PHD Assistant Professor of Pathology and Immunology, Pathology and Immunology
Jacqueline E Payton Siteman Cancer Center, Assistant Professor of Pathology and Immunology, Division of Laboratory and Genomic Medicine, Washington University School of Medicine, 2004-2008: Resident, pathology, Washington University, St. Louis, 2006-2007: Clinical fellow, internal medicine, Washington University, 2002: PhD, molecular and cellular biology, University of Illinois, Urbana, 2004: MD, University of Illinois, Urbana, Board Certified:, American Board of Pathology, Clinical Pathology
Margaret Grace Peak , MA, PHD Adjunct Assistant Professor of Otolaryngology (Audiology), Otolaryngology
Edward J Pearce , PHD Professor of Medicine, Internal Medicine
Edward J Pearce , PHD Professor of Molecular Microbiology, Molecular Microbiology
Erika Laine Pearce , PHD Assistant Professor of Pathology and Immunology, Pathology and Immunology
Anthony Craig Pearlstone , MD Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Susan E Pearson , BFA, DOST, MS, PHD Instructor in Clinical Medicine, Internal Medicine
William A Peck , MD Affiliated Professor of Engineering, Engr & Applied Science-Admin
William A Peck , MD Alan A and Edith L Wolff Distinguished Professor, Internal Medicine
William A Peck , MD Director, Center for Health Policy, Administrative Offices
Jonathan Erik Peelle , BAS, MS PSYC, PHD Research Assistant Professor of Otolaryngology (Pending Executive Faculty Approval), Otolaryngology
David M Peeples , MD Instructor in Clinical Neurology, Neurology
Jeffrey F Peipert , MD, MHA, MPH, PHD Robert J. Terry Professor of Obstetrics and Gynecology, Obstetrics and Gynecology
Jeffrey F Peipert , MD, MHA, MPH, PHD Vice Chairman of Clinical Research, Department of Obstetrics and Gynecology, Obstetrics and Gynecology
Patricia A. Penkoske , MD Instructor in Anesthesiology, Anesthesiology
Michael W Penney , MD Assistant Professor of Radiology, Radiology
Karen J Pentella , MD Assistant Professor of Clinical Neurology, Neurology
Marta Yanina Pepino de Gruev , PHD Research Assistant Professor of Medicine, Internal Medicine
Jay S Pepose , MA, MD, PHD Professor of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Marybeth Pereira , MD Associate Professor of Clinical Medicine, Internal Medicine
Julio E Perez , MD Professor of Medicine, Internal Medicine
Michele L. Pergadia , MS, PHD Research Associate Professor of Psychiatry, Psychiatry
Enrique Pedro Perinetti , MD, PHD Instructor in Clinical Surgery (Urologic Surgery), Surgery
Stephanie Mabry Perkins , MD Assistant Professor of Radiation Oncology, Radiation Oncology
Joel S Perlmutter , MD Professor of Neurobiology, Anatomy and Neurobiology
Joel S Perlmutter , MD Professor of Neurology, Neurology
Joel S Perlmutter , MD Professor of Occupational Therapy, Program in Occupational Therapy
Joel Picus, MD  Professor of Medicine, Internal Medicine
Stephen J Pieper, MD  Instructor in Clinical Medicine, Internal Medicine
James Vernon Piephoff, MD  Instructor in Clinical Radiation Oncology, Radiation Oncology
Richard A Pierce, PHD  Research Associate Professor of Cell Biology and Physiology, Cell Biology and Physiology
Richard A Pierce, PHD  Research Associate Professor of Medicine, Internal Medicine
Linda J Pike, PHD  Professor of Biochemistry and Molecular Biophysics, Biochemistry and Molecular Biophysics
Aaron Juan Pile, MD  Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Jorge Pineda, MD  Assistant Professor of Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Roberta G Pineda, MHS, PHS  Research Assistant Professor of Occupational Therapy, Program in Occupational Therapy
Roberta G Pineda, MHS, PHS  Research Assistant Professor of Pediatrics, Pediatrics
Jose A Pineda Soto, MD  Assistant Professor of Neurology, Neurology
Jose A Pineda Soto, MD  Assistant Professor of Pediatrics, Pediatrics
Christopher James Pingel, MD  Instructor in Pediatrics, Pediatrics
Bryan Douglas Piotrowski, MD  Instructor in Clinical Medicine, Internal Medicine
Terrence L Piper, MD  Assistant Professor of Clinical Orthopaedic Surgery, Orthopaedic Surgery
Ian Pitha, MD  Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
David R Piwnica-Worms, MD, PHD  Professor of Cell Biology and Physiology, Cell Biology and Physiology
David R Piwnica-Worms, MD, PHD  Professor of Developmental Biology, Molecular Biology and Pharmacology
David R Piwnica-Worms, MD, PHD  Professor of Radiology, Radiology
Helen Piwnica-Worms, PHD  Gerty T Cori Professor, Cell Biology and Physiology
Helen Piwnica-Worms, PHD  Head of the Department of Cell Biology and Physiology, Cell Biology and Physiology
Helen Piwnica-Worms, PHD  Professor of Cell Biology and Physiology, Cell Biology and Physiology
Helen Piwnica-Worms, PHD  Professor of Medicine, Internal Medicine
Mitchell R Platin, MD  Assistant Professor of Anesthesiology, Anesthesiology
Daniel S Plax, MD  Assistant Professor of Clinical Pediatrics, Pediatrics
Kathryn L. Plax, MD  Associate Professor of Pediatrics, Pediatrics
Timothy Joseph Pluard, MD  Assistant Professor of Medicine, Internal Medicine
Santiago Boye Plurad Jr, MD  Assistant Professor of Clinical Pediatrics, Pediatrics
Doug Pogue, MD  Instructor in Clinical Medicine, Internal Medicine
Robert Francis Poirier Jr, MD  Assistant Professor of Emergency Medicine in Medicine, Internal Medicine
Donovan Polack, MD  Assistant Professor of Clinical Medicine, Internal Medicine
Gregory Polites, MD  Associate Professor of Emergency Medicine in Medicine, Internal Medicine
Mary Politi, M PHIL, PHD  Assistant Professor of Surgery (General Surgery), Surgery
Mary C. Politi  Siteman Cancer Center, Assistant Professor of Surgery, Division of Public Health Sciences, Washington University School of Medicine, 2006-2007: Postdoctoral fellow, behavioral medicine, Brown University and Rhode Island Hospital, Providence, 2007-2009: Postdoctoral fellow, transdisciplinary cancer research, Brown University and the Miriam Hospital, Providence, 2004: MPhil, clinical psychology, George Washington University, Washington, D.C., 2006: PhD, clinical psychology, George Washington University
Juanita C Polito-Colvin, MD  Associate Professor of Clinical Pediatrics, Pediatrics
David Gerard Politte, D SC, MEE  Research Instructor in Radiology, Radiology
Kenneth S Polonsky, MBBCH  Adjunct Professor of Medicine, Internal Medicine
Katherine P. Ponder, MD  Professor of Biochemistry and Molecular Biophysics, Biochemistry and Molecular Biophysics
Katherine P. Ponder, MD  Professor of Medicine, Internal Medicine

Katherine P. Ponder  Siteman Cancer Center, Professor of Medicine, Division of Hematology, Washington University School of Medicine, 1983-1985: Resident, internal medicine, Parkland Hospital, Dallas, 1985-1988: Postdoctoral associate, molecular biophysics and biochemistry, Yale University, New Haven, Conn., 1988-1990: Postdoctoral associate, cell biology, Baylor College of Medicine, Ho, 1983: MD, Washington University, St. Louis, Primary Specialty: Hematology, Board Certified:, American Board of Internal Medicine, Internal Medicine

Harish Ponnuru, MD  Instructor in Clinical Medicine, Internal Medicine

Gerald Raymond Popelka  Adjunct Professor of Otolaryngology, Otolaryngology
Lee S. Portnoff, MA, MD  Assistant Professor of Clinical Medicine (Dermatology), Internal Medicine

Daniel E. Potts, MD  Associate Professor of Clinical Medicine, Internal Medicine
Lisa Gayle Potts, MS, PHD  Research Assistant Professor of Audiology and Communication Sciences, Program in Audiology and Communication Sciences

Lisa Gayle Potts, MS, PHD  Research Assistant Professor of Otolaryngology, Otolaryngology
John A. Powell, MD  Assistant Professor of Clinical Medicine (Dermatology), Internal Medicine
Matthew A. Powell, MD  Associate Professor of Obstetrics and Gynecology, Obstetrics and Gynecology

Stephanie K. Powell, MS, PHD  Instructor in Clinical Neurology, Neurology
Matthew A. Powell  Siteman Cancer Center, Associate Professor of Obstetrics and Gynecology, Division of Gynecologic Oncology, Washington University School of Medicine, 1995-1999: Resident, obstetrics and gynecology, Ohio State University, Columbus, 1999-2002: Fellow, gynecologic oncology, Washington University, St. Louis, 1995: MD, Michigan State University, East Lansing, Primary Specialty: Women's cancers, Board Certified:, American Board of Obstetrics and Gynecology, Obstetrics and Gynecology

American Board of Obstetrics and Gynecology, Gynecologic Oncology

William John Powers, MD  Adjunct Professor of Neurology, Neurology
Diana A. Prablek, MD  Instructor in Clinical Medicine, Internal Medicine

Lawrence Prablek, MD  Instructor in Clinical Medicine, Internal Medicine
Simeon Prager, MD  Assistant Professor of Clinical Medicine, Internal Medicine
Sunil Prasad, MD  Assistant Professor of Surgery (Cardiothoracic Surgery), Surgery
Heidi Prather, DOST  Associate Professor of Neurology, Neurology
Heidi Prather, DOST  Associate Professor of Orthopaedic Surgery, Orthopaedic Surgery

David J. Prelutsky, MD  Associate Professor of Clinical Medicine, Internal Medicine
Rachel M. Presti, MD, PHD  Assistant Professor of Medicine, Internal Medicine
Claudia Preuschoff, MD  Instructor in Clinical Pediatrics, Pediatrics
Elizabeth F. Pribor, MD  Associate Professor of Clinical Psychiatry, Psychiatry

Joseph L. Price, PHD  Professor of Anatomy and Neurobiology, Anatomy and Neurobiology
Rumi Kato Price, MA, PHD  Research Professor of Psychiatry, Psychiatry

Fred W. Prior, MA, MA1, PHD  Research Associate Professor of Radiology, Radiology
Michael A. Province, MA, PHD  Professor of Biostatistics, Division of Biostatistics
Michael A. Province, MA, PHD  Professor of Genetics, Genetics
John R. Pruett Jr, MD, PHD  Assistant Professor of Psychiatry (Child Psychiatry), Psychiatry

Cassandra Michelle Pruitt, MD  Assistant Professor of Pediatrics, Pediatrics
Robert Allen Pufahl Jr, PHD  Research Assistant Professor of Medicine, Internal Medicine

Daniel D. Pugh, MD  Associate Professor of Psychiatry, Psychiatry
Debra D. Pulley, MD, MME  Associate Professor of Anesthesiology, Anesthesiology
James A Purdy, MA, PHD Adjunct Professor of Radiation Oncology, Radiation Oncology
Varun Puri, MD, MS Assistant Professor of Surgery (Cardiothoracic Surgery), Surgery
Jason Q. Purnell Siteman Cancer Center, Assistant Professor of Public Health, George Warren Brown School of Social Work, Washington University, 2004: MA, counseling psychology, Ohio State University, Columbus, 2007: PhD, counseling psychology, Ohio State University, 2009: MPH, University of Rochester, Rochester, N.Y.
Edward Puro, MD, MS, PHD Assistant Professor of Clinical Medicine, Internal Medicine
Iskra Pusic, MD Instructor in Medicine, Internal Medicine
Peter J Putnam, MD Assistant Professor of Clinical Pediatrics, Pediatrics
Jenna M Putzel Instructor in Clinical Pediatrics, Pediatrics
Carlos Angel Puyo, MD Assistant Professor of Anesthesiology, Anesthesiology
Michelle Anne Hurchla Pyles, PHD Research Instructor in Medicine, Internal Medicine
Usman Qayyum Instructor in Clinical Medicine, Internal Medicine
Mujtaba A Qazi Instructor in Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Robert Louis Quaas, MD Instructor in Clinical Pediatrics, Pediatrics
Kimberly S Quayle, MD Associate Professor of Pediatrics, Pediatrics
Patricia M Quinley, MD Instructor in Clinical Medicine, Internal Medicine
Jennifer Quinn, MD Instructor in Clinical Pediatrics, Pediatrics
James D Quirk, MA, PHD Research Instructor in Radiology, Radiology
Abdul H Qureshi, MS Instructor in Clinical Medicine, Internal Medicine
John S Rabun, MD Instructor in Clinical Psychiatry, Psychiatry
Brad Alan Racette, MD Professor of Neurology, Neurology
Susan B. Racette, PHD Research Associate Professor of Medicine, Internal Medicine
Susan B. Racette, PHD Research Associate Professor of Physical Therapy, Program in Physical Therapy
Edward Floyd Ragsdale, MD Instructor in Clinical Radiology, Radiology
Mohammad H Rahman Instructor in Clinical Pediatrics, Pediatrics
Jodie Rai, MD Associate Professor of Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Marcus E Raichle, MD Professor of Biomedical Engineering, Department of Biomedical Engineering
Marcus E Raichle, MD Professor of Neurobiology, Anatomy and Neurobiology
Marcus E Raichle, MD Professor of Neurology, Neurology
Marcus E Raichle, MD Professor of Psychology, Department of Psychology
Marcus E Raichle, MD Professor of Radiology, Radiology
Rithwick Rajagopal, MD Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Mark S Rallo, OD Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Sabarinathan Ramachandran, MS, PHD Research Instructor in Surgery (General Surgery), Surgery
Kathleen G Raman, M PH, MD Assistant Professor of Surgery (General Surgery), Surgery
Vidya Raman Instructor in Clinical Pediatrics, Pediatrics
Narendrakumar Ramanan, MS, PHD Assistant Professor of Neurobiology, Anatomy and Neurobiology
Pathmawathy T Ramesvara, MS Instructor in Clinical Pediatrics, Pediatrics
Roxane M. Rampersad, MD Assistant Professor of Obstetrics and Gynecology, Obstetrics and Gynecology
Gwendalyn Jan Randolph, PHD Professor of Medicine, Internal Medicine
Gwendalyn Jan Randolph, PHD Professor of Pathology and Immunology, Pathology and Immunology
Prabha Ranganathan, MBBS Associate Professor of Medicine, Internal Medicine
Diane Rankin, MD Assistant Professor of Clinical Psychiatry, Psychiatry
Dabeeru C Rao, MS, PHD Director of the Division of Biostatistics, Division of Biostatistics
Dabeeru C Rao, MS, PHD Professor of Biostatistics, Division of Biostatistics
Dabeeru C Rao, MS, PHD Professor of Biostatistics in Genetics, Genetics
Dabeeru C Rao, MS, PHD Professor of Biostatistics in Psychiatry, Psychiatry
Dabeeru C Rao, MS, PHD Professor of Mathematics, Department of Mathematics
Dabeeru C Rao, MS, PHD Tenure Held At-Large in the Medical School, Medical School Administration
Lesley Kathryn Rao, MD Instructor in Anesthesiology, Anesthesiology
Prabakar Kumar Rao, MD Associate Professor of Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Radhika Rao, MD Instructor in Clinical Psychiatry, Psychiatry
Rajesh C Rao, MD Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Rakesh Rao, MBBS, MD Assistant Professor of Pediatrics, Pediatrics
Ricardo Rao, MD Instructor in Clinical Surgery (General Surgery), Surgery
U. Ramakrishna Rao, MS, PHD Research Associate Professor of Medicine, Internal Medicine
Constantine A Raptis, MD Assistant Professor of Radiology, Radiology
Ravi Rasalingam, MD Assistant Professor of Medicine, Internal Medicine
Emanuel Rashet, MD Instructor in Clinical Pediatrics, Pediatrics
Samiya Rashid, MD Assistant Professor of Neurology, Neurology
Antonella Luisa Rastelli, MD Assistant Professor of Medicine, Internal Medicine
Antonella Luisa Rastelli, MD Instructor in Surgery (General Surgery), Surgery
Antonella L Rastelli, Siteman Cancer Center, Assistant Professor of Medicine, Division of Oncology, Section of Breast Oncology, Washington University School of Medicine, 1994-1997: Resident, internal medicine, Washington University, St. Louis, 2000-2002: Clinical fellow, women's health, Washington University, St. Louis, 1991: MD, University of Verona, Verona, Italy, Primary Specialty: Breast health, including benign breast disease, treatment of women at high risk for breast cancer, long-term follow-up of breast cancer patients and ductal carcinoma in situ; bone and mineral diseases, Board Certified: 1997: American Board of Internal Medicine, Internal Medicine
Rahul Rastogi, MBBS Associate Professor of Anesthesiology, Anesthesiology
Nicholas D Rathert, MD Instructor in Emergency Medicine in Medicine, Internal Medicine
Gary A Ratkin, MD Associate Professor of Clinical Medicine, Internal Medicine
Gary A Ratkin, MD Instructor in Clinical Radiation Oncology, Radiation Oncology
Jebadurai Ratnaraj, MD Assistant Professor of Anesthesiology, Anesthesiology
Lee Ratner, MA, MD, PHD Professor of Medicine, Internal Medicine
Lee Ratner, MA, MD, PHD Professor of Molecular Microbiology, Molecular Microbiology
Valerie Ratts, MD Professor of Obstetrics and Gynecology, Obstetrics and Gynecology
Daniel Rauch, PhD Research Assistant Professor of Medicine, Internal Medicine
V. Nathan Ravi, MD, MS, PHD Professor of Energy, Environmental and Chemical Engineering, Department of Chemical Engineering
V. Nathan Ravi, MD, MS, PHD Professor of Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Amy J. Ravin, MD Assistant Professor of Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Wilson Z Ray, MD Assistant Professor of Neurological Surgery (Pending Executive Faculty Approval), Neurological Surgery
Saadia Taufiq Raza, MD Assistant Professor of Clinical Medicine (Dermatology), Internal Medicine
Syed A Raza, MD Assistant Professor of Clinical Psychiatry (Child Psychiatry), Psychiatry
Babak Razani, MD, PHD Assistant Professor of Medicine, Internal Medicine
Babak Razani, MD, PHD Assistant Professor of Pathology and Immunology, Pathology and Immunology
Sheryl S Ream, MD Instructor in Clinical Pediatrics, Pediatrics
Timothy Patrick Rearden, MD, MS Instructor in Clinical Medicine, Internal Medicine
Neil F. Rebe, MD, PHS Instructor in Clinical Pediatrics, Pediatrics
Jeffrey T Reed, MD Instructor in Clinical Medicine (Dermatology), Internal Medicine
Jonathan R Reed, MD Assistant Professor of Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Timothy Reed Instructor in Clinical Pediatrics, Pediatrics
Dominic N Reeds, MD Assistant Professor of Medicine, Internal Medicine
Susan Robinson Reeds, MD Instructor in Clinical Medicine, Internal Medicine
Adam Gustave Regelmann Instructor in Clinical Medicine, Internal Medicine
David E Reichert, PHD Associate Professor of Radiology, Radiology
Phillip D Reichert Instructor in Clinical Pediatrics, Pediatrics
Valerie C Reichert, MD Assistant Professor of Radiology, Radiology
David E Reichert Siteman Cancer Center, Associate Professor of Radiology, Division of Radiological Sciences, Mallinckrodt Institute of Radiology, Washington University School of Medicine, 1994: PhD, organic chemistry, University of Illinois, Urbana
Valerie C. Reichert Siteman Cancer Center, Assistant Professor of Radiology, Division of Diagnostic Radiology, Section of Breast Imaging, Washington University School of Medicine, 1991: Intern, internal medicine, Santa Clara Valley Medical Center, San Jose, Calif., 1995: Resident, diagnostic radiology, Washington University, St. Louis, 1996: Fellow, abdominal imaging, Washington University, 1990: MD, Stanford University, Stanford, Calif., Primary Specialty: Diagnostic radiology and breast imaging, Board Certified:, 1995: American Board of Radiology, Diagnostic Radiology
Angela M. Reiersen, MD, MS PSYC Assistant Professor of Psychiatry (Child Psychiatry), Psychiatry
Margaret Reiker, MD, PHD Instructor in Clinical Medicine, Internal Medicine
Angela Mary Reining Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Daniel B. Reising Instructor in Clinical Psychiatry (Child Psychiatry), Psychiatry
David Martin Reisler, M PH, MD Assistant Professor of Clinical Neurology, Neurology
Craig K Reiss, MD Sam and Marilyn Fox Distinguished Professor of Medicine, Internal Medicine
Jacqueline Levy Reiss, MD Instructor in Clinical Medicine, Internal Medicine
Maria Sara Remedi, MS, PHD Research Assistant Professor of Cell Biology and Physiology, Cell Biology and Physiology
Catherine R Remus, MD, MSN Assistant Professor of Clinical Pediatrics, Pediatrics
Dave A Rengachary, MD Instructor in Clinical Neurology, Neurology
Hilary Elizabeth Lee Reno, MD, MS, PHD Instructor in Medicine, Internal Medicine
Stacey L. Rentschler, MD, MS, PHD Assistant Professor of Medicine (Pending Executive Faculty Approval), Internal Medicine
Nicholas R Renz Instructor in Emergency Medicine in Medicine (Pending Dean's Approval), Internal Medicine
Michael P Rettig, PHD Research Assistant Professor of Medicine, Internal Medicine
Federico E Rey, PHD Research Instructor in Pathology and Immunology, Pathology and Immunology
George H Rezabek, DO/ST Instructor in Clinical Pediatrics, Pediatrics
Edward K Rhee, MD Adjunct Associate Professor of Pediatrics, Pediatrics
William M Ricci, MD Professor of Orthopaedic Surgery, Orthopaedic Surgery

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John P Rice, MA, PHD Professor of Biostatistics, Division of Biostatistics
John P Rice, MA, PHD Professor of Genetics, Genetics
John P Rice, MA, PHD Professor of Mathematics in Psychiatry, Psychiatry
Treva Kay Rice, MA, PHD Research Associate Professor of Biostatistics, Division of Biostatistics
Treva Kay Rice, MA, PHD Research Associate Professor of Psychiatry, Psychiatry
Charles M Rice III, PHD Adjunct Professor of Molecular Microbiology, Molecular Microbiology
Jason T. Rich, MD Assistant Professor of Otolaryngology, Otolaryngology
Keith M Rich, MD Professor of Neurobiology, Anatomy and Neurobiology
Keith M Rich, MD Professor of Neurological Surgery, Neurological Surgery
Keith M Rich, MD Professor of Radiation Oncology, Radiation Oncology
Michael W Rich, MD Professor of Medicine, Internal Medicine
Lois F. Richard, MD, PHD Assistant Professor of Medicine, Internal Medicine
Cheryl Richards, MA, PHD Assistant Professor of Psychiatry, Psychiatry
Frank O Richards, MD Assistant Professor Emeritus of Clinical Surgery (General Surgery), Surgery
Susan Lynn Richardson, MS, PHD Assistant Professor of Radiation Oncology, Radiation Oncology
Thomas F Richardson, MD Professor of Psychiatry, Psychiatry
David Joseph Riddle, MD Instructor in Medicine, Internal Medicine
William M Riedesel II, MD Associate Professor of Clinical Psychiatry, Psychiatry
Terrence E Riehl, MS, PHD Research Assistant Professor of Medicine, Internal Medicine
Amy Elizabeth Riek, MD, PHD Assistant Professor of Medicine, Internal Medicine
K. Daniel Riew, MD Mildred B. Simon Distinguished Professor of Orthopaedic Surgery, Orthopaedic Surgery
K. Daniel Riew, MD Professor of Neurological Surgery, Neurological Surgery
Robert D Rifkin, MD Professor of Medicine, Internal Medicine
Shale M Rifkin, MD Assistant Professor of Clinical Surgery (General Surgery), Surgery
Caron E Rigden, BFA, MD Assistant Professor of Medicine, Internal Medicine
Caron Rigden Siteman Cancer Center, Assistant Professor of Medicine, Division of Oncology, Section of Medical Oncology, Washington University School of Medicine, 2000-2003: Intern and resident, Tulane University, New Orleans, 2003-2007: Fellow, hematology and medical oncology, Washington University, St. Louis, 2000: MD, Tulane University, New Orleans, Primary Specialty: Medical oncology, gastrointestinal cancers, Board Certified; 2003: American Board of Internal Medicine, Internal Medicine 2007: American Board of Internal Medicine, Medical Oncology
Lee A Rigg, MD, PHD Associate Professor of Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Joan K. Riley, PHD Assistant Professor of Obstetrics and Gynecology, Obstetrics and Gynecology
Joan K. Riley, PHD Instructor in Medicine, Internal Medicine
Julie L Ring, DDENT Instructor in Clinical Otolaryngology (DDS), Otolaryngology
Lisa B Ring, MD Instructor in Clinical Medicine (Dermatology), Internal Medicine
Tracy Marie Riordan, MD Instructor in Clinical Medicine, Internal Medicine
Stephen L. Ristvedt, MA, PHD Associate Professor of Psychiatry, Psychiatry
Terri L Riutcel, MD Associate Professor of Neurology, Neurology
Katherine Rivera-Spoljaric, MD, MS Assistant Professor of Pediatrics, Pediatrics
William L. Rives, MD, MS Assistant Professor of Pediatrics, Pediatrics
Robert V Rivlin, DDENT, MS Instructor in Clinical Otolaryngology (DMD), Otolaryngology
Syed T Rizvi  , Assistant Professor of Clinical Psychiatry (Child Psychiatry), Psychiatry
Necita L Roa  , MD Associate Professor of Anesthesiology, Anesthesiology
Frank Edward Robbins  , MD Assistant Professor of Anesthesiology, Anesthesiology
Charles M. Robertson  , MD Instructor in Anesthesiology, Anesthesiology
Clifford Grant Robinson  , MD Assistant Professor of Radiation Oncology, Radiation Oncology
Clifton A Robinson  , MD Instructor in Emergency Medicine in Medicine, Internal Medicine
Janis B Robinson  , MA, MD Associate Professor of Clinical Pediatrics, Pediatrics
Kathryn Ann Robinson  , MD Assistant Professor of Radiology, Radiology
Paul Arthur Robiolio  , M PHIL, MD Assistant Professor of Clinical Medicine, Internal Medicine
Ann Marie Rockamann  , MD Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Catherine M Roe  , MA, PHD Research Assistant Professor of Neurology, Neurology
Catherine M Roe  Siteman Cancer Center, Research Assistant Professor of Neurology, Washington University School of Medicine, 2007-2010: Postdoctoral fellow, Clinical Research Training Center, Washington University, St. Louis, 1990: MA, clinical and experimental psychology, Southern Illinois University, Carbondale, 1992: PhD, clinical and experimental psychology, Southern Illinois University
M. Reza Rofougaran  , MD Instructor in Clinical Medicine, Internal Medicine
John Deno Rogakos  , MD Instructor in Clinical Psychiatry (Child Psychiatry), Psychiatry
Buck Edward Rogers  , MA, PHD Professor of Radiation Oncology, Radiation Oncology
Buck Edward Rogers  , MA, PHD Professor of Radiology, Radiology
Cynthia E Rogers  Instructor in Psychiatry, Psychiatry
H. Bryan Rogers  , MD Instructor in Clinical Medicine, Internal Medicine
Sharon Alicia Rogers  , MS Research Instructor in Medicine, Internal Medicine
Buck E Rogers  Siteman Cancer Center, Professor of Radiation Oncology, Division of Radiation and Cancer Biology, Washington University School of Medicine, 1991: MA, chemistry, Washington University, St. Louis, 1995: PhD, inorganic chemistry, Washington University
Sandeep Rohatgi  , MD Instructor in Clinical Pediatrics, Pediatrics
Michael Dennis Rohde  , OD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
James R Rohrbaugh  , MD Associate Professor of Clinical Neurology, Neurology
James R Rohrbaugh  , MD Associate Professor of Clinical Pediatrics, Pediatrics
John W Rohrbaugh  , PHD Associate Professor of Psychology, Department of Psychology
John W Rohrbaugh  , PHD Professor of Psychiatry, Psychiatry
John W Rohrbaugh  Siteman Cancer Center, Associate Professor of Psychiatry, Washington University School of Medicine, 1972-1979: Postdoctoral fellow, psychology, University of California, Los Angeles, 1973: PhD, psychology, University of Illinois Urbana-Champaign, Champaign
Chinda Vanasin Rojanasathit  , MD Assistant Professor of Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Felice A Rolnick  , MD Instructor in Clinical Medicine, Internal Medicine
Rizwan Romee  , MD Instructor in Medicine, Internal Medicine
Arthur G. Romero  , PHD Research Associate Professor of Medicine, Internal Medicine
Joan Lee Rosenbaum  , MD, MS Professor of Pediatrics, Pediatrics
Louis J Rosenbaum  , MD Associate Professor of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Isabel L Rosenbloom  , MD Associate Professor of Clinical Pediatrics, Pediatrics
Daniel B Rosenbluth  , MD Professor of Medicine, Internal Medicine
Daniel B Rosenbluth, MD Professor of Pediatrics, Pediatrics
Aron Salomon Rosenstock, MD Instructor in Medicine, Internal Medicine
Anna Roshal, MD Assistant Professor of Medicine, Internal Medicine
Kelly Ross, MD Assistant Professor of Pediatrics, Pediatrics
William J Ross, MD Associate Professor of Clinical Pediatrics, Pediatrics
Willie Ray Ross, M PH, MD Associate Dean for Diversity, Medical School Student Affairs
Willie Ray Ross, M PH, MD Associate Professor of Medicine, Internal Medicine
Bruce J Roth, MD Professor of Medicine, Internal Medicine
Robert J Rothbaum, MD Centennial Professor of Pediatrics, Pediatrics
Marcos Rothstein, MD Professor of Medicine, Internal Medicine
Mark A Rothstein, MD Assistant Professor of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Ernest Tuttle Rouse III, MD Instructor in Clinical Medicine, Internal Medicine
Jeremy Rower, MD Instructor in Clinical Medicine, Internal Medicine
Tapan Roy, MS Instructor in Clinical Radiation Oncology, Radiation Oncology
Henry D Royal, MD Professor of Radiology, Radiology
Henry D Royal, Siteman Cancer Center, Professor of Radiology and Chief, Division of Nuclear Medicine, Mallinckrodt Institute of Radiology, Washington University School of Medicine, 1974-1977: Resident, internal medicine, Brown University, Providence, R.I., 1977-1979: Resident, nuclear medicine, Harvard Medical School, Boston, 1974: MD, Saint Louis University, Primary Specialty: Tumor imaging, pulmonary embolism, radiation injuries, positron emission tomography, Board Certified:, American Board of Internal Medicine, Internal Medicine
American Board of Nuclear Medicine, Nuclear Medicine
Ella Rozin, Instructor in Clinical Pediatrics, Pediatrics
Brian G Rubin, MD Professor of Radiology, Radiology
Brian G Rubin, MD Professor of Surgery (General Surgery), Surgery
David A Rubin, MD Professor of Radiology, Radiology
Deborah C Rubin, MD Professor of Developmental Biology, Molecular Biology and Pharmacology
Deborah C Rubin, MD Professor of Medicine, Internal Medicine
Eugene Harold Rubin, MD, PHD Professor of Psychiatry, Psychiatry
Eugene Harold Rubin, MD, PHD Professor of Psychology (courtesy), Department of Psychology
Eugene Harold Rubin, MD, PHD Vice Chairman for Education, Department of Psychiatry, Psychiatry
Joshua Bennett Rubin, MD, MS, PHD Associate Professor of Neurobiology, Anatomy and Neurobiology
Joshua Bennett Rubin, MD, MS, PHD Associate Professor of Neurology, Neurology
Joshua Bennett Rubin, MD, MS, PHD Associate Professor of Pediatrics, Pediatrics
Myra L. Rubio, MD Assistant Professor of Medicine, Internal Medicine
Christina M Ruby, MD Instructor in Clinical Pediatrics, Pediatrics
Martin D Rudloff, MD Assistant Professor of Clinical Pediatrics, Pediatrics
David Rudnick, MD, PHD Associate Professor of Developmental Biology, Molecular Biology and Pharmacology
David Rudnick, MD, PHD Associate Professor of Pediatrics, Pediatrics
Daniel G. Rudolph, MD Instructor in Clinical Pediatrics, Pediatrics
Karen Elizabeth Ruecker, MD Instructor in Clinical Pediatrics, Pediatrics
Albert F Ruehl, MD, MS Assistant Professor of Clinical Otolaryngology, Otolaryngology
Ana Maria Ruiz Manzano, PHD Research Assistant Professor of Biochemistry and Molecular Biophysics, Biochemistry and Molecular Biophysics

Michael B Rumelt, MD Assistant Professor Emeritus of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

Brent E Ruoff, MD Associate Professor of Emergency Medicine in Medicine, Internal Medicine

Diane Mary Rup, MA, MD Instructor in Clinical Pediatrics, Pediatrics

John Hall Russell, PHD Associate Dean for Graduate Education for the Division of Biology and Biomedical Sciences, Division of Biology and Biomedical Sciences

John Hall Russell, PHD Professor of Developmental Biology, Molecular Biology and Pharmacology

Tonya D Russell, MD Associate Professor of Medicine, Internal Medicine

James Rutherford, MD Assistant Professor Emeritus of Clinical Psychiatry, Psychiatry

Rimma Ruvinskaya, MD Assistant Professor of Neurology, Neurology

Joseph F Ruwitch Jr, MD Professor of Clinical Medicine, Internal Medicine

Marianna B Ruzinova, MD, PHD Assistant Professor of Pathology and Immunology (Pending Executive Faculty Approval), Pathology and Immunology

Jo-Ellyn M Ryall, MD Associate Professor of Clinical Psychiatry, Psychiatry

Lisa A Ryan Instructor in Clinical Pediatrics, Pediatrics

Kenneth J Rybicki Jr, MD, MS, PhD Instructor in Clinical Medicine, Internal Medicine

Nael E. A. Saad, MBBCH Assistant Professor of Surgery, Surgery

Nael Saad Siteman Cancer Center, Assistant Professor of Radiology, Division of Diagnostic Radiology, Section of Interventional Radiology, Mallinckrodt Institute of Radiology, Washington University School of Medicine, 2002-2003: Intern, general surgery, University of Illinois, Chicago, 2003-2007: Resident, radiology, University of Rochester, Rochester, N.Y., 2007-2008: Fellow, interventional radiology, Washington University, St. Louis, 1998: MB BCh, Ain Shams University, Cairo, Egypt, Primary Specialty: Minimally invasive treatment of primary and secondary tumors through radioembolization, transarterial chemoembolization, transarterial bland embolization, radiofrequency ablation (RFA) and cryoablation, Board Certified:, 2007: American Board of Radiology, Diagnostic Radiology

Roshan I Sabar Instructor in Clinical Medicine, Internal Medicine

Frank Scott Saccone, PHD Research Assistant Professor of Psychiatry, Psychiatry

Nancy L. Saccone, MS, PHD Associate Professor of Biostatistics, Division of Biostatistics

Nancy L. Saccone, MS, PHD Associate Professor of Genetics, Genetics

Jerome D Sachar, MD Assistant Professor of Clinical Obstetrics and Gynecology, Obstetrics and Gynecology

Adnan Sadiq, MD Assistant Professor of Anesthesiology, Anesthesiology

Adnan Sadiq, MD Assistant Professor of Surgery (Cardiothoracic Surgery), Surgery

J. Evan Sadler, MD, PHD Professor of Biochemistry and Molecular Biophysics, Biochemistry and Molecular Biophysics

J. Evan Sadler, MD, PHD Professor of Medicine, Internal Medicine


Mehrdad Saeed-Vafa, MD Instructor in Clinical Medicine, Internal Medicine

Bashar Safar, MD Assistant Professor of Surgery (General Surgery), Surgery

Shabbir H Safdar  Professor of Clinical Medicine, Internal Medicine
Scott Geoffrey Sagett  Instructor in Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Sonny Satnam Saggar  Instructor in Clinical Medicine, Internal Medicine
Marcel T Saghir , MD  Professor of Psychiatry, Psychiatry
Jonathan Salas Sagum , MD  Instructor in Medicine, Internal Medicine
Sudha Saha , MD  Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Shirley Ann Sahrmann , MA, PhD  Professor Emeritus of Physical Therapy, Program in Physical Therapy
Laila F. Saied , MD  Instructor in Medicine, Internal Medicine
Jacqueline Mitsouko Saito , MD  Assistant Professor of Surgery (Pediatric Surgery), Surgery
Kaori A. Sakurai  Instructor in Clinical Medicine, Internal Medicine
Monica Sala-Rabanal , PHD  Research Instructor in Cell Biology and Physiology, Cell Biology and Physiology
Berette A Salazar , MD  Assistant Professor of Clinical Psychiatry, Psychiatry
Lawrence B Salkoff , PHD  Professor of Genetics, Genetics
Lawrence B Salkoff , PHD  Professor of Neurobiology, Anatomy and Neurobiology
Alec N Salt , MS, PHD  Professor of Otolaryngology, Otolaryngology
Christine Joan Salter , DC, MD  Instructor in Clinical Medicine, Internal Medicine
Robert J Saltman , MD  Associate Professor of Clinical Medicine, Internal Medicine
John Mark Samet , MD  Instructor in Clinical Medicine, Internal Medicine
Christopher S. Sampson , MD  Asst Prof of Emergency Medicine in Medicine, Internal Medicine
Charles Michael Samson  Instructor in Pediatrics, Pediatrics
Lawrence E Samuels , MD  Instructor in Clinical Medicine (Dermatology), Internal Medicine
Souzan Sanati , MD  Assistant Professor of Pathology and Immunology, Pathology and Immunology
Guadalupe Sanchez , MD  Instructor in Clinical Medicine (Dermatology), Internal Medicine
Luis A Sanchez , MD  Gregorio A. Sicard Distinguished Professor, Surgery
Luis A Sanchez , MD  Professor of Radiology, Radiology
Luis A Sanchez , MD  Professor of Surgery (General Surgery), Surgery
Linda J Sandell , MS, PHD  Mildred B Simon Research Professor of Orthopaedic Surgery, Orthopaedic Surgery
Linda J Sandell , MS, PHD  Professor of Cell Biology and Physiology, Cell Biology and Physiology
Gretchen A Sander , MD  Instructor in Clinical Pediatrics, Pediatrics
Heidi L Sandige , MA, MA1, MD  Instructor in Pediatrics, Pediatrics
Mark Steven Sands , PHD  Professor of Genetics, Genetics
Mark Steven Sands , PHD  Professor of Medicine, Internal Medicine
Mark S Sands  Siteman Cancer Center, Associate Professor of Medicine, Division of Oncology, Section of Stem Cell Biology, Washington University School of Medicine, 1990-1993: Postdoctoral fellow, Jackson Laboratory, Bar Harbor, Maine, 1993-1994: Postdoctoral research fellow, pathobiology, University of Pennsylvania, Philadelphia, 1990: PhD, molecular and cellular pharmacology, State University of New York, Stony Brook
Daniel Jose Santa Cruz , MD  Instructor in Clinical Medicine (Dermatology), Internal Medicine
Lakshmi Santanam , MS, PHD  Assistant Professor of Radiation Oncology, Radiation Oncology
Celia Maria Santi Grau Perez , MD, PHD  Research Assistant Professor of Neurobiology, Anatomy and Neurobiology
Paul Santiago , MD  Associate Professor of Neurological Surgery, Neurological Surgery
Paul Santiago , MD  Associate Professor of Orthopaedic Surgery, Orthopaedic Surgery

Carlos Alfonso Quilala Santos  , MD Assistant Professor of Medicine, Internal Medicine

Richard Albert Santos  , MD, PHD Assistant Professor of Medicine, Internal Medicine

Evelio E. Sardina  , MD, MS, PHD Instructor in Clinical Medicine, Internal Medicine

Carolyn E. Sartor  , MS, PHD Adjunct Assistant Professor of Psychiatry, Psychiatry

Norman Sartorius  Adjunct Professor of Psychiatry, Psychiatry

Yo Sasaki  , MS, PHD Research Assistant Professor of Genetics, Genetics

Heather Fell Sateia  , MD Instructor in Medicine, Internal Medicine

Diana M Sater-Roukoz  Instructor in Clinical Pediatrics, Pediatrics

George Sato  , MD Professor of Clinical Pediatrics, Pediatrics

Richard William Sato  , MD Assistant Professor of Clinical Pediatrics, Pediatrics

Donald C Sauer  , MD Assistant Professor Emeritus of Clinical Surgery (General Surgery), Surgery

Scott Saunders  , MD, PHD Associate Professor of Developmental Biology, Molecular Biology and Pharmacology

Scott Saunders  , MD, PHD Associate Professor of Pediatrics, Pediatrics

Brian J. Saville  , MD Instructor in Clinical Pediatrics, Pediatrics

Atsushi Sawada  , PHD Research Instructor in Developmental Biology, Molecular Biology and Pharmacology

Blaine M Sayre  , M PH, MD Professor of Clinical Pediatrics, Pediatrics

Gregory Stephen Sayuk  , MD Assistant Professor of Medicine, Internal Medicine

Gregory Stephen Sayuk  , MD Assistant Professor of Psychiatry, Psychiatry

Lawrence R Schacht  , MD Instructor in Clinical Medicine, Internal Medicine

Joseph Schachter  , MD Assistant Professor of Clinical Pediatrics, Pediatrics

Anneliese M Schaefer  , BBA, JD, PHD Research Associate Professor of Neurology, Neurology

Jean E. Schaffer  , MD Professor of Developmental Biology, Molecular Biology and Pharmacology

Jean E. Schaffer  , MD Virginia Minnich Distinguished Professor of Medicine, Internal Medicine

Gerwin Schalk  Adjunct Assistant Professor of Neurological Surgery, Neurological Surgery

Richard O. Schamp  , MD Instructor in Clinical Medicine, Internal Medicine

Kenneth B Schechtman  , MA, MS, PHD Associate Professor of Biostatistics, Division of Biostatistics

Kenneth B Schechtman  , MA, MS, PHD Research Associate Professor of Medicine, Internal Medicine

Kenneth B Schechtman  , MA, MS, PHD Tenure Held At-Large in the Medical School, Medical School Administration

Kenneth B Schechtman  Siteman Cancer Center, Associate Professor of Biostatistics, Washington University School of Medicine, 1971: MS, mathematics, Purdue University, Lafayette, Ind., 1978: MA, statistics, Washington University, St. Louis, 1978: PhD, mathematics/statistics, Washington University

Tim B Schedl  , PHD Professor of Genetics, Genetics

Tim B Schedl Siteman Cancer Center, Professor of Genetics, Washington University School of Medicine, 1984-1988: Postdoctoral fellow, University of Wisconsin, Madison, 1984: PhD, molecular biology, University of Wisconsin, Madison

Robert F Scheible  , MD Assistant Professor of Clinical Radiology, Radiology

Lawrence M. Scheier  Adjunct Professor of Psychiatry, Psychiatry

Stefano Schena  , MD, PHD Assistant Professor of Surgery (Cardiothoracic Surgery), Surgery

Mark Scheperle  , MD Instructor in Clinical Medicine, Internal Medicine
Alvin K Schergen, MD Instructor in Clinical Medicine, Internal Medicine
Jeffrey Frank Scherrer, PHD Research Associate Professor of Psychiatry, Psychiatry
Joel D. Schilling, MD, PHD Assistant Professor of Medicine, Internal Medicine
Joel D. Schilling, MD, PHD Assistant Professor of Pathology and Immunology, Pathology and Immunology
Bradley L Schlaggar, MD, PHD A Ernest and Jane G Stein Associate Professor of Neurology, Neurology
Bradley L Schlaggar, MD, PHD Associate Professor of Neurobiology, Anatomy and Neurobiology
Bradley L Schlaggar, MD, PHD Associate Professor of Pediatrics, Pediatrics
Bradley L Schlaggar, MD, PHD Associate Professor of Radiology, Radiology
Howard J Schlansky, MD Instructor in Clinical Pediatrics, Pediatrics
Paul Henry Schlesinger, MD, PHD Associate Professor of Cell Biology and Physiology, Cell Biology and Physiology
Margaret Ann Schmandt, MD Associate Professor of Clinical Pediatrics, Pediatrics
Tania L Schmid, MD Instructor in Clinical Medicine, Internal Medicine
Martin P Schmidt, MD Assistant Professor of Clinical Pediatrics, Pediatrics
Robert Edward Schmidt, MD, PHD Professor of Pathology and Immunology, Pathology and Immunology
David Schnadower, M.Ph, MD Assistant Professor of Pediatrics, Pediatrics
Robert Jay Schneider, MD Assistant Professor of Clinical Medicine, Internal Medicine
Jacquelyn C Schmidman, MD Instructor in Clinical Pediatrics, Pediatrics
Erin R. Schockett, MD Instructor in Clinical Medicine, Internal Medicine
Perry Lee Schoenecker, MD Professor of Orthopaedic Surgery, Orthopaedic Surgery
Mario Schootman, MS, PHD Professor of Medicine, Internal Medicine
Robert D Schreiber, PHD Alumni Professor of Pathology and Immunology, Pathology and Immunology
Robert D Schreiber, PHD Professor of Molecular Microbiology, Molecular Microbiology
Robert D Schreiber Siteman Cancer Center, Alumni Endowed Professor of Pathology and Immunology, Section of Immunology and Molecular Pathology, Washington University School of Medicine, 1973: Postdoctoral fellow, medicine and biochemistry, State University of New York, Buffalo, 1973-1976: Postdoctoral fellow, molecular immunology, Scripps Research Institute, La Jolla, Calif., 1973: PhD, biochemistry and immunology, State University of New York, Buffalo
Richard E Schrick, MD, MEE Instructor in Clinical Otolaryngology, Otolaryngology
Charles R Schrock, MD Associate Professor of Anesthesiology, Anesthesiology
Mark Andrew Schroeder, MD Assistant Professor of Medicine, Internal Medicine
Douglas J Schuerer, MD Associate Professor of Surgery (General Surgery), Surgery
Richard B Schuessler, MS, PHD Research Associate Professor of Biomedical Engineering, Department of Biomedical Engineering
Richard B Schuessler, MS, PHD Research Professor of Surgery (Cardiothoracic Surgery), Surgery
Laura Graves Schuettgelz Instructor in Pediatrics (Pending Dean's Approval), Pediatrics
Alexander E Schuetz, MD Instructor in Clinical Medicine, Internal Medicine
Maryls E Schuh, MD Instructor in Clinical Surgery (General Surgery), Surgery
Jeffrey I Schuman, MBA, MD Instructor in Clinical Psychiatry (Child Psychiatry), Psychiatry
Earl R Schultz, MD Associate Professor of Clinical Psychiatry, Psychiatry
Earl R Schultz, MD Professor of Clinical Neurology, Neurology
Paul Schultz, MD Instructor in Clinical Medicine, Internal Medicine
Stephen Schuman, MD Instructor in Clinical Medicine, Internal Medicine
Frederick W Schwagger, OD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Alan L Schwartz, MD, PHD Harriet B Speoher Professor of Pediatrics, Pediatrics
Alan L Schwartz, MD, PHD Head of the Department of Pediatrics, Pediatrics
Alan L Schwartz, MD, PHD Professor of Developmental Biology, Molecular Biology and Pharmacology
Benjamin D Schwartz, MD, PHD Adjunct Professor of Medicine, Internal Medicine
Benjamin D Schwartz, MD, PHD Professor of Clinical Medicine, Internal Medicine
David B Schwartz, MA, MD, PHD Associate Professor of Medicine, Internal Medicine
Evan Stuart Schwarz Assistant Professor of Emergency Medicine in Medicine (Pending Executive Faculty Approval), Internal Medicine
Julie K Schwarz, MD, PHD Assistant Professor of Cell Biology and Physiology, Cell Biology and Physiology
Julie K Schwarz, MD, PHD Assistant Professor of Radiation Oncology, Radiation Oncology
Sally J Schwarz, MS Research Associate Professor of Radiology, Radiology
Julie K. Schwarz Siteman Cancer Center, Assistant Professor of Radiation Oncology, Washington University School of Medicine, 2004-2005: Intern, internal medicine, Washington University, St. Louis, 2005-2009: Resident, radiation oncology, Washington University, 2004: MD/PhD, Washington University, St. Louis, Primary Specialty: Gynecologic cancers, thyroid cancer, molecular imaging, Board Certified:, American Board of Radiology, Radiation Oncology
Allen Sclaroff, DDENT Professor of Clinical Otolaryngology (Oral Surgery), Otolaryngology
Leslie A Scott Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Mitchell G Scott, MS, PHD Clinical Research Assistant Professor of Medicine, Internal Medicine
Mitchell G Scott, MS, PHD Professor of Pathology and Immunology, Pathology and Immunology
Lynne M Seacord, MD Assistant Professor of Medicine, Internal Medicine
Homayoun Sedighi, DDENT Assistant Professor of Clinical Surgery (Plastic and Reconstructive Surgery), Surgery
Colleen Erika Seematter Instructor in Clinical Pediatrics, Pediatrics
Christopher G Seep, OD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Adelita Segovia Langley Instructor in Clinical Psychiatry (Child Psychiatry), Psychiatry
David Brian Seibel, OD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Karen Seibert, MA, PHD Research Professor of Genetics, Genome Center
Karen Seibert, MA, PHD Research Professor of Pathology and Immunology, Pathology and Immunology
Michael Edward Seifert Assistant Professor of Clinical Pediatrics, Pediatrics
Susumu Seino, MD, PHD Adjunct Professor of Medicine, Internal Medicine
David Seltzer, MD Assistant Professor of Emergency Medicine in Medicine, Internal Medicine
Jay R Seltzer, MD Assistant Professor of Clinical Medicine, Internal Medicine
Clay F Semenkovich, MD Herbert S Gasser Professor, Internal Medicine
Clay F Semenkovich, MD Professor of Cell Biology and Physiology, Cell Biology and Physiology
Clay F Semenkovich, MD Professor of Medicine, Internal Medicine
Janice Semenkovich, MD Associate Professor of Radiology, Radiology
Clay F. Semenkovich Siteman Cancer Center, Herbert S. Gasser Professor and Chief of Endocrinology, Metabolism and Lipid Research, Washington University School of Medicine, 1981-1984: Intern and resident, internal medicine, Washington University, St. Louis, 1984-1986: Fellow, endocrinology and metabolism, Washington University, 1986-1987: Chief resident, internal medicine, Washington University, 1981: MD, Washington University, St. Louis, Primary Specialty: Hyperlipidemia, thyroid disorders, endocrinology, diabetes, Board Certified:, 1984: American Board of Internal Medicine, Internal Medicine
1987: American Board of Internal Medicine, Endocrinology and Metabolism
Robert M Senior, MD, MLA Dorothy R and Hubert C Moog Professor of Pulmonary Diseases in Medicine, Internal Medicine
Robert M Senior, MD, MLA Professor of Cell Biology and Physiology, Cell Biology and Physiology
Debra L Seoane, MD Instructor in Clinical Surgery (General Surgery), Surgery
Diane S Sepich, PHD Research Assistant Professor of Developmental Biology, Molecular Biology and Pharmacology
Joseph Michael Seria, MD Instructor in Clinical Medicine, Internal Medicine
James Serot, MD Instructor in Anesthesiology, Anesthesiology
Harvey Serota, MD Instructor in Clinical Medicine, Internal Medicine
James F Sertl, MD Instructor in Clinical Medicine, Internal Medicine
Martha Papay Sewall, MD Instructor in Clinical Pediatrics, Pediatrics
Anne R Seyer, MD Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Cherilynn Maria Reynolds Shadding, PHD Research Instructor in Genetics, Genome Center
Jeffery Scott Shafer, MD Adjunct Instructor in Emergency Medicine in Medicine, Internal Medicine
Atul S Shah Instructor in Clinical Medicine, Internal Medicine
Chirag Sudhir Shah, MD Assistant Professor of Radiation Oncology, Radiation Oncology
Gaurav Kirit Shah, MD Professor of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Jay Bharat Shah, MD Instructor in Medicine, Internal Medicine
Purvi Shah, MD Assistant Professor of Pediatrics, Pediatrics
Shabana Shahanavaz Instructor in Pediatrics, Pediatrics
Sonia Malhotra Shahrawat, MD Instructor in Anesthesiology, Anesthesiology
Jahangheer S. Shaik, MS, MS1, PHD Research Instructor in Molecular Microbiology (Pending Dean's Approval), Molecular Microbiology
Rachel E. Shakofsky, MD Instructor in Pediatrics, Pediatrics
Courtney Shands III, MD Instructor in Clinical Surgery (Urologic Surgery), Surgery
Karl Shanker, DDENT Instructor in Clinical Otolaryngology (DDS), Otolaryngology
Anthony Lee Shanks II, MD, MS Assistant Professor of Obstetrics and Gynecology, Obstetrics and Gynecology
Benjamin J. Shannon, PHD Instructor in Radiology, Radiology
William D Shannon, MS, PHD Assistant Professor of Biostatistics in Mathematics, Department of Mathematics
William D Shannon, MS, PHD Professor of Biostatistics, Division of Biostatistics
William D Shannon, MS, PHD Professor of Biostatistics in Medicine, Internal Medicine
Jian-Su Shao, MD Research Instructor in Medicine, Internal Medicine
Jieya Shao, PHD Research Instructor in Neurology, Neurology
Jieya Shao Siteman Cancer Center, Research Instructor of Neurology, Washington University School of Medicine, 2003-2008: Postdoctoral fellow, neurology/cellular and molecular pharmacology, University of California, San Francisco, 2002: PhD, biochemistry and molecular biology, Oklahoma State University, Oklahoma City
Larry J Shapiro, MD Dean of the School of Medicine, School of Medicine Vice Chancellor and Dean
Larry J Shapiro, MD Executive Vice Chancellor for Medical Affairs, School of Medicine Vice Chancellor and Dean
Larry J Shapiro, MD Spencer T and Ann W Olin Distinguished Professor of Pediatrics, Pediatrics
Noura Mohamed Sharabash Instructor in Medicine, Internal Medicine
Akash Sharma, MD Assistant Professor of Radiology, Radiology
Anshuman Sharma, MD Associate Professor of Anesthesiology, Anesthesiology
Aseem Sharma, MBBS Assistant Professor of Radiology, Radiology
Girdhar G Sharma, MS1 Research Instructor in Radiation Oncology, Radiation Oncology
Vijay Sharma, MS, PHD  Associate Professor of Radiology, Radiology

Girdhar G. Sharma  Siteman Cancer Center, Research Instructor of Radiation Oncology, Division of Cancer Biology, Washington University School of Medicine, 2000-2002: Postdoctoral research scientist, radiation oncology, Columbia University, New York, 2002-2006: Postdoctoral research associate, radiation and cancer biology, Washington University, St. Louis, 1992: MS, zoology, Banaras Hindu University, Varanasi, India, 2000: PhD, molecular genetics and cytogenetics, Banaras Hindu University

Vijay Sharma  Siteman Cancer Center, Associate Professor of Radiology, Washington University School of Medicine, 1988-1990: Postdoctoral fellow, organic chemistry, University of Montreal, 1982: MS, chemistry, Panjab University, Chandigarh, India, 1987: PhD, chemistry, Panjab University

Gerald Stephen Shatz, MD  Assistant Professor of Clinical Medicine, Internal Medicine

Andrey S. Shaw, MD  Emil R. Unanue Professor of Immunobiology in Pathology and Immunology, Pathology and Immunology

Andrey S. Shaw, MD  Howard Hughes Medical Institute Investigator in Pathology and Immunology, Pathology and Immunology

Eleanor Maria Shaw, MD  Assistant Professor of Clinical Pediatrics, Pediatrics

Paul Joseph Shaw, MA, PHD  Associate Professor of Neurobiology, Anatomy and Neurobiology

Nidal Shawahin, MD  Instructor in Clinical Medicine, Internal Medicine

Kathleen C Sheehan, PHD  Research Assistant Professor of Pathology and Immunology, Pathology and Immunology

Kathleen CF Sheehan  Siteman Cancer Center, Assistant Professor of Pathology and Immunology, Division of Immunobiology, Washington University School of Medicine, 1986-1989: NIH trainee, genetics, Washington University, St. Louis, 1986: PhD, microbiology, Saint Louis University

Vidal T. Sheen, MD  Instructor in Clinical Medicine, Internal Medicine

Paul W. Sheffner, MD  Assistant Professor of Clinical Psychiatry, Psychiatry

David M. Steinbein, MD  Associate Professor of Medicine (Dermatology), Internal Medicine

Amy Lynn Sheldahl, MD  Instructor in Medicine, Internal Medicine

Christian T Sheline, PHD  Adjunct Research Associate Professor of Neurology, Neurology

Yvette I Sheline, MA, MD  Professor of Neurology, Neurology

Yvette I Sheline, MA, MD  Professor of Psychiatry, Psychiatry

Mounir M Shenouda  Instructor in Clinical Medicine, Internal Medicine

Shalini Shenoy, MBBS, MD  Associate Professor of Pediatrics, Pediatrics

Surendra Shenoy, MD, PHD  Professor of Surgery (General Surgery), Surgery

Ross William Shepherd, MBBS, MD  Adjunct Professor of Pediatrics, Pediatrics

James Banks Shepherd III, MD  Associate Professor of Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

John Joseph Sheridan, MD  Instructor in Clinical Orthopaedic Surgery, Orthopaedic Surgery

Warren G Sherman, MD  Professor of Clinical Pediatrics, Pediatrics

Arsham Sheybani, MD  Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

Steven M shields, MD  Assistant Professor of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

Alan Shieles, PHD  Professor of Genetics, Genetics

Alan Shieles, PHD  Professor of Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

Adrian Shifren, MBCH  Assistant Professor of Medicine, Internal Medicine

Joshua S Shimony, MD, PHD  Assistant Professor of Radiology, Radiology

Jimann Shin  Research Instructor in Developmental Biology, Molecular Biology and Pharmacology

Marwan Shinawi, MD  Associate Professor of Pediatrics, Pediatrics

Min-Yi Katherin Shiuie, MD  Instructor in Clinical Pediatrics, Pediatrics

Kooresh Isaac Shoghi, MS, PHD  Assistant Professor of Radiology, Radiology
Monica Shokeen, MBA, PHD  Instructor in Radiology, Radiology

Monica Shokeen  Siteman Cancer Center, Instructor of Radiology, Washington University School of Medicine, 2006-2009: Postdoctoral fellow, radiochemistry, Washington University, St. Louis, 1999: MBA, international business, Kurukshetra University, Haryana, India, 2006: PhD, inorganic chemistry, Washington University, St. Louis

Jahansouz Shokri  Instructor in Clinical Medicine, Internal Medicine

Bernard L Shore, MD  Professor of Clinical Medicine, Internal Medicine

Howard Newton Short, MD  Instructor in Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

Mary Ann Shortal  Instructor in Audiology and Communication Sciences, Program in Audiology and Communication Sciences

Michael Shoykhet, MD, PHD  Instructor in Pediatrics, Pediatrics

Hui Hua Shu, MD  Instructor in Radiology, Radiology

Gordon L Shulman, MS, PHD  Research Professor of Neurology, Neurology

Robert B Shuman, MD  Associate Professor of Clinical Medicine, Internal Medicine

Sherry E Shuman, MD  Associate Professor of Clinical Medicine, Internal Medicine

Timothy L Shurtleff, MS  Instructor in Neurosurgery, Neurological Surgery

Timothy L Shurtleff, MS  Instructor in Occupational Therapy, Program in Occupational Therapy

Eli R Shuter, MD  Associate Professor of Clinical Neurology, Neurology

Laurence David Sibley, PHD  Alan A. and Edith L. Wolff Distinguished Professor, Molecular Microbiology

Laurence David Sibley, PHD  Professor of Molecular Microbiology, Molecular Microbiology

Gregorio A Sicard, MD  Professor of Radiology, Radiology

Gregorio A Sicard, MD  Professor of Surgery (General Surgery), Surgery

Labros Sidossis, MA, MA1, MS, PHD  Adjunct Research Associate Professor of Medicine, Internal Medicine

Barry Alan Siegel, MD  Professor of Medicine, Internal Medicine

Barry Alan Siegel, MD  Professor of Radiology, Radiology

Barry Alan Siegel, MD  Vice Chair for Nuclear Medicine in Radiology, Radiology

Cary Lynn Siegel, MD  Associate Professor of Radiology, Radiology

Marilyn J Siegel, MD  Professor of Radiology, Radiology

Marilyn J Siegel, MD  Professor of Radiology in Pediatrics, Pediatrics

Carla J Siegfried, MD  Professor of Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

Christine A Sigman, MD  Instructor in Clinical Medicine, Internal Medicine

Charles D Signorelli, OD  Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

Manuel De Jesus Silva-Carmona, MD  Instructor in Pediatrics, Pediatrics

Jennifer N Silva, MD  Assistant Professor of Pediatrics, Pediatrics

Matthew J Silva, ME, PHD  Assistant Professor of Biomedical Engineering, Department of Biomedical Engineering

Matthew J Silva, ME, PHD  Professor of Orthopaedic Surgery, Orthopaedic Surgery

Todd B Silverman  Instructor in Clinical Neurology, Neurology

Barbara Sue Silverstein, MSW, PHD  Assistant Professor of Clinical Psychiatry (Child Psychiatry), Psychiatry

Julie Martha Silverstein, MD  Assistant Professor of Medicine, Internal Medicine

Julie Martha Silverstein, MD  Assistant Professor of Neurological Surgery, Neurological Surgery

Randy B Silverstein, MD  Instructor in Clinical Medicine, Internal Medicine

Scott C Silvestry, MD  Associate Professor of Surgery (Cardiothoracic Surgery), Surgery

600
Jeannette M Simino, MS, MS1, PHD Research Instructor in Biostatistics, Division of Biostatistics
Connie Darlene Simmons Instructor in Clinical Pediatrics, Pediatrics
Joel Rahman Simmons, MD Assistant Professor of Radiation Oncology, Radiation Oncology
Nathan M Simon, MD, MS Professor Emeritus of Clinical Psychiatry, Psychiatry
Paul S Simons, MD Associate Professor of Pediatrics, Pediatrics
Joseph Rogers Simpson, MD, PHD Professor of Radiation Oncology, Radiation Oncology
Reed Earl Simpson, MD Assistant Professor of Clinical Psychiatry, Psychiatry
David R Sinacore, MHS, PHD Associate Director of Postdoctoral Fellowships in Physical Therapy, Program in Physical Therapy
David R Sinacore, MHS, PHD Professor of Medicine, Internal Medicine
David R Sinacore, MHS, PHD Professor of Physical Therapy, Program in Physical Therapy
Robert W Sindel, MD Instructor in Clinical Medicine, Internal Medicine
Sanford S Sineff, MD Assistant Professor of Emergency Medicine in Medicine, Internal Medicine
Barry A. Singer Assistant Professor of Clinical Neurology, Neurology
Gary Singer, MD Assistant Professor of Clinical Medicine, Internal Medicine
Gautam K Singh, MBBS, MD Professor of Pediatrics, Pediatrics
Gurcharan J Singh, MD Instructor in Clinical Medicine, Internal Medicine
Jasvinder Singh, MD Associate Professor of Medicine, Internal Medicine
Carl Jeffrey Sippel, MD, PHD Assistant Professor of Clinical Pediatrics, Pediatrics
Erik J Sirevaag, MA, PHD Research Assistant Professor of Psychiatry, Psychiatry
Erik J Sirevaag, MA, PHD Research Associate in Psychology, Department of Psychology
David Siroospour, MD Assistant Professor of Clinical Surgery (General Surgery), Surgery
Kelsey Alayne Sisti, MD Instructor in Pediatrics (Pending Dean's Approval), Pediatrics
Harold B Sitrin, MD Assistant Professor of Clinical Pediatrics, Pediatrics
Clayton D. Skaggs, DC Adjunct Instructor in Obstetrics and Gynecology, Obstetrics and Gynecology
James B Skeath, PHD Professor of Genetics, Genetics
Celette Sugg Skinner, MA, PHD Adjunct Assistant Professor of Radiology, Radiology
Donald A Skor, MD Professor of Clinical Medicine, Internal Medicine
Alan Joseph Skoulitchi, MD, MS Instructor in Clinical Pediatrics, Pediatrics
Eduardo Slatopolsky, MD Joseph Friedman Professor of Renal Diseases in Medicine, Internal Medicine
Barry Sleckman, MD, PHD Conan Professor of Pathology and Immunology, Pathology and Immunology
Bradley Thomas Smith, MD Instructor in Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Carolyn Anne Delaney Smith, MD Assistant Professor of Pediatrics, Pediatrics
Gordon Ian Smith, MS, PHD Research Instructor in Medicine, Internal Medicine
Jennifer H. Smith, MD Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Jessica Ann Smith Instructor in Anesthesiology, Anesthesiology
Joshua C Smith Instructor in Clinical Pediatrics, Pediatrics
Matthew Vernon Smith, MD Assistant Professor of Orthopaedic Surgery, Orthopaedic Surgery
Morton Edward Smith, MD Associate Dean Emeritus for Post-Graduate Education, Associate Dean Curriculum
Morton Edward Smith, MD Lecturer in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Morton Edward Smith  , MD Lecturer in Pathology and Immunology, Pathology and Immunology
Morton Edward Smith  , MD Professor Emeritus of Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Nancy Bloom Smith  , DPT, MS Assistant Professor of Orthopaedic Surgery, Orthopaedic Surgery
Nancy Bloom Smith  , DPT, MS Assistant Professor of Physical Therapy, Program in Physical Therapy
Peter Gaillard Smith  , MD, ME, PHD Assistant Professor of Clinical Otolaryngology, Otolaryngology
Raymond P Smith  , MD Instructor in Clinical Medicine, Internal Medicine
Stacey L Smith  , MD Assistant Professor of Clinical Psychiatry, Psychiatry
Timothy Robert Smith  , MD Instructor in Clinical Medicine, Internal Medicine
Timothy W. Smith  , MD, PHD Associate Professor of Medicine, Internal Medicine
Christopher D Smyser  , MD Assistant Professor of Neurology, Neurology
Matthew D Smyth , MD Associate Professor of Neurological Surgery, Neurological Surgery
Matthew D Smyth , MD Associate Professor of Pediatrics, Pediatrics
Barbara Joy Snider , MD, PHD Associate Professor of Neurology, Neurology
Jules M Snitzer  , DDENT, MS Instructor in Clinical Otolaryngology (DDS), Otolaryngology
Claud Randall Snowden  , OD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Alison K Snyder-Warwick  , MD Assistant Professor of Surgery (Plastic and Reconstructive Surgery), Surgery
Abraham Z Snyder  , MD, PHD Research Associate Professor of Neurology, Neurology
Abraham Z Snyder  , MD, PHD Research Professor of Radiology, Radiology
Lawrence H Snyder , AB, MD, MS, PHD Professor of Neurobiology, Anatomy and Neurobiology
Erica Jean Sodergren Weinstock  , PHD Research Associate Professor of Genetics, Genome Center
Allen D Soffer  , MD Instructor in Clinical Medicine, Internal Medicine
Nareshkumar J Solanki Assistant Professor of Clinical Pediatrics, Pediatrics
Mohamed Soliman  , MD Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Lilianna Solnica-Krezel , MS, PHD Head of the Department of Developmental Biology, Molecular Biology and Pharmacology
Lilianna Solnica-Krezel , MS, PHD Professor of Developmental Biology, Molecular Biology and Pharmacology
Stephanie Rose Solomon  , PHD Adjunct Assistant Professor of Medicine, Internal Medicine
Steven Lee Solomon  , MD Assistant Professor of Clinical Radiology, Radiology
Rand Washburn Sommer  , MD Associate Professor of Clinical Medicine, Internal Medicine
Mitchell S. Sommers  , PHD Chair, Danforth Human Studies Committee, Human Studies Committee
Richard Brian Sommerville  , MD Assistant Professor of Neurology, Neurology
Haowei Song , PHD Research Instructor in Medicine, Internal Medicine
Sheng-Kwei Song  , MS, PHD Associate Professor of Radiology, Radiology
Tammy Shim Sonn  , MD Assistant Professor of Obstetrics and Gynecology, Obstetrics and Gynecology
U Wong Sood , MD Instructor in Pediatrics, Pediatrics
Craig H Sorce , OD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Steven M Sorscher , MD Associate Professor of Medicine, Internal Medicine
Steven M Sorscher  Siteman Cancer Center, Associate Professor of Medicine, Division of Oncology, Section of Medical Oncology, Washington University School of Medicine, 1985-1988: Intern and resident, internal medicine, University of Michigan, Ann Arbor, 1988-1991: Fellow, hematology/oncology, University of California, San Diego, 1991-1994: National Institutes of Health Physician-Scientist Award, University of California, 1981: BS, biology, Yale University, New Haven, Conn., 1985: MD, University of Michigan, Ann Arbor, Primary Specialty: Breast and gastrointestinal cancer, hereditary cancer syndromes, Board Certified.; 1989:
American Board of Internal Medicine, Internal Medicine

1991, 2001: American Board of Internal Medicine, Medical Oncology

Florentina Soto Lucas, PHD Research Assistant Professor of Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

Hani Charles Soudah, MD, PHD Associate Professor of Clinical Medicine, Internal Medicine

Robert Ellis Southard, MD Assistant Professor of Surgery (General Surgery), Surgery

William F Southworth, MD Assistant Professor of Clinical Medicine, Internal Medicine

Michael L Spearman, MD Instructor in Clinical Medicine, Internal Medicine

Gershon J Spector, MD Professor of Otolaryngology, Otolaryngology


William Marshall Spees, PHD Research Instructor in Radiology, Radiology

John Spertus Adjunct Professor of Medicine, Internal Medicine

Tara V. Spevack, MS, PHD Instructor in Clinical Neurology, Neurology

Robert D Spewak, MD Instructor in Clinical Pediatrics, Pediatrics

Craig A Spiegel, MD Assistant Professor of Clinical Pediatrics, Pediatrics

Timothy Eric Spiegel, MD Instructor in Psychiatry (Child Psychiatry), Psychiatry

John G Spieth, PHD Research Associate Professor of Genetics, Genome Center

John Charles Spitler, MD Assistant Professor of Anesthesiology, Anesthesiology

Dirk M Spitzer, PHD Research Instructor in Surgery (General Surgery), Surgery

Theresa M Spitznagle, DPT, MHS Assistant Professor of Obstetrics and Gynecology, Obstetrics and Gynecology

Theresa M Spitznagle, DPT, MHS Assistant Professor of Physical Therapy, Program in Physical Therapy

Mark H Spurrier, MD Instructor in Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

Mythili Srinivasan, MD, MS, PHD Assistant Professor of Pediatrics, Pediatrics

Chotchai Srisuro, MD Associate Professor of Clinical Obstetrics and Gynecology, Obstetrics and Gynecology

Danielle R St Leger Instructor in Clinical Pediatrics, Pediatrics

Erik Christian Stabell, MD Instructor in Clinical Medicine, Internal Medicine

Philip Damien Stahl, PhD Professor of Cell Biology and Physiology, Cell Biology and Physiology

Christina Leigh Stallings, MA, MS, PHD Assistant Professor of Molecular Microbiology, Molecular Microbiology

David M. Stamilio, MD, MS Associate Professor of Obstetrics and Gynecology, Obstetrics and Gynecology

Sarah A Stamego, MD Instructor in Pediatrics, Pediatrics

Thaddeus S. Stappenbeck, MD, PHD Assistant Professor of Developmental Biology, Molecular Biology and Pharmacology

Thaddeus S. Stappenbeck, MD, PHD Associate Professor of Pathology and Immunology, Pathology and Immunology

Susan L Stark, MS, PHD Assistant Professor of Neurology, Neurology

Susan L Stark, MS, PHD Assistant Professor of Occupational Therapy, Program in Occupational Therapy

Norman P Steele, MD Instructor in Clinical Pediatrics, Pediatrics

Alan Joel Stein, MD Assistant Professor of Clinical Surgery (Urologic Surgery), Surgery

Karen Sue Stein, MD Instructor in Audiology and Communication Sciences, Program in Audiology and Communication Sciences

Paul M Stein, MD Professor of Clinical Medicine, Internal Medicine
Phyllis K. Stein, M.Ed., Ph.D., Research Associate Professor of Medicine, Internal Medicine

Richard Ian Stein, Ph.D., Research Assistant Professor of Medicine, Internal Medicine

Joseph H. Steinbach, Ph.D., Professor of Biomedical Engineering, Department of Biomedical Engineering

Joseph H. Steinbach, Ph.D., Professor of Neurobiology, Anatomy and Neurobiology

Joseph H. Steinbach, Ph.D., Russell and Mary Shelden Professor of Anesthesiology, Anesthesiology

Thomas H. Steinberg, M.D., Associate Professor of Cell Biology and Physiology, Cell Biology and Physiology

Thomas H. Steinberg, M.D., Associate Professor of Medicine, Internal Medicine

William F. Stenson, M.D., Dr. Nicholas V. Costrini Professor of Medicine, Internal Medicine

William F. Stenson, Siteman Cancer Center, Dr. Nicholas V. Costrini Professor of Gastroenterology and Inflammatory Bowel Disease, Washington University School of Medicine, 1971-1976: Intern and resident, medicine, Washington University, St. Louis, 1976-1978: Fellow, gastroenterology, Washington University, 1978-1979: Research fellow, immunology, Washington University, 1971: MD, Washington University, St. Louis, Primary Specialty: Gastrointestinal cancer, inflammatory bowel disease, gastroenterology, Board Certified.; 1976: American Board of Internal Medicine, Internal Medicine

1979: American Board of Internal Medicine, Gastroenterology

Andrea L. Stephens, M.D., M.S., Assistant Professor of Obstetrics and Gynecology, Obstetrics and Gynecology

Barbara B. Sterkel, Adjunct Associate Professor of Medicine, Internal Medicine

Randall S. Sterkel, M.D., Assistant Professor of Clinical Pediatrics, Pediatrics

Lynne M. Sterni, M.D., Assistant Professor of Anesthesiology (Pending Executive Faculty Approval), Anesthesiology

Sheila Stewart-Wigglesworth, Ph.D., Associate Professor of Cell Biology and Physiology, Cell Biology and Physiology

Sheila Stewart-Wigglesworth, Ph.D., Associate Professor of Medicine, Internal Medicine

Todd J. Stewart, M.D., Associate Professor of Neurological Surgery, Neurological Surgery

Todd J. Stewart, M.D., Assistant Professor of Orthopaedic Surgery, Orthopaedic Surgery

Anita R. Stiffelman, M.D., Associate Professor of Clinical Pediatrics, Pediatrics

Wayne A. Stillings, M.D., Assistant Professor of Clinical Psychiatry, Psychiatry

Jennifer S. Stith, M.S., M.S.W., Ph.D., Associate Director of Professional Curriculum, Program in Physical Therapy

Jennifer S. Stith, M.S., M.S.W., Ph.D., Associate Professor of Neurology, Neurology

Jennifer S. Stith, M.S., M.S.W., Ph.D., Associate Professor of Physical Therapy, Program in Physical Therapy

Jennifer S. Stith, M.S., M.S.W., Ph.D., Division Director for Education in Physical Therapy, Program in Physical Therapy

Keith Evan Stockerl-Goldstein, M.D., Associate Professor of Medicine, Internal Medicine

Keith Stockerl-Goldstein, Siteman Cancer Center, Associate Professor of Medicine, Division of Oncology, Section of Bone Marrow Transplantation, Washington University School of Medicine, 1991-1993: Intern and resident, internal medicine, Stanford University, Stanford, Calif., 1993-1996: Fellow, medical oncology, Stanford University, 1996: Fellow, bone marrow transplantation, Stanford University, 1991: MD, University of California, Los Angeles, Primary Specialty: Multiple myeloma, leukemia, Hodgkin's disease, non-Hodgkin's lymphoma, myelodysplastic syndrome and stem-cell transplantation, Board Certified.; 1996: American Board of Internal Medicine, Internal Medicine

1997: American Board of Internal Medicine, Medical Oncology

James Andrew Stokes, M.D., Instructor in Clinical Medicine, Internal Medicine

John A. Stopple, M.D., Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology

Gregory A. Storch, M.D., Professor of Medicine, Internal Medicine

Gregory A. Storch, M.D., Professor of Molecular Microbiology, Molecular Microbiology

Gregory A. Storch, M.D., Ruth L. Siteman Professor of Pediatrics, Pediatrics

Gary D. Stormo, M.A., Ph.D., Joseph Erlanger Professor, Genetics

Gary D. Stormo, M.A., Ph.D., Professor of Biomedical Engineering, Department of Biomedical Engineering

Gary D. Stormo, M.A., Ph.D., Professor of Computer Science, Department of Computer Science and Engineering
Gary D Stormo, MA, PHD Professor of Genetics, Genetics
Gina M Story, PHD Assistant Professor of Anesthesiology, Anesthesiology
Gina M Story, PHD Assistant Professor of Neurobiology, Anatomy and Neurobiology
Eric A Strand, MD Associate Professor of Obstetrics and Gynecology (Pending Executive Faculty Approval), Obstetrics and Gynecology
Steven M Strasberg, MD Associate Professor of Cell Biology and Physiology, Cell Biology and Physiology
Steven M Strasberg, MD Pruett Professor of Surgery (General Surgery), Surgery
Steven M Strasberg Siteman Cancer Center, Pruett Professor of Surgery, Section of Hepatobiliary-Pancreatic and Gastrointestinal Surgery, Washington University School of Medicine, 1963-1964: Rotating intern, Toronto General Hospital, 1965-1969: Resident, surgery, University of Toronto, 1969-1971: Research fellow, surgery, Boston University, 1963: MD, University of Toronto, Primary Specialty: Hepatobiliary, pancreatic and upper gastrointestinal surgery, Board Certified: 1968: Fellow, Royal College of Surgeons of Canada
Robert H Strashun, MA, MD Associate Professor of Clinical Pediatrics, Pediatrics
William L Straube, MEE Research Associate Professor of Radiation Oncology, Radiation Oncology
Susan Kay Strecker, DPT, MA Assistant Professor of Pediatrics, Pediatrics
Susan Kay Strecker, DPT, MA Assistant Professor of Physical Therapy, Program in Physical Therapy
M. Anne Street, MA, MD Assistant Professor of Clinical Pediatrics, Pediatrics
James W Strickland, MD Visiting Professor of Orthopaedic Surgery, Orthopaedic Surgery
James F Strieter, MBA, OD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Catherine Striley, MEE Asuncient Assistant Professor of Psychiatry, Psychiatry
Cristina Strong, PHD Assistant Professor of Medicine (Dermatology), Internal Medicine
Seth A Strope, MD Associate Professor of Surgery (Urologic Surgery), Surgery
Robert C Strunk, MD, MS Professor of Pediatrics, Pediatrics
Jonathan Rhys Strutt, MD Instructor in Pediatrics (Pending Dean's Approval), Pediatrics
Judith M. Stucki-Simeon, MD Instructor in Clinical Pediatrics, Pediatrics
Xiong Su, PHD Assistant Professor of Cell Biology and Physiology, Cell Biology and Physiology
Yi Su, PHD Assistant Professor of Medicine, Internal Medicine
Rosa M Suarez-Solar, MD Instructor in Clinical Pediatrics, Pediatrics
Brian K Suarez, MA, PHD Professor of Genetics, Genetics
Brian K Suarez, MA, PHD Professor of Psychiatry, Psychiatry
Hamsa Subramanian, MD Instructor in Clinical Medicine, Internal Medicine
Abbe L Sudvarg, MD Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Lisa Suffian, MD Instructor in Clinical Pediatrics, Pediatrics
Toshifumi Sugatani, DDENT, PHD Research Instructor in Pediatrics, Pediatrics
David J Suk, MD Instructor in Medicine, Internal Medicine
Shelby A Sullivan, MD Assistant Professor of Medicine, Internal Medicine
Kaharu Sumino, MA, MD, PHD Assistant Professor of Medicine, Internal Medicine
William Craig Summers, MD Instructor in Clinical Medicine, Internal Medicine
Brian Patrick Sumner, OD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Walton Sumner II, MD Associate Professor of Medicine, Internal Medicine
Yun Ju Sung, PHD Research Assistant Professor of Biostatistics, Division of Biostatistics
Yun Ju Sung, PHD Research Assistant Professor of Psychiatry, Psychiatry
Herbert Sunshine, MD Instructor in Clinical Surgery (Urologic Surgery), Surgery
Rama Suresh, MBBS Assistant Professor of Medicine, Internal Medicine
Rama Suresh Siteman Cancer Center, Assistant Professor of Medicine, Division of Oncology, Section of Medical Oncology, Washington University School of Medicine, 1995-1998: Resident, State University of New York Upstate Medical University, Syracuse, 2002-2004: Fellow, hematology and oncology, Washington University, St. Louis, 1993: MD, Madras Medical College, Madras, India, Primary Specialty: Clinical oncology, breast cancer, gastrointestinal cancer, Board Certified.; 1998: American Board of Internal Medicine, Internal Medicine
2004: American Board of Internal Medicine, Medical Oncology
Jagdish C Suri, MD Assistant Professor of Clinical Psychiatry (Child Psychiatry), Psychiatry
Vinod Suri Instructor in Clinical Psychiatry (Child Psychiatry) (Full-Time at Hawthorn Children's Psychiatric Hospital), Psychiatry
Siobhan Sutcliffe, MHS, MS, PHD Assistant Professor of Surgery (General Surgery), Surgery
Siobhan Sutcliffe Siteman Cancer Center, Assistant Professor of Surgery, Division of Public Health Sciences, Washington University School of Medicine, 2005-2007: Postdoctoral fellow, epidemiology, Johns Hopkins University, Baltimore, 2001: ScM, epidemiology, Johns Hopkins University, Baltimore, 2004: MHS, biostatistics, Johns Hopkins University, 2005: PhD, epidemiology, Johns Hopkins University
Rudee Suwannasri, MD Instructor in Clinical Medicine, Internal Medicine
Bridge B Svancarek, MD Instructor in Emergency Medicine, Medicine, Internal Medicine
Dragan M Svrakin, MD, PHD Professor of Psychiatry, Psychiatry
Sanjay Joshua Swamidass, MA, MD, PHD Assistant Professor in Computer Science and Engineering, Department of Computer Science and Engineering
Sanjay Joshua Swamidass, MA, MD, PHD Assistant Professor of Pathology and Immunology, Pathology and Immunology
Kenneth V Swanson Instructor in Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Robert A Swarm, MD Professor of Anesthesiology, Anesthesiology
1993: American Board of Anesthesiology, Pain Management
Wojciech A. Swat, MS, PHD Associate Professor of Pathology and Immunology, Pathology and Immunology
Frederick Sweet, PHD Professor of Reproductive Biology in Obstetrics and Gynecology, Obstetrics and Gynecology
Stuart C Sweet, MD, PHD Professor of Pediatrics, Pediatrics
Amanda Sweetland Instructor in Clinical Pediatrics, Pediatrics
Melissa Swiecki, PHD Research Instructor of Pathology and Immunology, Pathology and Immunology
Elzbieta Anna Swietlicki, MS, PHD Research Instructor in Medicine, Internal Medicine
Susan C. Sylvia Instructor in Clinical Pediatrics, Pediatrics
Susan C Sylvia Siteman Cancer Center, Clinical Psychologist and Program Director, Medical Crisis Coping Center, St. Louis Children's Hospital, Primary Specialty: Pediatric psychology
Samer D Tabbal, MD Associate Professor of Neurology, Neurology
Steven D Taff, DED, MS Instructor in Medicine, Internal Medicine
Steven D Taff, DED, MS Instructor in Occupational Therapy, Program in Occupational Therapy
Paul H Taghart, PHD Professor of Neurobiology, Anatomy and Neurobiology
Mohammad Tahir, MD Instructor in Clinical Medicine, Internal Medicine
Yuan-Chuan Tai, MEE, PHD Associate Professor of Radiology, Radiology
Yuan-Chuan Tai Siteman Cancer Center, Associate Professor of Radiology, Division of Radiological Sciences, Mallinckrodt Institute of Radiology, Washington University School of Medicine, 2000-2001: Postdoctoral fellow, molecular imaging, University of California, Los Angeles, 1992: MS, electrical engineering, University of Texas, Arlington, 1998: PhD, biomedical physics, University of California, Los Angeles.

Chandrakant Tailor MD Assistant Professor of Clinical Radiology, Radiology

Akiko Takeda PHD Research Assistant Professor of Pathology and Immunology, Pathology and Immunology

Benjamin R Tan MD Associate Professor of Medicine, Internal Medicine

David Tan MD Assistant Professor of Emergency Medicine in Medicine, Internal Medicine

Mini Tandon MD Assistant Professor Psychiatry (Child Psychiatry), Psychiatry

Chi-Tsai Tang MD Instructor in Orthopaedic Surgery, Orthopaedic Surgery

Simon Tang MS, PHD Assistant Professor of Orthopaedic Surgery, Orthopaedic Surgery

Aline T. Tanios MD Assistant Professor of Pediatrics (Pending Executive Faculty Approval), Pediatrics

Kongsak Tanphaichitr MD Professor of Clinical Medicine, Internal Medicine

Richard S Tao MD, MIM Instructor in Emergency Medicine in Medicine, Internal Medicine

Nicholas P Taraska MD Instructor in Clinical Medicine, Internal Medicine

Lawrence R Tarbox AA, PHD Research Assistant Professor of Radiology, Radiology

Phillip Irwin Tarr MD Melvin E Carnahan Professor of Pediatrics, Pediatrics

Phillip Irwin Tarr MD Professor of Molecular Microbiology, Molecular Microbiology

Sandra L Tate MD Instructor in Clinical Neurology, Neurology


Marie E Taylor Siteman Cancer Center, Assistant Professor of Radiation Oncology, Washington University School of Medicine, 1982-1986: Resident, radiation oncology, University of Washington, Seattle, 1982: MD, University of Washington, Seattle, Primary Specialty: Breast cancer, hyperthermia, Board Certified:, 1987: American Board of Radiology, Radiation Oncology

Sharlene A Teefey BN, MD Professor of Radiology, Radiology

Sharlene A Teefey Siteman Cancer Center, Professor of Radiology, Division of Diagnostic Radiology, Section of Abdominal Imaging, Mallinckrodt Institute of Radiology, Washington University School of Medicine, 1980-1984: Resident, radiology, Mayo Graduate School of Medicine, Rochester, Minn., 1984-1985: Fellow, abdominal imaging, Mayo Graduate School of Medicine, 1980: MD, University of Hawaii, Honolulu, Primary Specialty: Abdominal imaging, ultrasound, Board Certified:, American Board of Radiology

Steven L Teitelbaum MD Messing Professor of Pathology and Immunology, Pathology and Immunology

Steven L Teitelbaum MD Professor of Medicine, Internal Medicine

Steven L Teitelbaum Siteman Cancer Center, Wilma and Roswell Messing Professor of Pathology, Division of Anatomic Pathology, Washington University School of Medicine, 1964: MD, Washington University, St. Louis, Primary Specialty: Bone pathology, Board Certified:, 1970: American Board of Pathology, Anatomic Pathology and Clinical Pathology

Rene Tempelhoff MD Professor of Anesthesiology, Anesthesiology

Rene Tempelhoff MD Professor of Neurological Surgery, Neurological Surgery

Marissa Morningstar Tenenbaum MD Assistant Professor of Surgery (Plastic and Reconstructive Surgery), Surgery

Melissa Dawn Tepe MD, MS Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology

Arnold S Tepper MD Instructor in Clinical Medicine, Internal Medicine

Raghu P Terkonda MD Assistant Professor of Anesthesiology, Anesthesiology

Wanda T Terrell MD Associate Professor of Clinical Medicine, Internal Medicine

Kristen A Terrill Instructor in Clinical Pediatrics, Pediatrics

Paul M Tesser MD, PHD Assistant Professor of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Bradley Terrill Thach, MD Professor of Pediatrics, Pediatrics
Larissa Bryka Thackray, PHD Research Assistant Professor of Pathology and Immunology, Pathology and Immunology
Donna T Thackrey, MD Instructor in Clinical Pediatrics, Pediatrics
Premal H Thaker, MD, MS Assistant Professor of Obstetrics and Gynecology, Obstetrics and Gynecology
Shilpa Thakur Instructor in Clinical Medicine, Internal Medicine
Isolde E Thalmann, MA, PHD Research Professor Emeritus of Otolaryngology, Otolaryngology
Ruediger Thalmann, MD Lecturer in Otolaryngology, Otolaryngology
Ruediger Thalmann, MD Professor Emeritus of Otolaryngology, Otolaryngology
George K. Thampy, MD Instructor in Clinical Medicine, Internal Medicine
Stanley E Thawley, MD Associate Professor of Otolaryngology, Otolaryngology
Daniel Leonidas Theodorou, MD Assistant Professor of Emergency Medicine in Medicine, Internal Medicine
J. Allen Thiel, MD Associate Professor of Clinical Medicine, Internal Medicine
Stephen Thierauf Instructor in Clinical Pediatrics, Pediatrics
Kwee L Thio, MD, PHD Associate Professor of Neurobiology, Anatomy and Neurobiology
Kwee L Thio, MD, PHD Associate Professor of Neurology, Neurology
Kwee L Thio, MD, PHD Associate Professor of Pediatrics, Pediatrics
Mark S Thoelke, MD, PHD Associate Professor of Medicine, Internal Medicine
Matthew A Thomas, MD Professor of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Scott M. Thomas Instructor in Pediatrics (Pending Dean's Approval), Pediatrics
Jean Alfred Thomas Sr., MD Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Stavros Thomopoulos, MS, MS1, PHD Associate Professor of Biomedical Engineering, Department of Biomedical Engineering
Stavros Thomopoulos, MS, MS1, PHD Associate Professor of Orthopaedic Surgery, Orthopaedic Surgery
Jeffrey Bryant Thompson, MD Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
M. Bryant Thompson, MD Associate Professor of Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Robert W Thompson, MD Professor of Cell Biology and Physiology, Cell Biology and Physiology
Robert W Thompson, MD Professor of Radiology, Radiology
Robert W Thompson, MD Professor of Surgery (General Surgery), Surgery
Erica Sharp Thomson, MD Instructor in Medicine, Internal Medicine
Joseph M Thornhill, MD Assistant Professor of Anesthesiology, Anesthesiology
Wade L Thorstad, MD Associate Professor of Radiation Oncology, Radiation Oncology
Dinesh Thotala, MS, PHD Research Instructor in Radiation Oncology, Radiation Oncology
Erik P Thyssen, MD Assistant Professor of Clinical Medicine, Internal Medicine
LinLin Tian, PHD Research Instructor in Neurology, Neurology
Sharon F Tiefenbrunn, MD Instructor in Clinical Medicine (Dermatology), Internal Medicine
Lawrence S Tierney, MD Associate Professor of Clinical Medicine, Internal Medicine
Jeffrey P Tillinghast, MD Associate Professor of Clinical Medicine, Internal Medicine
Mary A Tillman, MD Professor of Clinical Pediatrics, Pediatrics
Jeffrey B. Titus, MA, PHD Assistant Professor of Clinical Neurology, Neurology
Albro C Tobey, MD Assistant Professor of Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Garry S Tobin, MD Associate Professor of Medicine, Internal Medicine
Jerry Tobler, MD, PHD Instructor in Clinical Radiology, Radiology
Randall W Tobler, MD Assistant Professor of Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Alexandre Todorov, MD, PHD Research Professor of Psychiatry, Psychiatry
Robert W Tolan Jr., MA, MD Instructor in Clinical Pediatrics, Pediatrics
Niraj Harish Tolia, PhD Assistant Professor of Biochemistry and Molecular Biophysics, Biochemistry and Molecular Biophysics
Niraj Harish Tolia, PhD Assistant Professor of Molecular Microbiology, Molecular Microbiology
Douglas M Tollefsen, MD, PHD Assistant Professor of Biochemistry and Molecular Biophysics, Biochemistry and Molecular Biophysics
Douglas M Tollefsen, MD, PHD Professor of Medicine, Internal Medicine
Douglas M Tollefsen, MD, PHD Professor of Pathology and Immunology, Pathology and Immunology
Michael H. Tomasson, MD Associate Professor of Genetics, Genetics
Michael H. Tomasson, MD Associate Professor of Medicine, Internal Medicine
Adetunji Toriola Assistant Professor of Surgery (General Surgery), Surgery
Ralph J Torrence, MD Instructor in Clinical Surgery (Urologic Surgery), Surgery
Waseem Touma, MD Instructor in Clinical Medicine, Internal Medicine
Dwight A Towler, MD, PHD Ira M Lang Professor of Medicine, Internal Medicine
Dwight A Towler, MD, PHD Professor of Developmental Biology, Molecular Biology and Pharmacology
Robert R Townsend, MD, MS, PHD Professor of Cell Biology and Physiology, Cell Biology and Physiology
Robert R Townsend, MD, MS, PHD Professor of Medicine, Internal Medicine
Elizabeth A Tracy, MD Instructor in Clinical Medicine, Internal Medicine
Scott A. Trail, MD Instructor in Clinical Pediatrics, Pediatrics
David D Tran, MD, PHD Assistant Professor of Medicine, Internal Medicine
Erica J Traxel, MD Assistant Professor of Surgery (Urologic Surgery), Surgery
Yvonne Perle Treece, AA, MD Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Norman Edwin Trevathan III, MD, MS Adjunct Professor of Neurology, Neurology
Jeanne M Trimmer, MD Instructor in Clinical Pediatrics, Pediatrics
Sandeep Kumar Tripathy, MD, PHD Assistant Professor of Medicine, Internal Medicine
Sandeep K. Tripathy Siteman Cancer Center, Assistant Professor of Medicine, Division of Gastroenterology, Washington University School of Medicine, 1998-2001: Intern and resident, internal medicine, Washington University, St. Louis, 2001-2004: Fellow, gastroenterology, Washington University, 1995: PhD, pathology, University of Chicago, 1998: MD, University of Chicago, Primary Specialty: Gastroenterology, Board Certified.; 2001: American Board of Internal Medicine, Internal Medicine
2006: American Board of Internal Medicine, Gastroenterology
Heather L. True, MS, PHD Associate Professor of Cell Biology and Physiology, Cell Biology and Physiology
William R. True, M PH, MA, PHD Adjunct Professor of Psychiatry, Psychiatry
Elbert P Trulock III, MD Rosemary and I Jerome Flance Professor of Pulmonary Medicine in Medicine, Internal Medicine
Katherine S Tsai, MD Instructor in Clinical Medicine, Internal Medicine
Linda Mei-Lin Tsai, MD Associate Professor of Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Garland R Tschudin, MD Instructor in Clinical Pediatrics, Pediatrics
George S Tseng, MD Assistant Professor of Anesthesiology, Anesthesiology
Zhude Tu, MS, MS1, PHD Assistant Professor of Radiology, Radiology
David J Tucker, MD
Assistant Professor of Clinical Medicine, Internal Medicine

Dolores R Tucker, MD
Assistant Professor of Clinical Medicine (Dermatology), Internal Medicine

Robert L. Tuggey, PHD
Research Instructor in Pathology and Immunology, Pathology and Immunology

Stacey S Tull, M PH, MD
Assistant Professor of Clinical Medicine (Dermatology), Internal Medicine

Thomas H Tung, MD
Associate Professor of Surgery (Plastic and Reconstructive Surgery), Surgery

John W Turk, MD, PHD
Professor of Medicine, Internal Medicine

John W Turk, MD, PHD
Professor of Pathology and Immunology, Pathology and Immunology

Michael P Turmelle, MD
Assistant Professor of Pediatrics, Pediatrics

Yumirle Padron Turmelle, AA, MD
Assistant Professor of Pediatrics, Pediatrics

Jacqueline Sue Turner, MD
Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology

Peter G Tuteur, MD
Associate Professor of Medicine, Internal Medicine

Peter G Tuteur
Siteman Cancer Center, Associate Professor of Medicine, Division of Pulmonary and Critical Care Medicine, Washington University School of Medicine, 1966-1969: Resident, internal medicine, Michael Reese Hospital and Medical Center, Chicago, 1969-1971: Research fellow, cardiopulmonary physiology, University of Pennsylvania, Philadelphia, 1966: MD, University of Illinois, Urbana-Champaign, Primary Specialty: Lung cancer, Board Certified., 1972: American Board of Internal Medicine, Internal Medicine

1972: American Board of Internal Medicine, Pulmonary Disease

Methodius Gamuo Tuuli, M PH, MBBS
Assistant Professor of Obstetrics and Gynecology, Obstetrics and Gynecology

Robert Lawrence Tychsen, MD
Professor of Neurobiology, Anatomy and Neurobiology

Robert Lawrence Tychsen, MD
Professor of Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

Robert Lawrence Tychsen, MD
Professor of Ophthalmology and Visual Sciences in Pediatrics, Pediatrics

Stacy Lynne Tylka, DPT, MS
Assistant Professor of Orthopaedic Surgery, Orthopaedic Surgery

Stacy Lynne Tylka, DPT, MS
Instructor in Physical Therapy, Program in Physical Therapy

April L Tyus
Instructor in Clinical Pediatrics, Pediatrics

Rosalie May Uchanski, MS, PHD
Assistant Professor of Audiology and Communication Sciences, Program in Audiology and Communication Sciences

Rosalie May Uchanski, MS, PHD
Research Assistant Professor of Otolaryngology, Otolaryngology

Robert C. Uchiyama, MD
Instructor in Clinical Medicine, Internal Medicine

Hideyo Ugai, MS, PHD
Research Instructor in Radiation Oncology, Radiation Oncology

John H Uhlemann, MD
Assistant Professor of Clinical Medicine (Dermatology), Internal Medicine

Emil Raphael Unanue, MD
Paul and Ellen Lacy Professor of Pathology and Immunology, Pathology and Immunology

Emil R Unanue
Siteman Cancer Center, Professor of Pathology and Immunology, Washington University School of Medicine, 1962-1965: Research fellow, experimental pathology, Scripps Clinic and Research Foundation, La Jolla, Calif., 1966-1968: Research fellow, immunology, National Institute for Medical Research, London, 1960: MD, University of Havana, Havana, Cuba

Ravindra Uppaluri, MD, PHD
Associate Professor of Otolaryngology, Otolaryngology

Ravindra Uppaluri
Siteman Cancer Center, Associate Professor of Otolaryngology, Division of Head and Neck Surgical Oncology, Washington University School of Medicine, 1995-1996: Intern, Washington University, St. Louis, 1996-2000: Resident, Washington University, 1990: MD, University of Minnesota, Minneapolis, 1993: PhD, molecular genetics, University of Minnesota, Primary Specialty: Head and neck cancer; chronic sinus disease; parotid and thyroid malignancies; melanoma, Board Certified.; 2001: American Board of Otolaryngology

Fumihiko Urano
Associate Professor of Medicine (Pending Executive Faculty Approval), Internal Medicine

Elizabeth C Uterson, MD
Assistant Professor of Pediatrics, Pediatrics

Geoffrey L Uy, MA, MD
Assistant Professor of Medicine, Internal Medicine

Akshaya J Vachharajani, MBBS, MD
Assistant Professor of Pediatrics, Pediatrics
Lora Maureen Valente, PHD Associate Professor of Audiology and Communication Sciences, Program in Audiology and Communication Sciences

Lora Maureen Valente, PHD Associate Professor of Otolaryngology, Otolaryngology

Lora Maureen Valente, PHD Director of Audiology Studies in Audiology and Communication Sciences, Program in Audiology and Communication Sciences

Michael Valente, MS, PHD Professor of Audiology and Communication Sciences, Program in Audiology and Communication Sciences

Michael Valente, MS, PHD Professor of Otolaryngology (Audiology), Otolaryngology

Albert Lee Van Amburg III, MD Assistant Professor of Clinical Medicine, Internal Medicine

Dorothy J. Van Buren, PSYD Assistant Professor of Psychiatry, Psychiatry

Linda R Van Dillen, MS, PHD Associate Professor of Orthopaedic Surgery, Orthopaedic Surgery

Linda R Van Dillen, MS, PHD Associate Professor of Physical Therapy, Program in Physical Therapy

Michele Van Eerdewegh, MD Instructor in Clinical Psychiatry, Psychiatry

David C Van Essen, PHD Edison Professor of Neurobiology, Anatomy and Neurobiology

David C Van Essen, PHD Head of the Department of Anatomy and Neurobiology, Anatomy and Neurobiology

David C Van Essen, PHD Professor of Biomedical Engineering, Department of Biomedical Engineering

George Frederick Van Hare III, MD Louis Larrick Ward Professor of Pediatrics, Pediatrics

Gregory Paul Van Stavern, MD Associate Professor of Neurology, Neurology

Gregory Paul Van Stavern, MD Associate Professor of Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

Renee Bailey Van Stavern, MD Associate Professor of Neurology, Neurology

Brian Andrew Van Tine, MD, PHD Assistant Professor of Medicine, Internal Medicine

Jeffrey A. Vander Kooi, MD, PHD Assistant Professor of Anesthesiology, Anesthesiology

Andrea Vannucci, MD Assistant Professor of Anesthesiology, Anesthesiology

Swarup Varaday, MBBS Assistant Professor of Anesthesiology, Anesthesiology

Arun S. Varadhachary, MD, PHD Assistant Professor of Neurology, Neurology

Javier Esteban Varela, M PH, MD Associate Professor of Surgery (General Surgery), Surgery

Suresh Vedantham, MD Professor of Radiology, Radiology

Suresh Vedantham, MD Professor of Surgery (General Surgery), Surgery

Emmanuel A Venkatesan Assistant Professor of Clinical Medicine, Internal Medicine

Thomas J Veraldi, DDENT, MS Instructor in Clinical Otolaryngology, Otolaryngology

Laird Henry Vermont Instructor in Clinical Pediatrics, Pediatrics

Garry M. Vickar Instructor in Clinical Psychiatry, Psychiatry

Zevidah Vickery, MD Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology

Tom O Videen, PHD Adjunct Instructor in Neurology, Neurology

Wayne A Viers, MD Associate Professor of Clinical Otolaryngology, Otolaryngology

Monika Vig, MS, PHD Assistant Professor of Pathology and Immunology, Pathology and Immunology

Kiran Raj Vij, MD Assistant Professor of Medicine, Internal Medicine

Kiran Raj Vij, MD Assistant Professor of Pathology and Immunology, Pathology and Immunology

Ravi Vij, MBBS Associate Professor of Medicine, Internal Medicine

Anitha Vijayan, MD Professor of Medicine, Internal Medicine
Dennis T Villereal, MD Adjunct Associate Professor of Medicine, Internal Medicine
Herbert W Virgin IV, MD, PHD Head of the Department of Pathology and Immunology, Pathology and Immunology
Herbert W Virgin IV, MD, PHD Mallinckrodt Professor of Pathology and Immunology, Pathology and Immunology
Herbert W Virgin IV, MD, PHD Professor of Medicine, Internal Medicine
Herbert W Virgin IV, MD, PHD Professor of Molecular Microbiology, Molecular Microbiology
Harry John Visser, MD Instructor in Clinical Orthopaedic Surgery, Orthopaedic Surgery
Andrei G Vlassenko, MD, PHD Research Assistant Professor of Radiology, Radiology
Katie Dieu Thu Vo, MD Associate Professor of Radiology, Radiology
Erin Foster Voegtli, OTD Assistant Professor of Neurology, Neurology
Erin Foster Voegtli, OTD Assistant Professor of Occupational Therapy, Program in Occupational Therapy
Erin Foster Voegtli, OTD Assistant Professor of Psychiatry, Psychiatry
Mary Kristin Voellinger, MD Instructor in Clinical Neurology, Pediatrics
Adam Mark Vogel, BE, MD Assistant Professor of Surgery (Pediatric Surgery) (Pending Executive Faculty Approval), Surgery
Gary Lee Vogel, OD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Joseph Paul Vogel, PHD Associate Professor of Molecular Microbiology, Molecular Microbiology
David Edward Vollman, MD Instructor in Ophthalmology and Visual Science, Ophthalmology and Visual Sciences
Gershon Ram Volotzky, MD Assistant Professor of Anesthesiology, Anesthesiology
Oksana Volshteyn, MD Assistant Professor of Medicine, Internal Medicine
Oksana Volshteyn, MD Associate Professor of Neurology, Neurology
Benjamin Allen Voss, MD Instructor in Clinical Medicine, Internal Medicine
Stanley G Vriezelaar, MD Instructor in Clinical Medicine, Internal Medicine
James J Wachter, OD Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Harry Lee Wadsworth, MD Instructor in Clinical Medicine, Internal Medicine
Nina Delaney Wagner-Johnston, MD Assistant Professor of Medicine, Internal Medicine
Nina D Wagner-Johnston, Assistant Professor of Medicine, Division of Oncology, Section of Medical Oncology, Washington University School of Medicine, 2003-2004: Intern and resident, University of Chicago, 2005-2008: Fellow, Johns Hopkins University, Baltimore, 2003: MD, University of Chicago, Primary Specialty: Lymphoma, AIDS-related malignancies and cancer pain management, Board Certified, 2006: American Board of Internal Medicine, Internal Medicine
2008: American Board of Internal Medicine, Medical Oncology
Daniel G Wagner, MD Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Jason Cass Wagner, MD Assistant Professor of Emergency Medicine in Medicine, Internal Medicine
Jean V Wagner, Instructor in Clinical Pediatrics, Pediatrics
Gabriel Waksman, MS, PHD Adjunct Professor of Biochemistry and Molecular Biophysics, Biochemistry and Molecular Biophysics
Stanley M Wald, MD Associate Professor of Clinical Medicine, Internal Medicine
Lawrence Sidney Waldbaum, MD Associate Professor of Anesthesiology, Anesthesiology
Mary C. Waldron, PHD Adjunct Assistant Professor of Psychiatry, Psychiatry
William B. Waldrop, MD Assistant Professor of Anesthesiology, Anesthesiology
William B. Waldrop, MD Assistant Professor of Pediatrics, Pediatrics
Howard S Walker, MD Instructor in Clinical Surgery (Cardiothoracic Surgery), Surgery
Sara Walker, MD Instructor in Clinical Psychiatry, Psychiatry
Leonard Lewis Wall, MD, MS, PHD  Professor of Anthropology, Department of Anthropology
Leonard Lewis Wall, MD, MS, PHD  Professor of Obstetrics and Gynecology, Obstetrics and Gynecology
Lindley Bevelle Wall, MD Assistant Professor of Orthopaedic Surgery, Orthopaedic Surgery
Michael Harold Wall, MD Professor of Anesthesiology, Anesthesiology
Michael Harold Wall, MD  Professor of Surgery (Cardiothoracic Surgery), Surgery
Colleen M Wallace, MD  Instructor in Pediatrics, Pediatrics
David Wallace, MD  Instructor in Clinical Medicine, Internal Medicine
Jerold W Wallis, MD, MS  Associate Professor of Biomedical Engineering, Department of Biomedical Engineering
Jerold W Wallis, MD, MS  Associate Professor of Radiology, Radiology
John William Wallis, MS, PHD  Research Instructor in Genetics, Genome Center
David A Walls, MD  Instructor in Clinical Medicine, Internal Medicine
Sarah N. Walsh  Instructor in Clinical Medicine (Dermatology), Internal Medicine
Matthew John Walter, MD Assistant Professor of Genetics, Genetics
Matthew John Walter, MD  Assistant Professor of Medicine, Internal Medicine
William Lee Walter, MD  Assistant Professor of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Donald E Walter Jr, OD  Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Richard Coburn Walters, MD  Instructor in Clinical Medicine (Dermatology), Internal Medicine
Stephen R Walzman, MBA, MD  Professor of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Bruce J Walz, MD  Associate Professor of Clinical Radiation Oncology, Radiation Oncology
Jennifer Anne Wambach, MD  Assistant Professor of Pediatrics, Pediatrics
Andrea Wang-Gillam, MD  Assistant Professor of Medicine, Internal Medicine
David Wang, PHD  Associate Professor of Molecular Microbiology, Molecular Microbiology
David Wang, PHD  Associate Professor of Pathology and Immunology, Pathology and Immunology
Jean S Wang, MD, PHD  Assistant Professor of Medicine, Internal Medicine
Jean S Wang, MD, PHD  Assistant Professor of Surgery (General Surgery), Surgery
Jeff Filbert Wang, MD  Assistant Professor of Pathology and Immunology, Pathology and Immunology
Jen-Chyong Wang, MS, PHD  Research Assistant Professor of Psychiatry, Psychiatry
Lawrence L. Wang, MD, PHD  Instructor in Clinical Medicine (Dermatology), Internal Medicine
Ting Wang, MS, PHD  Assistant Professor of Computer Science and Engineering, Department of Computer Science and Engineering
Ting Wang, MS, PHD  Assistant Professor of Genetics, Genetics
Xiaoli Wang, MD, MS, PHD  Research Assistant Professor of Pathology and Immunology, Pathology and Immunology
Xiaowei Wang, PHD  Assistant Professor of Radiation Oncology, Radiation Oncology
Yian Wang, MD, PHD  Professor of Surgery (General Surgery), Surgery
Lihong V. Wang  Siteman Cancer Center, Gene K. Beare Distinguished Professor in Biomedical Engineering, Washington University School of Medicine, 1987: MS, optics, Huazhong University of Science and Technology, Wuhan, China, 1991: PhD, electrical engineering, Rice University, Houston
Ting Wang  Siteman Cancer Center, Assistant Professor of Genetics, Washington University School of Medicine, 2006-2009: Postdoctoral fellow, computational biology, University of California, Santa Cruz, 2001: MS, computer sciences, Washington University, St. Louis, 2006: PhD, computational biology, Washington University
Xiaowei Wang  Siteman Cancer Center, Assistant Professor of Radiation Oncology, Division of Cancer Biology, Washington University School of Medicine, 2000: PhD, biochemistry, Tufts University, Boston
Yian Wang  Siteman Cancer Center, Professor of Surgery, Division of General Surgery, Washington University School of Medicine, 1982: BS/MD, Beijing Medical College, 1990: PhD, pathology, Medical College of Ohio, Toledo

Saiama Naheed Waqar , MD  Instructor in Medicine, Internal Medicine

Mark Edward Warchol , PHD  Professor of Audiology and Communication Sciences, Program in Audiology and Communication Sciences

Mark Edward Warchol , PHD  Professor of Neurobiology, Anatomy and Neurobiology

Mark Edward Warchol , PHD  Professor of Otolaryngology, Otolaryngology

Beth Ann Ward , MD  Assistant Professor of Neurology, Neurology

Barbara B. Warner , MD, MS  Professor of Pediatrics, Pediatrics

Brad W. Warner , MD  Jesse L. Ternberg, M.D., PhD. Distinguished Professor of Pediatric Surgery in Surgery (Pediatric Surgery), Surgery

Brad W. Warner , MD  Professor of Pediatrics, Pediatrics

Corinna Hendrell Warren , MD  Instructor in Clinical Medicine, Internal Medicine

David K. Warren , MD, MPH  Associate Professor of Medicine, Internal Medicine

Wesley Charles Warren , MS, PHD  Research Associate Professor of Genetics, Genome Center

Lukas Delbert Wartman , MD  Instructor in Medicine, Internal Medicine

Andrzej J. Wasiak , MD, PHD  Assistant Professor of Clinical Medicine, Internal Medicine

Gary Michael Wasserman , MD  Assistant Professor of Clinical Obstetrics and Gynecology, Obstetrics and Gynecology

Mark S Wasserman , MD  Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology

Scott P Wasserstrom , MA, MD  Instructor in Clinical Medicine, Internal Medicine

Amy L. Waterman , MA, PHD  Associate Professor of Medicine, Internal Medicine

Erika Waters , MA, MS PSYC, PHD  Assistant Professor of Surgery (General Surgery), Surgery

Mark A Watson , MD, PHD  Associate Professor of Pathology and Immunology, Pathology and Immunology

Michael S Watson , MS, PHD  Adjunct Professor of Pediatrics, Pediatrics

Roger J Waxelman , MD  Instructor in Clinical Pediatrics, Pediatrics

Andrew M. Wayne , MD  Instructor in Clinical Neurology, Neurology

Jason Dean Weber , PHD  Associate Professor of Cell Biology and Physiology, Cell Biology and Physiology

Jason Dean Weber , PHD  Associate Professor of Medicine, Internal Medicine

Marc E Weber , JD, MD  Assistant Professor of Clinical Pediatrics, Pediatrics

H. James Wedner , MD  Professor of Medicine, Internal Medicine

Ling Wei , MD  Adjunct Research Assistant Professor of Neurology, Neurology

Xiaochao Wei , PHD  Research Instructor in Medicine, Internal Medicine

Conrad Christian Weihi , MD, PHD  Assistant Professor of Neurology, Neurology

Kevin D Weikart , MD  Instructor in Clinical Medicine, Internal Medicine

Gary J Weil , MD  Professor of Medicine, Internal Medicine

Gary J Weil , MD  Professor of Molecular Microbiology, Molecular Microbiology

Katherine N Weilbaecher , MD  Associate Professor of Cell Biology and Physiology, Cell Biology and Physiology

Katherine N Weilbaecher , MD  Associate Professor of Medicine, Internal Medicine

Katherine N Weilbaecher , MD  Associate Professor of Pathology and Immunology, Pathology and Immunology

Scott J Weiner , MD, PHD  Instructor in Clinical Pediatrics, Pediatrics

Carla Joy Weinheimer , MS  Research Assistant Professor of Medicine, Internal Medicine
David L Weinstein, MD Associate Professor of Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
George Matthew Weinstock, PHD Professor of Genetics, Genome Center
George Matthew Weinstock, PHD Professor of Molecular Microbiology, Molecular Microbiology
Leonard B Weinstock, MD Assistant Professor of Clinical Surgery (General Surgery), Surgery
Leonard B Weinstock, MD Associate Professor of Clinical Medicine, Internal Medicine
Benjamin David Weintraub Instructor in Clinical Pediatrics, Pediatrics
Steven Jay Weintraub, MD, MS Assistant Professor of Medicine, Internal Medicine
Edmond Weisbart Assistant Professor of Clinical Medicine, Internal Medicine
Judith L. Weisenberg, MD Assistant Professor of Neurology, Neurology
Alan N Weiss, MD Professor of Medicine, Internal Medicine
Calvin H Weiss, DDENT Instructor in Clinical Otolaryngology (DDS), Otolaryngology
Don Weiss, MD, MS Instructor in Clinical Pediatrics, Pediatrics
Edward P Weiss, MS, PHD Adjunct Research Assistant Professor of Medicine, Internal Medicine
Howard I Weiss, MD Assistant Professor of Clinical Neurology, Neurology
Michael D Weiss Assistant Professor of Clinical Orthopaedic Surgery, Orthopaedic Surgery
Peter Douglas Weiss, MD Instructor in Clinical Medicine, Internal Medicine
Stuart Weiss, MD Professor of Clinical Neurology, Neurology
John Sutton Welch, MD, PHD Assistant Professor of Medicine, Internal Medicine
Valerie B. Welch, MD Instructor in Clinical Pediatrics, Pediatrics
Reuben R Welch II, M ED, PHD Assistant Professor of Psychiatry, Psychiatry
Michael J Welch Siteman Cancer Center, Associate Director of Oncologic Imaging, Alvin J. Siteman Cancer Center, and Professor of Radiology, Mallinckrodt Institute of Radiology, Washington University School of Medicine, 1965-1967: Postdoctoral research associate, Brookhaven National Laboratory, Upton, N.Y., 1964: MA, natural sciences, Cambridge University, Cambridge, England, 1965: PhD, radiochemistry, University of London
Jason R Wellen, MD Assistant Professor of Surgery (General Surgery), Surgery
Zila Welner, MD Associate Professor of Clinical Psychiatry (Child Psychiatry), Psychiatry
Michael C Wendl, D SC, MS, PHS Research Assistant Professor of Genetics, Genome Center
Michael C Wendl, D SC, MS, PHS Research Assistant Professor of Mathematics, Department of Mathematics
Michael C Wendl, D SC, MS, PHS Research Assistant Professor of Mechanical Engineering & Materials Science, Department of Mechanical Engineering & Aerospace
Pamela M. Wendl, DPT, MS Assistant Professor of Orthopaedic Surgery, Orthopaedic Surgery
Pamela M. Wendl, DPT, MS Assistant Professor of Physical Therapy, Program in Physical Therapy
Alvin S Wenneker, MD Professor of Clinical Medicine, Internal Medicine
Nicole Joy Werner, MS, PHD Assistant Professor of Neurology, Neurology
Daniel Edward Wessell, MD, MEE, MS, PHD Assistant Professor of Radiology, Radiology
Brian T Wessman Assistant Professor of Anesthesiology, Anesthesiology
Brian T Wessman Assistant Professor of Emergency Medicine in Medicine, Internal Medicine
Jennifer Corinne Wessman, MD Instructor in Pediatrics (Pending Dean's Approval), Pediatrics
Peter Westervelt, MD, PHD Associate Professor of Medicine, Internal Medicine
Darren E Wethers, MD Instructor in Clinical Medicine, Internal Medicine
Stephen Alan Wexler, MD Professor of Clinical Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Philip J Weyman, MD Associate Professor of Clinical Radiology, Radiology

Alexander Weymann, MD Assistant Professor of Pediatrics, Pediatrics

Alison J Whelan, MD Professor of Medicine, Internal Medicine

Alison J Whelan, MD Professor of Pediatrics, Associate Dean Curriculum

Alison J Whelan, MD Senior Associate Dean for Education, Associate Dean Curriculum

Alison J Whelan Siteman Cancer Center, Professor of Medicine, Division of Medical Genetics, Washington University School of Medicine, 1986-1989: Intern and resident, internal medicine, Washington University, St. Louis, 1989-1991: Research fellow, Washington University, 1991-1992: Clinical fellow, medical genetics, Washington University, St. Louis, 1986: MD, Washington University, St. Louis, Primary Specialty: Medical genetics, Board Certified:, 1989: American Board of Internal Medicine, Internal Medicine

1996: American Board of Medical Genetics

Andrew J White, MD, MS Assistant Professor of Pediatrics, Pediatrics

Brad C White, MD Instructor in Clinical Surgery (Urologic Surgery), Surgery

Brian Stephen White, PHD Research Assistant Professor of Medicine (Pending Executive Faculty Approval), Internal Medicine

Bruce I White, MD Instructor in Clinical Surgery (Plastic and Reconstructive Surgery), Surgery

Frances V White, MD, MS Associate Professor of Pathology and Immunology, Pathology and Immunology

Frances V White, MD, MS Associate Professor of Pediatrics, Pediatrics

Michael Aaron White, MS, PHD Research Instructor in Genetics, Genetics

Neil Harris White, MD Professor of Medicine, Internal Medicine

Neil Harris White, MD Professor of Pediatrics, Pediatrics

Nicole Izetta White, MD Instructor in Clinical Pediatrics, Pediatrics

Karen Whiteside Instructor in Clinical Pediatrics, Pediatrics

John Bair Whitfield Adjunct Instructor in Psychiatry, Psychiatry

Michael Peter Whyte, MD Professor of Genetics, Genetics

Michael Peter Whyte, MD Professor of Medicine, Internal Medicine

Michael Peter Whyte, MD Professor of Pediatrics, Pediatrics

Burton M Wice, PHD Research Associate Professor of Medicine, Internal Medicine

Martin B Wice, MD, MS Associate Professor of Neurology, Neurology

Cynthia A Wichelman, MD Associate Professor of Emergency Medicine in Medicine, Internal Medicine

Cynthia A Wichelman, MD Course Director for the Mini-Medical School, Continuing Medical Education

Cynthia A Wichelman, MD Course Director for the Mini-Medical School, John M. Olin School of Business

Karen Mori Wickline, MD Associate Professor of Pediatrics, Pediatrics

Samuel A Wickline, MD Adjunct Professor of Physics, Department of Physics

Samuel A Wickline, MD Professor of Biomedical Engineering, Department of Biomedical Engineering

Samuel A Wickline, MD Professor of Cell Biology and Physiology, Cell Biology and Physiology

Samuel A Wickline, MD Professor of Medicine, Internal Medicine

Richard Harris Wieder, MD Assistant Professor of Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences

John F Wiedner, MD Instructor in Clinical Medicine, Internal Medicine

Kimberly N Wiele, MD Assistant Professor of Radiology, Radiology

Kimberly N Wiele Siteman Cancer Center, Assistant Professor of Radiology, Division of Diagnostic Radiology, Section of Breast Imaging, Mallinckrodt Institute of Radiology, Washington University School of Medicine, 1981-1985: Resident, diagnostic radiology, Saint Louis University, 1981: MD, University of Missouri, Kansas City, Primary Specialty: Diagnostic radiology and breast imaging, Board Certified:, 1987: American Board of Diagnostic Radiology
Deborah A Wienski, MD  Instructor in Clinical Medicine, Internal Medicine
Tanya M Wildes, MD  Assistant Professor of Medicine, Internal Medicine
Troy S Wildes, MD  Assistant Professor of Anesthesiology, Anesthesiology
Katherine Anne Henzler Wildman, PHD  Assistant Professor of Biochemistry and Molecular Biophysics, Biochemistry and Molecular Biophysics
Scott A Wildman, MS, PHD  Research Assistant Professor of Biochemistry and Molecular Biophysics, Biochemistry and Molecular Biophysics
Denise Wilfley, PHD  Professor of Medicine, Internal Medicine
Denise Wilfley, PHD  Professor of Pediatrics, Pediatrics
Denise Wilfley, PHD  Professor of Psychiatry, Psychiatry
Denise Wilfley, PHD  Professor of Psychology, Department of Psychology
Caroline G Wilker, MD  Instructor in Clinical Medicine, Internal Medicine
Robert S Wilkinson, MA, PHD  Professor of Cell Biology and Physiology, Cell Biology and Physiology
Denise Michelle Willers, MD  Assistant Professor of Obstetrics and Gynecology, Obstetrics and Gynecology
Kristine G Williams, MD, MPH  Assistant Professor of Pediatrics, Pediatrics
Michael P Williams, PHD  Adjunct Instructor in Medicine, Internal Medicine
Nancy J Williams, MD  Instructor in Clinical Medicine, Internal Medicine
George A Williams III, MA, MD  Assistant Professor of Clinical Medicine, Internal Medicine
R. Jerome Williams Jr, MD  Associate Professor of Clinical Medicine, Internal Medicine
Marcia Christine Willing, D SC, MD, MS  Professor of Pediatrics, Pediatrics
David B Wilson, MD, PHD  Associate Professor of Developmental Biology, Molecular Biology and Pharmacology
David B Wilson, MD, PHD  Associate Professor of Pediatrics, Pediatrics
Matthew Stewart Wilson  Instructor in Clinical Psychiatry, Psychiatry
Monita Elaine Wilson, MS, PHD  Research Associate Professor of Medicine, Internal Medicine
Richard K Wilson, PHD  Professor of Genetics, Genome Center
Richard K Wilson, PHD  Professor of Molecular Microbiology, Molecular Microbiology
Patrick H Win  Instructor in Clinical Medicine, Internal Medicine
David William Windus, MD  Associate Dean for Medical Education, Associate Dean Curriculum
David William Windus, MD  Professor of Medicine, Internal Medicine
Robert David Winfield  Assistant Professor of Surgery (General Surgery) (Pending Executive Faculty Approval), Surgery
Karen Winters, MD  Associate Professor of Medicine, Internal Medicine
Karen Winters, MD  Director of the Student and Employee Health Service - Medical Campus, Med School Student/Employee Health
Franz J Wippold  Siteman Cancer Center, Professor of Radiology and Chief, Section of Neuroradiology, Mallinckrodt Institute of Radiology, Washington University School of Medicine, 1977-1979: Intern and resident, neurology, Walter Reed Army Medical Center, Washington, D.C., 1979-1982: Resident, radiology, Walter Reed Army Medical Center, 1982-1983: Fellow, neuroradiology, Washington University, St. Louis, 1977: MD, Saint Louis University, Primary Specialty: Head and neck radiology, neuroradiology, Board Certified: 1982: American Board of Radiology, Diagnostic Radiology
1995: American Board of Radiology, Neuroradiology
Franz J Wippold II, MD  Professor of Radiology, Radiology
Paul Edward Wise, MD  Associate Professor of Surgery (General Surgery), Surgery
Chad Alan Witt, MD  Assistant Professor of Medicine (Pending Executive Faculty Approval), Internal Medicine
Keith Frederic Woeltje, MD, PHD  Professor of Medicine, Internal Medicine
Mary Kaye Wojczynski, PHD  Research Instructor in Genetics, Genetics
Anna Wolaniuk, MD, PHD  Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Loralee Jane Wold, MD  Instructor in Clinical Pediatrics, Pediatrics
Michael L Wolf, OD  Adjunct Instructor in Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Timothy J Wolf, OTD  Assistant Professor of Neurology, Neurology
Timothy J Wolf, OTD  Assistant Professor of Occupational Therapy, Program in Occupational Therapy
Edward M Wolfe, MD  Instructor in Clinical Medicine (Dermatology), Internal Medicine
Brett D Wolff, MD  Associate Professor of Anesthesiology, Anesthesiology
Gerald Wolff, MD  Assistant Professor of Clinical Medicine, Internal Medicine
Patricia Ann Wolff, MD  Professor of Clinical Pediatrics, Pediatrics
Edwin D Wolfgan, MD  Assistant Professor of Clinical Psychiatry, Psychiatry
Kathleen Y. Wolin, D SC  Assistant Professor of Surgery (General Surgery), Surgery
Kathleen Y Wolin  Siteman Cancer Center, Assistant Professor of Surgery, Division of Public Health Sciences, Washington University School of Medicine, 2005-2007: Postdoctoral fellow, cancer epidemiology and prevention, Northwestern University, Chicago, 2005: ScD, epidemiology, Harvard University, Boston
Nathan E Wolins, PHD  Research Assistant Professor of Medicine, Internal Medicine
Fay Yeh Womer, MD  Assistant Professor of Psychiatry, Psychiatry
Michael Wong, MD, PHD  Associate Professor of Neurobiology, Anatomy and Neurobiology
Michael Wong, MD, PHD  Associate Professor of Neurology, Neurology
Michael Wong, MD, PHD  Associate Professor of Pediatrics, Pediatrics
Ming-Fong Agnes Wong, MD, PHD  Adjunct Professor of Ophthalmology and Visual Sciences, Ophthalmology and Visual Sciences
Albert S Woo, MD  Assistant Professor of Surgery (Plastic and Reconstructive Surgery), Surgery
John A Wood, MD  Associate Professor of Clinical Medicine, Internal Medicine
Pamela K Woodard, MD  Professor of Radiology, Radiology
Terry A Woodford-Thomas, MS, PHD  Adjunct Research Assistant Professor of Pathology and Immunology, Pathology and Immunology
Michele C Woodley, MD  Assistant Professor of Clinical Medicine, Internal Medicine
Jason C. Woods, MA, PHD  Assistant Dean and Academic Coordinator, College of Arts and Sciences
Jason C. Woods, MA, PHD  Assistant Professor of Radiology, Radiology
Gerald Wool, MD  Associate Professor of Clinical Pediatrics, Pediatrics
Thomas A Woolsey, MD  George H and Ethel R Bishop Scholar in Neuroscience in Neurological Surgery, Neurological Surgery
Thomas A Woolsey, MD  George H and Ethel R Bishop Scholar in Neuroscience in Neurology, Neurology
Thomas A Woolsey, MD  Professor of Anatomy and Neurobiology, Anatomy and Neurobiology
Thomas A Woolsey, MD  Professor of Biomedical Engineering, Department of Biomedical Engineering
Thomas A Woolsey, MD  Professor of Experimental Neurological Surgery, Neurological Surgery
Thomas A Woolsey, MD  Professor of Experimental Neurology, Neurology
Thomas A Woolsey, MD  Professor of Physiology, Cell Biology and Physiology
Hasani Omar Wooten, MS, PHD  Instructor in Radiation Oncology, Radiation Oncology
David F Wozniak, MA, PHD  Adjunct Research Associate Professor of Psychology, Department of Psychology
David F Wozniak, MA, PHD  Research Professor of Psychiatry, Psychiatry
Ricardo J Wray  Siteman Cancer Center, Associate Professor of Community Health, Division of Behavioral Science/Health Education, School of Public Health, Saint Louis University, 1991: MS, communication, Cornell University, Ithaca, N.Y., 2000: PhD, communication, University of Pennsylvania, Philadelphia

Megan Elizabeth Wren , MD  Associate Professor of Medicine, Internal Medicine

Jeffrey M Wright , MD  Assistant Professor of Clinical Medicine, Internal Medicine

Jeffrey M Wright , MD  Assistant Professor of Clinical Pediatrics, Pediatrics

Neill Marshall Wright , MD  Associate Professor of Orthopaedic Surgery, Orthopaedic Surgery

Neill Marshall Wright , MD  Herbert Lourie Professor of Neurological Surgery, Neurological Surgery

Rick Wayne Wright , MD  Asa C. & Dorothy W. Jones Distinguished Professor, Orthopaedic Surgery


Allison Wright Willis , MD  Assistant Professor of Neurology, Neurology

Gregory Frederick Wu , MD, PHD  Assistant Professor of Neurology, Neurology

Gregory Frederick Wu , MD, PHD  Assistant Professor of Pathology and Immunology, Pathology and Immunology

Xiaobo Wu , MD  Research Instructor in Medicine, Internal Medicine

Heather E. Wuebker , MD  Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology

Kathie R Weillner , MD  Associate Professor of Clinical Pediatrics, Pediatrics

Christopher Wuertz , MD  Assistant Professor of Clinical Psychiatry, Psychiatry

Hayley Wurzel  Assistant Professor of Clinical Pediatrics, Pediatrics

Xiaoming Xia , MS, PHD  Research Assistant Professor of Anesthesiology, Anesthesiology

Yan Xie , MD, MS  Research Instructor in Medicine, Internal Medicine

Chengjie Xiong , MS, PHD  Associate Professor of Biostatistics, Division of Biostatistics

Chengjie Xiong , MS, PHD  Associate Professor of Neurology, Neurology

Jinbin Xu , ME, PHD  Research Instructor in Radiology, Radiology

Dmitriy A Yablonskiy , D SC, MS, PHD  Adjunct Professor of Physics, Department of Physics

Dmitriy A Yablonskiy , D SC, MS, PHD  Professor of Radiology, Radiology

Christina Marie Yadao  Instructor in Clinical Pediatrics, Pediatrics

Naga M Yalla , MD  Instructor in Medicine, Internal Medicine

Kathryn Ayako Yamada , PHD  Research Professor of Medicine, Internal Medicine

Kelvin A Yamada , MD  Professor of Neurology, Neurology

Kelvin A Yamada , MD  Professor of Pediatrics, Pediatrics

Ken Yamaguchi , MD, MS  Sam and Marilyn Fox Distinguished Professor of Orthopaedic Surgery, Orthopaedic Surgery

Heping Yan , MD, MS  Research Assistant Professor of Radiation Oncology, Radiation Oncology

Yan Yan , MD, MHS, PHD  Research Associate Professor of Biostatistics, Division of Biostatistics

Yan Yan , MD, MHS, PHD  Research Associate Professor of Surgery (General Surgery), Surgery

Deshan Yang , MS, PHD  Assistant Professor of Radiation Oncology, Radiation Oncology

Kui Yang , ME, PHD  Research Instructor in Medicine, Internal Medicine

Qin Yang , MD, PHD  Associate Professor of Radiation Oncology, Radiation Oncology

Hiroko Yano , MS, PHD  Assistant Professor of Genetics, Genetics
Hiroko Yano, MS, PHD Assistant Professor of Neurological Surgery, Neurological Surgery
Hiroko Yano, MS, PHD Assistant Professor of Neurology, Neurology
Kevin E Yarasheski, MA, PHD Professor of Cell Biology and Physiology, Cell Biology and Physiology
Kevin E Yarasheski, MA, PHD Professor of Medicine, Internal Medicine
Kevin E Yarasheski, MA, PHD Professor of Physical Therapy, Program in Physical Therapy
Nabeel Rasheed Yaseen, MD, PHD Associate Professor of Pathology and Immunology, Pathology and Immunology
Mona Yassin, MD Instructor in Clinical Pediatrics, Pediatrics
William D Yates, MD Instructor in Clinical Surgery (General Surgery), Surgery
Timothy Teng-Kay Yau, MD Assistant Professor of Medicine, Internal Medicine
Hairong Ye Instructor in Anesthesiology, Anesthesiology
Branden Edward Yee, MD Instructor in Anesthesiology, Anesthesiology
Muralidhar Reddy Yerramadha, MBBS Instructor in Medicine, Internal Medicine
Xiaobin Yi, MD Assistant Professor of Anesthesiology, Anesthesiology
Yongjun Yin, PHD Research Instructor in Developmental Biology, Molecular Biology and Pharmacology
Charles Yohannan, MD Instructor in Clinical Medicine, Internal Medicine
Wayne M Yokoyama, MD Howard Hughes Medical Institute Investigator in Medicine, Internal Medicine
Wayne M Yokoyama, MD Howard Hughes Medical Institute Investigator in Medicine, Internal Medicine
Wayne M Yokoyama, MD Sam and Audrey Loew Levin Professor of Medicine (Rheumatology), Internal Medicine
Andrew Seungjo Yoo, MS, PHD Assistant Professor of Developmental Biology, Molecular Biology and Pharmacology
Jennifer L. York Instructor in Pediatrics (Pending Dean's Approval), Pediatrics
Jun Yoshino, MD, PHD Research Assistant Professor of Medicine, Internal Medicine
Ming You, MD, PHD Adjunct Professor of Surgery (General Surgery), Surgery
Zhongsheng You, MS, PHD Assistant Professor of Cell Biology and Physiology, Cell Biology and Physiology
Zhongsheng You, MS, PHD Assistant Professor of Medicine, Internal Medicine
Zhongsheng You Siteman Cancer Center, Assistant Professor of Cell Biology and Physiology, Washington University School of Medicine, 2002-2009: Postdoctoral fellow, molecular and cell biology, Salk Institute, La Jolla, Calif., 1997: MS, Shanghai Institute of Biochemistry and Cell Biology, Shanghai, China, 2002: PhD, University of California, San Diego
Alexander H Young, MD Assistant Professor of Anesthesiology, Anesthesiology
Julia Catherine Young Instructor in Clinical Pediatrics, Pediatrics
Robert A Young, JD, MD, MS Instructor in Clinical Surgery (Plastic and Reconstructive Surgery), Surgery
Haifa Tawifiq Younis, MD Instructor in Clinical Obstetrics and Gynecology, Obstetrics and Gynecology
Cecilia H Yu, MD Assistant Professor of Clinical Pediatrics, Pediatrics
Dong Yu, PHD Assistant Professor of Molecular Microbiology, Molecular Microbiology
Simon Yu, MD Instructor in Clinical Medicine, Internal Medicine
Feliciano Buenviaje Yu Jr, M PH, MD, MHS Associate Professor of Pediatrics, Pediatrics
Liya Yuan, MS, PHD Research Instructor in Neurological Surgery, Neurological Surgery
Carla Marie Yuede, PHD Research Instructor in Neurology, Neurology
Roger D. Yusen, MD, MPH Associate Professor of Medicine, Internal Medicine
Sean H Yutzy Adjunct Professor of Clinical Psychiatry, Psychiatry
Craig Mitchell Zaidman, MD Assistant Professor of Neurology, Neurology
Charles F Zorumski, MD Head of the Department of Psychiatry, Psychiatry
Charles F Zorumski, MD Professor of Neurobiology, Anatomy and Neurobiology
Charles F Zorumski, MD Samuel B. Guze Professor of Psychiatry, Psychiatry
Dequan Zou, D SC, ME, MS Research Associate Professor of Physical Therapy, Program in Physical Therapy
Dequan Zou, D SC, ME, MS Research Associate Professor of Radiology, Radiology
Wei Zou, MA, PHD Research Assistant Professor of Pathology and Immunology, Pathology and Immunology
Andrew C. Zuckerman Instructor in Clinical Pediatrics, Pediatrics
Darryl Adam Zuckerman, MD Assistant Professor of Radiology, Radiology
Darryl Adam Zuckerman, MD Assistant Professor of Surgery (General Surgery), Surgery
Gary R Zuckerman, DOST Associate Professor of Medicine, Internal Medicine
Malgorzata Anna Zukowska, MD Instructor in Medicine, Internal Medicine

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