

A MESSAGE FROM THE
**EXECUTIVE VICE CHANCELLOR
FOR HEALTH AFFAIRS**



Monday, Dec. 13, 2021

Celebrating our uniqueness this holiday season

Dear Colleague,

With more than 10,000 employees, our health system is made up of individuals with many different backgrounds and traditions. From November to the end of the year, did you know there are more than 25 religious and cultural observances and celebrations marked across the globe?

With the holiday season well underway, it is an opportunity to learn about and respect each other's traditions. The way that I celebrate may not be the same way that you celebrate, but that is part of the beauty of who we are.

As a health system, we are striving to be more intentional in celebrating our unique traditions and creating a culture of inclusion. This year, our health system is acknowledging the most-celebrated employee holidays of Hanukkah, Kwanzaa and Christmas.

We know there are many observances beyond these, and if your observance is not represented, please share your traditions by emailing Nikki McGruder, MU Health Care's director of diversity, equity and inclusion, at smithmcgrudern@health.missouri.edu.

Each of us — at all levels of our organization — play an important role in growing and sustaining a diverse and inclusive learning, living and working environment. Please join me in celebrating our uniqueness and in encouraging each other to do the same.

Wishing you and your loved ones happy holidays and a peaceful New Year!

Sincerely,

A handwritten signature in dark ink, appearing to be 'R. L. Smith'.

Richard Barohn, MD
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University of Missouri

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A MESSAGE FROM THE **EXECUTIVE VICE CHANCELLOR FOR HEALTH AFFAIRS**



Friday, Nov. 19, 2021

Reflecting on our quality journey

Dear Colleague,

As we embark on the holiday season and a time of reflection, we have so many reasons to be thankful. I, personally, am appreciative of every member of our health system who strives to improve how we care for the community.

This commitment to providing safe, quality health care recently was confirmed with our latest standing in the Vizient Quality and Accountability National Ranking. MU Health Care has achieved its best score, ranking 18th among 100 peer academic health systems in the country.

Vizient Quality and Accountability rankings are considered by many health systems to be the most current and accurate gauge of the care we are providing to patients. The ranking is based on more than 100 measures including mortality, patient safety, patient centeredness, effectiveness of care, efficiency of care and health equity. For us, it is the benchmark we follow to gauge the quality of our care.



We earned our best ranking (lower is better!) in the Vizient Quality and Accountability study in fiscal year 2021. We have achieved our goal of being in

the top 25 for the past two years, but quality improvement is a continual journey.

While rankings like Vizient bring us great pride, care is more than just a set of numbers. The care we provide reflects the dedication of the entire team to do what is best for patients.

When we think of quality, many of us may think solely of the face-to-face interactions we have with patients. While this direct clinical care certainly is a major part of health care, there is so much more that goes into delivering quality care. Our environmental services professionals, pharmacists, finance teams, IT specialists, HR teams, marketing and communications teams, researchers, educators, learners and more – EVERYONE plays a vital part in delivering quality health care and keeping our patients safe.

Nowhere was this team effort more apparent than during the COVID-19 pandemic. Every team across the health system pivoted to change how we operate. You showed great flexibility and resilience in adapting to changing policies, protocols and practices time and time again to keep our patients and ourselves safe.

We are immensely proud of achieving such a strong ranking, but this is not the end goal. There are always opportunities to improve. Part of the journey we are on is to think of ways in which we can perform our jobs even just a little bit better. When we are all mindful of improvement on an individual level, we will see continued improvement as an entire health system. We all have a powerful role.

Thank you, all, for your efforts to care for patients and the community. While rankings are nice, ultimately, we know that the reward is seeing our patients — and each other — thrive!

Sincerely,



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A MESSAGE FROM THE
**EXECUTIVE VICE CHANCELLOR
FOR HEALTH AFFAIRS**



Friday, Nov. 12, 2021

Equipping our nurses for rewarding careers

Dear Colleague,

MU Health Care attracts and retains top nursing talent in our state. Each year, we onboard more than 200 new graduates from nursing school. When a new nursing graduate joins our team, they undergo a weeklong immersion program at the MU Health Care Learning Center. I was able to visit the Learning Center recently to see firsthand as a group of 92 nurses completed their immersion training.

During the training I visited — hosted by Megan Cram, manager of clinical education, and Stephanie Hunt, director of learning — two of our new nurses ran through a variety of scenarios with standardized patients, or actors who portray patients to help our nurses hone their clinical skills.

Along with six other students, I observed through a video camera as two nurses entered a mock inpatient room. As observers, we filled out sheets to note how the nurses interacted with their patients. The scenario we observed was a simulated “end-of-shift” report.



It was inspiring to meet the nurses we have joining our health system. The Nurse Immersion program is a great resource to help them prepare for their new roles.

As we observed the nurses interact with the patient, they noticed a shift in the patient's behavior and performed a physical assessment. The patient could not talk and was not moving the right side of her body. The nurses promptly called a Code Stroke! These young nurses did everything right. They then returned to the classroom and their classmates critiqued their work. The nurses had an opportunity to explain their approach and what they learned from the scenario.

This type of mock emergency training is so effective to prepare our health care workers for what can happen when they get on the units. I am so proud of our new nurses, their educators and the amazing program we have in place at the Learning Center. We are indeed truly preparing the upcoming generation of nurses to be the best they can be so that we can save and improve the lives of our patients in Missouri and beyond.



Shanon Fucik, MBA, RN, CPN, NEA-BC, recently joined us as our new chief nursing officer. Get to know Shanon by [watching this video](#), and please join me in welcoming her to our team.

While we onboard nurses throughout the year, we recently brought on a new leader to oversee our nursing practice. Shanon Fucik, MBA, RN, CPN, NEA-BC, joined us on Nov. 8 as our new chief nursing officer. Shanon comes from Children's Mercy Hospitals and Clinics in Kansas City and will help us deliver the highest quality patient care as she develops and implements our nursing policies and initiatives. I can't wait to see how she will help us improve upon our already exceptional nursing program!

Sincerely,



Richard Barohn, MD
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P.S.: Though we onboard more than 200 new nurses each year, we still need more exceptional nurses to help us shape the future of our academic health system. We offer nursing careers full of growth, opportunity and support. If you or someone you know is looking to grow your career as a nurse, visit muhealth.org/nursing to explore your options.



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A MESSAGE FROM THE
**EXECUTIVE VICE CHANCELLOR
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Friday, Oct. 29, 2021

Marking five years of our Springfield Clinical Campus

Dear Colleague,

I recently had the pleasure of visiting our Springfield Clinical Campus (SCC) of the MU School of Medicine for the first time. We were hosted by David Haustein, SCC associate dean, and I was also joined by MU Health Care CEO Jonathan Curtright and School of Medicine Dean Steve Zweig in honor of the campus' five-year anniversary.

Our School of Medicine opened the clinical campus in Springfield in 2016 in an initiative to train more physicians for Missouri. The campus is a public/private partnership with [CoxHealth](#) and [Mercy](#) hospitals and doctors to provide patient-centered care for the people of the state and beyond. I was surprised to learn that more than 90% of SCC students are Missouri residents and are anticipated to return to Missouri after residency.

It was exciting to see where our students train alongside their physicians, and we are so thankful to these physicians who volunteer their time and knowledge to train our students to serve Missourians.



Dr. Shawn Usery, chief medical officer (right), gave a spectacular tour of the CoxHealth facilities. We especially enjoyed seeing the Mizzou student lounge. Also pictured are Dean Steve Zweig, CEO Jonathan Curtright, myself, SCC Associate Dean Dr. David Haustein and Amanda Hedgpeth, vice president of hospital operations at CoxHealth.

Research is near to my heart, so it was inspiring to meet with the research team at Cox including Dr. Robin Trotman, medical director of the clinical research department; Chris Schulze, director of clinical research; and Dr. Mark Costley, previous interim dean of the SCC. We had an enlightening discussion about their ongoing projects, our current research crossover and future opportunities for collaboration.

At Mercy, we had the chance to connect with Dr. Tracy Haertling, clinical research manager, and Dr. Gregory Ledger, chief medical officer. I especially enjoyed learning about their innovative research model that includes a dedicated research department and a “super site strategy” that opens clinical trials to multiple sites.



Mercy Hospital has beautiful facilities in Springfield. We appreciated their hospitality!

Dr. Haustein and his staff hosted a reception with Mercy, Cox and Springfield Area Chamber of Commerce leadership at the SCC. It was the first time that all our leaders have gathered since the opening of the campus and created an opportunity to connect and collectively imagine how to build an even better educational and preceptor experience for the next five years. I'm sure that the presentations by the student class presidents left a significant impression on everyone present.

The grand finale of the anniversary celebrations was a ribbon-cutting for the Russell D. and Mary B. Shelden Springfield Clinical Campus Simulation Center. Third- and fourth-year class presidents Taylor Brooks and Sammi Metzger had the honors of cutting the ribbon.



The Springfield simulation center has been a labor of love for Dena Higbee, our senior director of simulation (pictured holding the ribbon at left). The center has equipment that is essential for teaching our medical students but is also a training resource made available to the community.

It was an honor to be in Springfield to celebrate the anniversary of the SCC and to spend time with our colleagues at Mercy and Cox. This campus was a dream for many years, and since it was established, it has been a tremendous success for our faculty and students. I look forward to returning soon!

Sincerely,

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A MESSAGE FROM THE
**EXECUTIVE VICE CHANCELLOR
FOR HEALTH AFFAIRS**



Friday, Oct. 15, 2021

Grand opening week for NextGen finally here

Dear Colleague,

We are ready to host an outstanding grand opening celebration for the Roy Blunt NextGen Precision Health building on Tuesday, Oct. 19! I cannot wait for you to see the building's features and the role it will play in transforming precision health research for Missourians and beyond.

I want to encourage those of you who are not registered to attend in person to watch the livestream of the event available on the [NextGen site](#). This online experience will include the same speeches and videos viewed by the live audience. If you do not plan to attend Tuesday, additional tours will be available the rest of the semester. You can [sign up here](#).

I have a heartfelt THANK YOU to everyone who worked tirelessly in planning the day's events. This did not come together overnight. Committee members have been meeting for years to make this day special.

Here is just a snapshot of the day:

- 10.a.m.: A speaker lineup during the main event that includes: U.S. Senator Roy Blunt, Missouri Lieutenant Governor Mike Kehoe, National Institutes of Health (NIH) Director Dr. Francis Collins, Board of Curators Chair Darryl Chatman, President Mun Choi, myself, Provost Latha Ramchand, Dr. Talissa Altes and MU engineering student Rebecca Shyu. Additionally, guests will see compelling videos that highlight the creation of the NextGen initiative and the plan for building construction, the promise and reach of NextGen research, and how bench-to-beside research will excel thanks to NextGen efforts.
- 2:30 p.m.: A distinguished lecture from Dr. Collins. He is known for serving the past 12 years as NIH director under three presidential administrations. Dr. Collins is a renowned physician and geneticist. His lecture will be [livestreamed online](#).

While we are excited for the attention on this amazing state-of-the art building, I want to continue to stress that the NextGen Precision Health initiative is committed to developing programming and collaboration opportunities that will

infuse all the talent we have across the campus and system to drive precision health. We will foster discoveries in the lab, the clinic and in our communities. Let us use these events to galvanize our commitments to this goal.

October 2021 certainly must rank as one of the most historic months on the MU campus and for MU Health Care. Not only will we open the NextGen building but we also officially celebrated the groundbreaking of the new Children's Hospital on Oct. 1. These two projects will continue to push our reputation as a statewide leader in health care delivery and a national leader in precision health research.

As always, learn more about our researchers and NextGen-related news and videos posted on our [website](#) and more on the [new Children's Hospital](#).

Sincerely,



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A MESSAGE FROM THE
**EXECUTIVE VICE CHANCELLOR
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Friday, Oct. 1, 2021

Reimagining the future of care

Dear Colleague,

These are such exciting times! Yesterday, I was able to join with employees on our main hospital campus and at Women's and Children's Hospital during two employee celebrations for our Children's Hospital groundbreaking.

It was great to meet with our teams who have been working behind the scenes to create a new home for our Children's Hospital and our Birthing Center. Just three years from now, we will be celebrating as our new building opens and we have a truly integrated campus with one convenient location for all hospital services.



It was a pleasure to join with leaders of our health system, members of our Children's Hospital design committees and representatives from our construction team with Paric and Barton Malow at the construction site at the main hospital campus.

Building a new space to care for our pediatric patients and our expectant mothers is quite an undertaking. Thank you for working during an already stressful pandemic to plan for the future of children's and women's care. We are all part of a collective effort to care for our community now and for years to come.



Joining our employees at Women's and Children's Hospital yesterday was truly special. Thank you to everyone who came out to celebrate.

While we were able to gather and celebrate with Kona Ice (it was delicious!), we will be hosting our formal groundbreaking celebration this afternoon at 3:15 p.m. Seating is limited for this event, so we are encouraging you to [join us via the livestream](#) to see the presentation and watch a never-before-seen tour of the facility.



Join our livestream this afternoon at 3:15 for our Children's Hospital groundbreaking. [Click here to watch.](#)

In my role as leader of the NextGen Precision Health initiative, I get to see the big picture of the many research collaborations taking place across our system. We truly have exceptional research in what we refer to as our NextGen research focus areas. In fact, one of our focus areas is reproduction and child health. I am truly excited for what this will mean for patient care.

We will strive to offer hope to families needing answers and innovative care to treat children with rare diseases. Our pediatric patients will have better and

easier access to clinical trials, and they can be screened by some of the most advanced medical imaging equipment used in clinical research.

Our new Children's Hospital and our Birthing Center will create a healing environment for our patients because it will use the strengths of our entire health system. We are creating one centralized hospital campus where all of our resources and technology are together for patients of all ages.

I could not be more excited about the future of our health system and our community. Together with our new Children's Hospital and the NextGen Precision Health initiative, we are shaping the future of care. I invite you to learn more by visiting our new website, muhealth.org/reimagine.

Sincerely,



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A MESSAGE FROM THE
**EXECUTIVE VICE CHANCELLOR
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Friday, Sept. 17, 2021

Our NextGen opening is nearly here

Dear Colleague,

Grand opening for the Roy Blunt NextGen Precision Health Building is quickly approaching. The activities planned for Tuesday, Oct. 19, will be special, and you will be hearing more about the events including an impressive lineup of speakers, videos and entertainment in upcoming messages. Each of you can enjoy the grand opening, even if you cannot be there in person. I encourage you to watch the event via the livestream on our NextGen site. All event details can be found online [here](#).

The NextGen Precision Health initiative has been a proud accomplishment for the university and many of us after several years of careful planning and investment. We have identified top faculty to lead research, secured industry partnerships for advanced research equipment and constructed a building designed to produce impactful results in bench-to-bedside medicine.

While the building is the cornerstone and most visible piece of our initiative, NextGen is more than a building. This research initiative is the largest and most prominent that the University of Missouri has ever launched. Collaborative interdisciplinary research will be occurring across campus in Columbia and in partnership with the other UM System universities — the University of Missouri-Kansas City, the Missouri University of Science and Technology in Rolla, and the University of Missouri-St. Louis — and not only in health science fields. We are establishing connections with every school, college and department that is willing to advance the NextGen mission for improving the health of Missourians and beyond.

An example of a research field that has grown this year due to recruitment is precision health imaging. Dr. Talissa Altes, chair of the Department of Radiology at the MU School of Medicine, added six research faculty who will be involved in NextGen research. Imaging is a key component to precision health to help us identify diseases quicker and more efficiently. These new faculty will deliver their technical expertise to advance breakthrough research in diseases like Alzheimer's disease, Parkinson's disease and cancer using tumor imaging, magnetic resonance imaging, biological sciences and engineering.

Learn more about our researchers and NextGen-related news and videos posted on [our website](#) and keep checking in for more news about the grand opening.

Sincerely,



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A MESSAGE FROM THE
**EXECUTIVE VICE CHANCELLOR
FOR HEALTH AFFAIRS**



Friday, Sept. 3, 2021

Protecting our community through vaccination

Dear Colleague,

As we continue to see a high number of COVID-19 cases in our community, we need to do everything we can to help prevent serious illness and stop the spread of COVID-19. Last month, our health system announced the decision to require COVID-19 vaccinations or approved medical or religious exemption by Oct. 1, 2021, for all MU Health employees.

I am happy to say that since implementing this policy, our Employee Health office reports that more than 1,000 additional employees have been vaccinated against COVID-19. This is such encouraging news! This shows that our employees take seriously our responsibility to do all we can to live up to our mission to save and improve lives.

I know that there are mixed feelings toward this policy, but I want to reiterate that this is the right decision. Vaccination has clearly been shown to decrease hospitalization and death caused by COVID-19, including the Delta variant. We know that COVID-19 vaccination saves lives.

All of us have seen headlines and posts on social media that cast doubt on the safety and effectiveness of the vaccine. These posts are part of a misinformation strategy designed to cause confusion. I would encourage you to read this article, [**“Scary Reports of Deaths Following COVID-19 Vaccination Aren’t What They Seem,”**](#) that provides a look at the data from the Vaccine Adverse Event Reporting System (VAERS) and the misrepresentation of that data.

We are now less than one month from the Oct. 1 deadline to have vaccination documentation uploaded. See the implementation guide on our [**COVID-19 page**](#) for instructions on how to provide this information. If you have not yet been vaccinated or provided your documentation, please be mindful of these upcoming dates. If you intend to get the Moderna vaccine, **today, Sept. 3**, is the last date to receive your first dose in order to be fully vaccinated by Oct. 1.

Vaccine	Timeline	Latest date to receive first dose	Deadline to be fully vaccinated
Moderna	Four weeks apart	Sept. 3, 2021	Oct. 1, 2021
Pfizer	Three weeks apart	Sept. 10, 2021	Oct. 1, 2021
Johnson & Johnson	Single dose	Oct. 1, 2021	Oct. 1, 2021

Those affected by the requirement include employees at MU Health Care, the School of Medicine, the Sinclair School of Nursing, and the School of Health Professions. Because of their connection and proximity to our workforce and clinical environment, the same vaccination requirement applies to students in the School of Medicine and the Sinclair School of Nursing and professional students in the School of Health Professions.

Schedule a vaccine appointment

As the largest provider of health care services in mid-Missouri and one of the largest employers, we will do everything we can to have as many people vaccinated as possible. Together, I am confident we will keep our patients, employees, learners and community safe.

Sincerely,



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A MESSAGE FROM THE
**EXECUTIVE VICE CHANCELLOR
FOR HEALTH AFFAIRS**



Friday, Aug. 20, 2021

Precision medicine in action: The science behind drug addiction

Dear Colleague,

As we anticipate the NextGen Precision Health grand opening on Oct. 19, I want to make you aware of some excellent NextGen research already taking place on our campus and to point out that a lot of NextGen research occurs in sites other than the new building. Dr. Brett Froeliger joined our team last year as director of the **NextGen Cognitive Neuroscience Systems (CNS) Core Facility**. President Mun Choi and I had the chance to tour the facility and learn about Dr. Froeliger's work as a neuroscientist in the field of addiction research.

Dr. Froeliger has devoted his career to understanding the biological and behavioral basis for drug addiction. He is a recent NextGen Precision Health recruitment in neuroscience and relocated last year to MU from the Medical University of South Carolina.



It was a pleasure to learn more about Dr. Brett Froeliger's research into the science behind drug addiction. President Choi and I toured the NextGen Cognitive Neuroscience Systems (CNS) Core Facility in December.

Dr. Froeliger arrived in July 2020 and within a couple of months already had his laboratory set up and enrolling participants into randomized controlled trials. He has joint appointments in both the Department of Psychiatry in the School of Medicine and the Department of Psychological Sciences in the College of Arts and Science.

The Marx Building that houses the CNS has two major components: First, there is a state-of-the-art research dedicated 3T Siemens Prisma MRI scanner. With this new upgraded MRI, scientists can identify structural and functional neural circuits that play a role in maintaining addictive behavior. Then, in the other end of the Marx Building, there are a series of research study rooms where neuropsychological tests are performed.



Seen here is President Choi and Dr. Froeliger in a research study room at the NextGen Cognitive Neuroscience Systems (CNS) Core Facility.

In addition, the facility houses a neuronavigation system and transcranial magnetic stimulation (TMS) equipment – a device used to stimulate specific regions of the brain. While TMS is FDA approved for treating multiple neuropsychiatric conditions, Dr. Froeliger is evaluating the potential value of using TMS for treating drug addiction. In conjunction with the MRI scanner, this equipment allows researchers to overlay each person's functional MRI onto their structural MRI and therefore provide an individualized map for more precise TMS. The idea is that while brain structure and function is largely overlapping across people, the precise location of function may vary a bit from person to person. A primary goal of this approach is to identify a more precise brain map for each person and therefore tailor treatment to the individual patient.

This is precision medicine in action.

His team is actively studying to find the precise brain areas responsible for nicotine, opioid and cocaine addiction, and evaluate the mechanisms of action of new treatments for drug addiction. It was a pleasure to spend time with Dr. Froeliger and welcome him and his team to MU as one of the newest NextGen Precision Health researchers.

Sincerely,



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P.S.: If you'd like to learn more about Dr. Froeliger's research, I invite you to attend his upcoming presentation as part of our NextGen Precision Health Discovery Series webinar on Oct. 20 at noon. [Register to attend](#).



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A MESSAGE FROM THE
**EXECUTIVE VICE CHANCELLOR
FOR HEALTH AFFAIRS**



Friday, Aug. 6, 2021

Welcome to the newest members of our academic health system

Dear Colleague,

I am always energized this time of year as we welcome the newest members of our academic health system: new medical students, resident physicians and fellows.

Last week, we welcomed our incoming Class of 2025 with our annual stethoscope presentation and White Coat Ceremony. It was an honor to take part in these events, which kick off the start of their medical education.



[Watch a recap](#) of the July 30 White Coat Ceremony.

The Class of 2025 consists of 128 medical students selected out of more than 3,100 applications to our school! I'm proud to report that this is the most diverse class in our school's history. Of this class, 42% of students self-identified as an ethnic minority and 20% self-identified as underrepresented minorities. In addition, 26% of students are from socioeconomically disadvantaged backgrounds, 21% are from rural areas and 88% are from Missouri.



Our students recited the Declaration of Geneva and pledged their commitment to the values they will uphold as physicians-in-training.

It is an honor to be among the incoming class of medical students. Every university that I've worked at over the course of my career has been trying to catch up with MU's medical education. The MU School of Medicine is perceived nationally as one of the jewels of medical education in the United States as a leader in patient-based learning and small classroom setting.



It was a pleasure to stand before our students and their families to congratulate and encourage them on their new journey as medical students.

I know that we are navigating our "new normal" because of the pandemic. However, while there are many uncertainties, many things remain the same. Our faculty and staff are dedicated to bringing the most comprehensive and thoughtful medical education possible.



We welcomed the Class of 2025 medical students during a stethoscope ceremony on July 28.

Over the last month, we have also welcomed 131 new resident physicians and 41 new fellows. These new members of our team represent 49 total programs, and our residents will be here for an average of three to four years while our fellowships are one to two years in length.

This infusion of talent at our health system is so critical to sustaining our mission to save and improve lives – through exemplary education, research and patient care. I am immensely excited for the future. Perhaps we have among us a budding researcher who will discover the cure for cancer or be able to prevent the next global pandemic.

To our new learners and colleagues, welcome to Mizzou! For those of you who may be working with a new resident or fellow, please welcome them and join alongside them to help them succeed. It takes all of us!

Sincerely,

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A MESSAGE FROM THE
**EXECUTIVE VICE CHANCELLOR
FOR HEALTH AFFAIRS**



Friday, July 23, 2021

The massive undertaking of revenue cycle conversion

Dear Colleague,

Health care delivery is complex and involves not just our clinical interactions, but vital business and administrative functions. We're constantly seeking ways to make things better for our patients and our workforce. Earlier this spring, after nearly three years of planning, MU Health Care went live with revenue cycle conversion in a project known as Project Rev-olution.

Revenue cycle is considered all the administrative and clinical functions that contribute to the delivery, capture, management and collection of patient service revenue. Essentially, it's a cycle that begins when a patient schedules a service to the final payment of that service.

Prior to our conversion, some clinical functions did not connect automatically to billing and collection, which could cause a delay. With a clinically driven revenue cycle, we have a higher level of automation and integration with our electronic health record. This means better communication and collaboration between our clinicians and our finance areas and ensures we have appropriate payment for all the services that we provide – which is critical to the health of our organization.

Conversion meant that we integrated the IDX patient accounting system we've used for years with Cerner's revenue cycle and practice management systems. This was no small feat. Leveraging two existing systems into one combined revenue cycle made MU Health Care a national trailblazer, all done with the backdrop of a global pandemic.

Project Rev-olution involved a massive effort to reverse the flow of interfaces, which some have likened to reversing the flow of the Mississippi River! Instead of using IDX for registration, and that information then flowing to Cerner applications and other systems, we had to reverse that flow of information. Now, Cerner is the source of truth that pushes registration and billing information to about 300 different applications.

The project team involved more than 200 MU revenue cycle and clinical staff, Tiger Institute staff, and Cerner consultants working tirelessly since July

2018. Currently, we're in the stabilization stage of the project. In a typical revenue cycle conversion — which ours was not — stabilization can take anywhere from six months to a year. Our MU Health Care and Tiger Institute teams continue to work at warp speed to not only resolve known issues but also collaborate together on hurdles that are unique to MU and that can be adopted to other health systems that follow our path.

Because we have a unique relationship with Cerner through our Tiger Institute for Health Innovation, we served as a validation partner and provided input into the design of new workflows. This gave MU and Cerner an ongoing opportunity to refine the system before it is shared broadly with other Cerner clients and health systems.

Moving to the Cerner platform enabled us to expand and share our electronic health record and registration systems with our partners at Capital Region Medical Center. CRMC went live with the Cerner EHR, registration and patient accounts products in June. This is an important step in building a better system of care to benefit patients and providers in mid-Missouri.

Thank you to everyone who has worked so hard to make this conversion a reality. You've changed the course of a mighty river!

Sincerely,



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A MESSAGE FROM THE
**EXECUTIVE VICE CHANCELLOR
FOR HEALTH AFFAIRS**



Friday, July 9, 2021

The intersection of arts and healing

Dear Colleague,

Art has many purposes. For artists, it is a way to express how they perceive the world. For viewers, it allows us to appreciate the beauty around us and gives us a glimpse into the mind of the artists creating these works. Many of the ideas in art reach into the realms of science and health, where most of us spend our time.

Throughout my academic career, I have looked for ways to connect artists, healers and scientists, and frequently have found a great deal of common ground for exploring these connections. In fact, we are having discussions like this as part of the NextGen Precision Health initiative. My chief of staff, Dr. Kim Kimminau, has been reaching out to artists on campus and has formed a NextGen+Arts committee to explore how NextGen Precision Health can be enriched by engagement with the arts. As we develop these connections, I'll be sharing more in future messages.

In the meantime, I wanted to make you aware of the **MU Museum of Art and Archaeology**. I toured the museum a few months ago when it was located at Mizzou North, and starting on July 12, it's on the move to the heart of our beautiful campus in Ellis Library. I'm an avid admirer of the arts and was honored to be able to tour the museum with Bruce Cox, interim museum director, and Dr. Cooper Drury, now interim dean of the MU College of Arts and Sciences.



Among my favorite pieces was the "Portrait of a Lady," by the follower of Pieter Pourbus, Dutch/Flemish, 16th Century. I'm seen here with Bruce Cox, interim museum director.

The museum houses an impressive collection of beautiful and interesting pieces of arts and specimens of archeology. There are amazing figurine sculptures from the Mycenaean Greek period, 1200 BC, and a treasure trove of other items from Ancient Greece. This is in large part due to a husband/wife duo who were founders of the museum and led the museum for more than two decades, Drs. Saul and Gladys Weinberg, who were experts in the field of the Ancient Greece art and amassed a world-class collection during their careers at MU. At the other end of the spectrum there is a great deal of relatively modern art including a significant collection of Andy Warhol pieces.



Mary Hindle, senior director of education for health affairs, poses with the Athena Velletri, one of several large plaster casts of famous ancient sculptures.

Another extraordinary room in the museum houses huge plaster casts of very famous ancient sculptures, many from the Louvre in France and some from the friezes of the acropolis housed in the British Museum in London. Standing in this room is a major art experience. My understanding is that we are still looking for a home for these amazing large plaster pieces as they will not fit into the new space in the Ellis Library. So, anyone with some good ideas, let the School of Visual Studies know!



In addition to the art on display, the museum many pieces in storage. Seen here is Dr. Kim Kimminau, chief of staff, along with Mary Hindle and Bruce

Cox.

The Museum of Art and Archeology has been a fixture at Mizzou since 1961 and before that was an extensive study collection as early as 1897. The museum has resided in several locations over the years. I hope when it is once again relocated on the main campus, many more of you will be able to explore the incredible art in the collection as we explore the intersection of arts and healing.

Sincerely,



Richard Barohn, MD
Executive Vice Chancellor for Health Affairs
University of Missouri
rbarohn@health.missouri.edu



University of Missouri

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A MESSAGE FROM THE
**EXECUTIVE VICE CHANCELLOR
FOR HEALTH AFFAIRS**



Friday, June 25, 2021

**Discovery Ridge at Mizzou: A unique NextGen Precision Health resource
and one of a kind in the USA**

Dear Colleague,

Not many at MU are aware of the truly unique research facilities we have here on our campus that make us a global center for animal research. Animal model research uses similarities between humans and other species to understand biological processes and develop disease therapies that would not be otherwise possible.

I visited Discovery Ridge in December to get a tour of two unique NIH-funded research centers at Mizzou that enable our investigators and other scientists around the country and world to take on leading edge scientific biologic discovery: the Mutant Mouse Resource and Research Center (MMRRC) and the Rat Resource and Research Center (RRRC).

In my field of specialization, neuromuscular disease, astonishing treatments have been developed in the last 20 years that have dramatically changed the outcomes of patients who inherit damaged and mutated genes that can result in death. Two such examples are spinal muscular atrophy (SMA) and Duchenne muscular dystrophy. Scientists have been able to produce animal models of both of these diseases to show that various types of gene therapy can slow down, and in some cases essentially stop, disease progression.



Pictured, from left to right, are Dr. Craig Franklin, MMRRC co-director; myself; Dr. Elizabeth Bryda, RRRC director; Dr. Bill Fay, senior associate dean for research at the School of Medicine; Dr. Chris Lorson, associate dean for research and graduate studies in the College of Veterinary Medicine; and Dr. Jim Amos-Landgraf, MMRRC co-director.

MU is home to four NIH-funded animal model resource centers of global importance, making it an essential part of the NextGen Precision Health pipeline that will efficiently transform research findings into clinical therapy. The centers encompass the major animal models used in research:

- the National Swine Resource and Research Center (NSRRC) and the Swine Somatic Cell Genome Editing Center, led by Randall Prather, PhD, and Kevin Wells, PhD
- the RRRC, led by Elizabeth Bryda, PhD
- the MMRRC, led by Craig Franklin, DVM, PhD, and Jim Amos-Landgraf, PhD

Researchers around the world are dependent on these facilities to serve as primary repositories and distribution systems for rodent and porcine research models that are critical to biomedical research.

Three related programs housed at Discovery Ridge include:

- the MU Comparative Medicine Program, a program that trains the next generation of scientists, under the direction of Dr. Franklin, Erin O'Connor, DVM, MS, and Dr. Bryda
- the MU Metagenomics Center (MUMC), where DNA samples from animal models can be stored and analyzed, under the direction of Aaron Ericsson, DVM, PhD
- the MU Animal Modeling Core (AMC), where genetically engineered animals can be created, under the direction of Dr. Bryda

MU is a national leader in comparative medicine, collaborating to share discoveries, innovations, and treatments for animals and humans. Under the leadership of Dean Carolyn Henry, DVM, MS, ACVIM (Oncology), the MU College of Veterinary Medicine is an essential partner in this research.

We also have an industry partner in the facility, IDEXX BioAnalytics, a diagnostic lab which was developed at MU and provides services to laboratories around the country to ensure their animals are free of microbial contaminants.

This expertise empowers NextGen Precision Health by providing animal models for human disease, technical expertise to investigators and services for testing therapeutics in pre-clinical animal models. It is only by having assets like these that scientists have the resources to take on extraordinary research challenges. With these tools, we have demonstrated they can succeed. This is NextGen Precision Health at its finest.

Sincerely,



Richard Barohn, MD
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University of Missouri

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A MESSAGE FROM THE
**EXECUTIVE VICE CHANCELLOR
FOR HEALTH AFFAIRS**



Friday, June 11, 2021

The importance of nutrition and exercise to health

Dear Colleague,

Last month, I made a wonderful visit to the Nutrition and Exercise physiology research unit in Gwynn Hall. I had heard about this gem since I arrived at MU and was excited to visit the MUNCH (MU Nutritional Center for Health) and the PAW (Physical Activity and Wellness) Center. These two adjacent units work very closely together and are examples of true team science where research faculty and staff from a variety of disciplines come together to discover new pathways to health.

Dr. Elizabeth Parks helped set up this tour and was there to greet me and my chief of staff, Dr. Kim Kimminau, and our vice chancellor for research, Dr. Tom Spencer. We got a wonderful orientation to the nutrition kitchen by research chef Kenny Williams. He explained how he and his staff can prepare food for research studies designed by MU faculty for subjects with various disorders such as diabetes, hypercholesterolemia, hypertension and cardiac disease. These meals are part of research protocols and the food needs to be prepared exactly per the protocol for the research studies. However, the study won't be successful if the participant doesn't like and eat the food. Thus, Kenny helps our faculty by bridging scientific needs (low-fat or high-fiber diets) with palatability, taste and visual appeal.



I'm joined here in the MU Nutritional Center for Health (MUNCH) by Kenny Williams, a research chef and the facility's manager, and Dr. Tom Spencer, vice chancellor for research.

Sometimes the subjects can come into the MUNCH to meet with the study teams in a communal dining space, but also the prepared food can be taken to wherever the faculty researcher is interacting with the subject. This could be in the Clinical Research Center at University Hospital or really any site on campus where patient-related research is occurring. Eventually, research meals will be transported to the new Clinical Translational Science Unit in the new NextGen Precision Health building. The MUNCH kitchen facility also has a unique drive-up feature so if the subject prefers, they can drive up to the building, text the kitchen staff, and pop their trunk to receive their cooler full of food. MU is very likely the only research kitchen in the nation that has the convenience of drive-up service.



The MU Physical Activity and Wellness (PAW) Center houses equipment like this BOD POD to help researchers understand how nutrition and exercise affect health. I'm seen here with Rebecca Shafer, a human clinical research specialist.

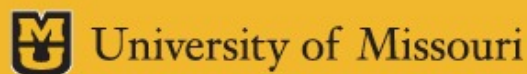
A number of the research protocols involve both nutrition and exercise, and down the hall from MUNCH is the PAW Center. PAW is run by Rebecca Shafer, a human clinical research specialist, under the direction of Dr. Jill Kanaley, an exercise physiologist and interim chair of the Department of Nutrition and Exercise Physiology (NEP) in the College of Agriculture, Food and Natural Resources (CAFNR). The Center has several outpatient exam rooms for subject interactions, a BOD POD and a DEXA (both pieces of equipment to measure how much muscle and fat a person has), a variety of exercise physiology testing devices, and finally a hot tub. Why a hot tub? Research being led by Dr. Jaume Padilla, an associate professor in NEP, is testing the influence of chronic passive heating on peripheral vascular function in patients with Type 2 diabetes.

We spend so much time in health care delivery and research focusing on medications and devices. We often forget that a crucial component of health is nutrition and physical activity, particularly exercise. It is wonderful that these facilities on the MU campus support the work of nationally recognized faculty who are committed to exploring the contribution of nutrition and exercise to health. The MUNCH and the PAW are key components of the clinical translational research infrastructure on our campus and are essential elements of the NextGen Precision Health initiative. Precise nutrition discovery research and precise exercise physiology investigations will allow our researchers to understand health and disease at a much deeper level and allow us eventually to deliver the right intervention to the right person at the right time.

Sincerely,



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A MESSAGE FROM THE
**EXECUTIVE VICE CHANCELLOR
FOR HEALTH AFFAIRS**



Friday, May 28, 2021

Reflections on year one as your EVC

Dear Colleague,

Looking back over my last year as your executive vice chancellor for health affairs, the first thing that comes to mind is that I have been able to meet so many great people in so many areas of our university. I have enjoyed visiting units across not only MU Health Care, but the entire campus. I have seen firsthand the importance of collaboration and the importance of a collective vision to move Mizzou ahead.



Our commitment to save and improve lives extends beyond the care we deliver within our facilities. Hundreds of employees from across our health system came together on June 5, 2020, for a demonstration against hatred, discrimination and prejudice.

You have shown me the amazing depth and breadth of talent and range we have here at Mizzou. From the journalism school to the College of Arts and Science, to the amazing art museum currently in Mizzou North (soon to be moved to our main campus), to the research facilities at Discovery Ridge and the Physical Activity and Wellness (PAW) nutrition and exercise facilities in Gwynn Hall, we have teams who are doing exceptional work to improve the health of our society.



Thanks to our efforts to partner with our community to provide COVID-19 vaccinations, Boone County has the highest vaccination rate in the state.

I have also seen how resilient our health care team is in pivoting and responding to the challenges of COVID-19. And through my role as the executive director of NextGen Precision Health, I have been able to meet even more talented faculty and staff not only in Columbia, but at our other University of Missouri campuses in Kansas City, St. Louis and Rolla. I have been to our Springfield Clinical Campus, now under the leadership of Associate Dean Dr. David Haustein. I am excited that our School of Medicine has established Springfield as an important component in our education model. Throughout our system, we have seen a tremendous infusion of new talented faculty that will drive our three mission areas of clinical service, education and research.



Our Class of 2021 School of Medicine was able to gather for a safe in-person commencement ceremony on May 16, 2021.

I have been able to meet with our very close partners in Jefferson City at Capital Region Medical Center and look forward to even tighter integration with that outstanding hospital and physician group. Another eye-opening experience is the University of Missouri's constant success in partnering with large health-related companies like Cerner in our Tiger Institute for Health Innovations and Siemens Healthineers. We are very well positioned for

strategic partnerships and teamwork — so much so that it seems like Mizzou is the partnership capital in the Midwest.



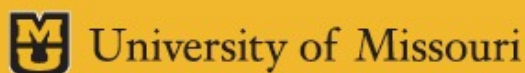
Our community has so much to offer. I was recently able to attend my first Mizzou baseball game with my wife, Rhonda, and our grandson Isaiah.

It has been a whirlwind of activity over the last 365 days and I have enjoyed every one of them. Oh, and finally, Rhonda and I love Columbia. She recently told me she doesn't see how we could ever live in Kansas City or a big city again. We understand what everyone has been saying, too, all along about what a great place Columbia is to live!

Sincerely,

Richard Barohn, MD
Executive Vice Chancellor for Health Affairs
University of Missouri
rbarohn@health.missouri.edu

P.S.: If you missed a previous EVC newsletter, did you know you can see each issue by clicking “Issue archive” at the bottom of this email?



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A MESSAGE FROM THE
**EXECUTIVE VICE CHANCELLOR
FOR HEALTH AFFAIRS**



Friday, May 21, 2021

Recognizing our graduating medical students and service members

Dear Colleagues,

Graduation week is always a special time. We hosted a wonderful celebration for the 122 students who became medical doctors on May 16. Please take a moment to learn about the [Class of 2021](#) and see this [video coverage of the event](#). While many of us are familiar with commencement, I would like to share with you another ceremony that took place last weekend for five medical students who are also in the United States military. The Military Promotion Ceremony is a time when these students are promoted from the military rank they held during medical school to the rank they will hold as they enter the next phase of their careers as an intern at a military teaching hospital.

This year, the medical students being promoted were:

- Savannah Pounds, Ensign USN, who will be serving in family medicine at Naval Hospital Camp Pendleton in Oceanside, California
- Alec Maglione, 2LT USA, who will be serving in emergency medicine at Madigan Army Medical Center in Joint Base Lewis-McChord, Washington
- Levi Marshall, 2LT USA, who will be serving as a transition year physician at Tripler Army Medical Center in Honolulu, Hawaii
- Jacob Sanders, 2LT USAF, who will be serving in family medicine at David Grant Medical Center at Travis Air Force Base in Fairfield, California
- Ally Vogt, 2LT USAF, who will be serving in pediatrics at San Antonio Military Medical Center in Texas



Pictured left to right: Dr. Alan Tong, Levi Marshall, Alec Maglione, myself, Jacob Sanders, Ally Vogt, Savannah Pounds and Dr. Stephen Brietzke.

These students are part of the United States Military Health Professions Scholarship Program (HPSP). The students applied to join one of the military branches at the beginning of medical school four years ago. It is a rigorous selection process and only the best and brightest medical students are admitted. During medical school, the students are a Second Lieutenant (Air Force and Army) or Ensign (Navy). Students spend time in the summer for medical officer orientation and can also complete electives at military training hospitals during medical school.

Upon graduating medical school, they are promoted to Captain (Air Force and Army) and Lieutenant, Junior Grade (Navy). As a resident at a military hospital, they are both a newly minted MD and a recently promoted officer. After completing residency, the doctor/officer is deployed to practice medicine at a military base somewhere in the world. After residency, they serve four years (corresponding to the four years of medical school) and can then resign from the military or choose to stay in the reserves while they begin their civilian career.

I am very familiar with this drill because I did it myself! At the University of Missouri-Kansas City School of Medicine in 1976, I applied for and was accepted into the U.S. Air Force HPSP and was sworn in at the military induction center in Kansas City as a Second Lieutenant. Upon graduating in 1980, I became a Captain and did my internship at Wilford Hall U.S. Medical Center (WHMC) in San Antonio, Texas. After that internship year, I served as a general medical officer (essentially a general practitioner) at a small U.S. Air Force base in England for two years.



Here I am as a Major in the U.S. Air Force in 1986.

After that wonderful experience, I went back to WHMC and completed my neurology residency. During my residency, I was promoted to a Major and the Air Force sent me to Ohio State University to do a one-year neurology fellowship. I then finished my final two years of active duty back in San Antonio, practicing neurology and training the next generation of Air Force neurology residents. When I finished my active duty in 1989, I elected to stay in the reserves and spent parts of the summer at the WHMC as well as occasional duty throughout the year. I retired in 2000 as a Lt. Col., USAFR.

I was honored to give opening remarks at the ceremony and emphasize lessons I learned from my time in the military, such as the military's focus on equity and inclusion. Dr. Stephen Brietzke, Col. (Ret) USAF, shared additional remarks as he had served as the students' military adviser during medical school. Promotions were administered by Dr. Alan Tong, Captain (Ret) USN, who inducted some of the medical students into the military when they first joined. In a moving show of respect, a family member then removed the old insignia and pinned on the new insignia.

My time in the military reinforced the need to have both structure and a mission in everything that you do. I carried these lessons with me throughout my career as a physician, academic and administrator. Most medical students, and in fact very few U.S. citizens, choose to voluntarily join the military. But for those that do, it can be a very special journey and can add immeasurably to one's career and mission in life. It did for me.

Congrats to these graduating service members! You are now both doctors and officers in the U.S. Medical Command of the U.S. Military. Good luck on your careers and thank you for your service!

Sincerely,

Richard Barohn, MD
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A MESSAGE FROM THE
**EXECUTIVE VICE CHANCELLOR
FOR HEALTH AFFAIRS**



Friday, May 14, 2021

Celebrating our heroes!

Dear Colleagues,

It was an exciting two weeks across our health system as we celebrated both Nurses Week (May 6-12) and Hospital Week (May 9-15). I've been continually impressed by the dedication and compassion of our nurses, physicians, staff and every person in our health system. It's been a privilege to see your heroic efforts touch our community in so many ways. It was an honor to highlight and celebrate all you do.

In 2020, we weren't able to celebrate Hospital Week in-person due to the pandemic, but this year we gathered through a mix of safe in-person and virtual events. It was a great opportunity to meet and thank more of the heroes we have serving our health system.



Take a moment to [watch this video](#) that provides a snapshot of how our teams banded together over the last year.

Millions of lives have been lost to COVID-19, and we witnessed first-hand the devastating effect the pandemic has had on our community. For all of us — whether we lost loved ones or saw them struggle with their health — it's been a tough journey. On Thursday, May 13, we held a COVID-19 Commemoration Ceremony on the lawn between Parking Structure 7 and the Missouri Orthopaedic Institute. This was an opportunity to remember those we lost

during COVID-19; show gratitude for our employees; and share our hope and optimism for the future.

Our commemoration ceremony provided a sense of closure that I feel many of us have been missing over the last year. I'm so grateful to our **Office of Clinician Well-Being** and our colleagues with Human Resources for organizing the event. If you were not able to join the ceremony, please set aside time to **watch this recording of the event**. It was a beautiful memorial that helped recognize not just the impact of the pandemic on a professional level, but also on an emotional level. This time of reflection is something we all need, whether we consciously recognize it or not.



*It was an honor to join our health system in a time of reflection during our COVID-19 Commemoration Ceremony. If you weren't able to join us on Thursday, please take a moment to **watch the ceremony**.*

Everyone within our academic health system has had a difficult year, but we got through this as a team. Our all-hands-on deck approach to this pandemic filtered down to every single phase of our hospital operations. You made a profound difference in our community. Thanks to you, we are on a renewed path for success.

Thank you, and happy Nurses Week and Hospital Week!

Sincerely,

Handwritten signature of Richard Barohn.

Richard Barohn, MD
Executive Vice Chancellor for Health Affairs
University of Missouri
rbarohn@health.missouri.edu

P.S.: Though Nurses Week and Hospital Week are wrapping up, keep this spirit of gratitude and celebration alive by **sending your colleagues Kudos** to recognize them for a job well done.

A MESSAGE FROM THE
**EXECUTIVE VICE CHANCELLOR
FOR HEALTH AFFAIRS**



Friday, April 30, 2021

A bridge between clinical medicine and biomedical science

Dear Colleagues,

Did you know we have a state-of-the-art Clinical Research Center (CRC) here on our campus? It is located on the fifth floor of University Hospital and the School of Medicine in a corridor that connects the hospital and the school. This is a fitting location as the center serves as a bridge between clinical medicine and biomedical science. The CRC is an important component of the infrastructure that allows our faculty to engage in cutting edge medical research with the involvement of participants from our clinics and community. Most large academic medical centers have some form of a centralized clinical research unit, and MU is no exception.

Our CRC contains an advanced Phase 1 clinical trials unit and five inpatient beds that allow research participants to stay overnight for research protocols that require a prolonged visit. These rooms can also be used during the day for shorter research encounters. In addition, there are three outpatient exam rooms, an exercise physiology room, a metabolic kitchen and a bone density scan room.



The Clinical Research Center brings together various disciplines all with the goal of advancing science. I'm seen here with Jennifer Anderson, RD, LD, clinical research dietitian (left), and hepatology fellow Naren Nallapeta, MD (right).

The CRC is a component of the MU Institute for Clinical and Translational Science (MU-iCATS), which is led by William Fay, MD, senior associate dean for research at the School of Medicine. S. Hasan Naqvi, MD, serves as medical director, and Tami Day, DNP, RN, is the nurse manager. Dyann Helming, MSN, APRN, ACCNS-AG, CCRC, director of research operations and planning, plays a key role in connecting clinical investigators to the CRC and its many outstanding services.

I was invited to the CRC by Elizabeth Parks, PhD, who wanted me to see the unit and how her research team and MU Health Care staff were working together on a complicated protocol with a volunteer who has fatty liver disease. Dr. Parks has a significant National Institutes of Health-funded project that is exploring many aspects of how the body reacts to chronic liver disease. The other principal investigators leading this project are Jamal Ibdah, MD, PhD, and Scott Rector, PhD.



The CRC brings scientific discovery to the realm of patient care by supporting patients, volunteers and researchers who participate in clinical trials and other forms of clinical research.

The participant is asked to eat a standardized diet structured by our research dietitians and prepared in the metabolic kitchen. Blood is drawn and various images of the liver are obtained by collaborator Ayman Gaballah, MD, in the Department of Radiology. One aspect of this protocol involves infusion of insulin to determine how insulin sensitive the participant is.

When I visited, there was a lot of activity and the research participant was smiling and resting comfortably in the hospital bed. Tami was going over the protocol with a member of the research team, a hepatology fellow was there to assist, and the dietitian was preparing the food in the metabolic kitchen. It was a controlled whirlwind of research activity and was very impressive to witness.



Investigators like Dr. Scott Rector take a translational approach to examining chronic conditions. Here, he's working with a research participant in the exercise physiology room of the CRC.

I have been involved with many clinic research units at various universities. At The Ohio State University, the University of Texas at San Antonio and Dallas, and the University of Kansas, I brought several CRCs online. Most of my academic career has been spent in leveraging the infrastructure of these units to perform clinical trials that are pushing the discovery envelope to tackle difficult and challenging medical disorders. The MU CRC is a top tier unit with outstanding personnel and infrastructure.

I want to commend our CRC research team and our brilliant investigators like Dr. Parks and their teams. If you have not seen our CRC, I encourage you to reach out to [Tami](#) to request a tour. They are doing great work in expanding our knowledge of complex medical conditions, which is certainly in line with our joint mission of MU Health Care and the School of Medicine to save and improve lives – through exemplary education, research and patient care.

Sincerely,

Richard Barohn, MD
Executive Vice Chancellor for Health Affairs
University of Missouri
rbarohn@health.missouri.edu



University of Missouri

MU Health Care | NextGen Precision Health | School of Medicine

A MESSAGE FROM THE **EXECUTIVE VICE CHANCELLOR FOR HEALTH AFFAIRS**



Friday, April 16, 2021

Recognizing Our Health Care Heroes

Dear Colleagues,

On Monday, President Choi and our colleagues on campus joined in recognizing Health Care Heroes Day. If you haven't had a chance to see [this message](#) from President Choi, I would highly recommend you take a moment to watch his video of gratitude to our health care heroes across our academic health system.



I was honored to join President Choi and Dean Steven Zweig on Monday to recognize employees who are on the frontlines of the pandemic. It was inspiring to visit the Medical Intensive Care Unit (MICU) — our main COVID-19 intensive care unit — and the Progressive Care Unit (PCU) — one of our primary COVID-19 non-ICU units — to personally thank our great nurses, techs and other providers. They were the tip of the spear in our fight against COVID-19. Without their courage, commitment

and skill, we would not have been able to care for our community in its greatest time of need.

In November, President Choi and I joined other leaders in rounding on these units. At that time, these units were very busy as they were the frontlines of the pandemic. When we rounded on Monday, we had only one COVID-19 positive patient admitted to our intensive care unit. This is a far cry from the peak of 91 COVID-19 positive patients we had admitted across MU Health Care on Dec. 21!



Employees like those on our MICU were the tip of the spear in our fight against COVID-19.

It was so heartening to hear that the daily struggles and stresses of the pandemic have eased up. In November, we heard of the mental stresses and the toll social distancing and heavy workloads were taking on family dynamics. I spoke with Jessica Walker, RN, service line supervisor, and Kimberly Egan, MHA, RN, service line specialist, who shared with me how the vaccine has brought new hope to the PCU. They said that since rolling out the vaccine, the light at the end of the tunnel has come into clearer focus and employees have been able to reconnect with family. That is so important, and I'm immensely thankful for every hero who has helped us reach this point.



From left to right: Jessica Walker, RN, service line supervisor; myself, President Choi; Kimberly Egan, MHA, RN, service line specialist; Dean Zweig and Thorne Cheney, RN, staff nurse, on the Progressive Care Unit.

Troy Whitacre, RRT, RRT-ACCS, clinical coordinator on the MICU, asked how our COVID mortality compared to our peers. Based upon comparative data from Vizient, MU Health Care mortality for patients with COVID-19 is 40% better than expected when adjusted for severity of illness. That's incredible and shows just how well our teams cared for these patients!

Our staff who cared for patients during an uncertain and, frankly, frightening time truly are heroes in every sense of the word. Your impact on our community was immediate and is so appreciated. I hope that as you look back, you have a tremendous sense of pride and accomplishment. I'd like to echo what President Choi shared: we owe you our lives!

Sincerely,



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University of Missouri

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A MESSAGE FROM THE
**EXECUTIVE VICE CHANCELLOR
FOR HEALTH AFFAIRS**



Friday, April 2, 2021

Bringing hope to our community

Dear Colleagues,

When the reality of the pandemic began to set in last year, many of us were in desperate need of hope. Employees across our health system responded with tremendous bravery and resolve to help us persevere through one of the most challenging times we could imagine. Now, the hope that we longed for is here. Thanks to the stellar work of our COVID-19 vaccination team, it's being injected into the arms of Missourians.

I was recently able to tour MU Health Care's vaccination site at Faurot Field. I was joined by Congresswoman Vicky Hartzler, who was impressed with the scope and efficiency of the site. She commended our team for working together to overcome obstacles to create our vaccine site. Please take a moment to [read Rep. Hartzler's reactions](#) to her visit, where she outlines our streamlined process for getting a person in and out in a mere 15 minutes.



Thank you to everyone who has made our vaccination site possible.

Many of us received our COVID-19 vaccination through our team in Employee Health, which did an outstanding job vaccinating members of our academic health system. For those who haven't been able to see our Faurot Field

vaccination site in action, it truly is a sight to behold. Located in the Walsworth Family Columns Club, the vaccination site offers more than 10,000 square feet of available space to ensure social distancing. Stations are clearly identified each step along the way to ensure a clear, efficient flow of traffic. Take a moment to [watch this video](#) walkthrough of a visit to the site.



L to R: Tom Greenlee, retail pharmacy manager; Jonathan Curtright, MU Health Care chief executive officer; Congresswoman Vicky Hartzler; Brad Myers, executive director of pharmacy and laboratory services; and Dr. Richard Barohn, executive vice chancellor for health affairs.

Brad Myers, executive director of pharmacy and laboratory services; Tom Greenlee, retail pharmacy manager; Athena Bouras, practice manager; and Jeanette Linebaugh, senior director of ambulatory care services, created a process that — depending on availability and type of vaccine — can vaccinate up to 5,000 people a day. They took what could have been a logistical nightmare and developed a system that's more like a dream come true. Using their knowledge of running flu vaccine clinics, their teams worked for countless hours behind the scenes starting late last year to bring our vaccination site online.



It was an honor to host Rep. Hartzler at our vaccination site.

The numerous meetings throughout the day, evenings and weekends have paid off, and our entire state is reaping the benefits of their work. We have administered the COVID-19 vaccine to more than 28,000 people and counting. The hope that we all need is here, and we are immensely grateful to our teams for making it a reality.

Take a moment to hear from these community members who **shared their experiences** with the process — from scheduling and parking to the shot itself. I could not be more proud of everyone who played a role in launching our vaccine site. This is a national model for how these sites should be run. Bravo!

Sincerely,



Richard Barohn, MD
Executive Vice Chancellor for Health Affairs
University of Missouri
rbarohn@health.missouri.edu

P.S.

Have you been vaccinated yet? Our employees who are in a front-line, patient-facing role, including clinical learners and faculty, please **fill out this form** for instructions on how to get vaccinated. Community members may visit muhealth.org/covid19-vaccine-scheduling to sign up.



University of Missouri

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A MESSAGE FROM THE
**EXECUTIVE VICE CHANCELLOR
FOR HEALTH AFFAIRS**



Friday, March 19, 2021

**Remembering Dr. Patricia Bath for Women's History Month:
Ophthalmologist, inventor and humanitarian with many firsts**

Dear Colleagues,

I recently became aware of a physician, educator and inventor, Dr. Patricia Bath (1942-2019). For those of you who do not know her remarkable story, I felt compelled to share it with you during Women's History Month.

Patricia Bath was born in Harlem and was recognized early as being gifted. Her father was the **first** Black motorman for the New York City subway system. He served in the U.S. Merchant Marines, traveled the world and was an occasional newspaper columnist. Her mother was a homemaker and a domestic worker who used her earnings to make sure her children had an excellent education. Both parents encouraged Patricia to excel in school, and with their support she attended Charles Evans Hughes High School in New York.

As a student, Patricia was selected for a National Science Foundation summer research program in biology at Yeshiva University. When classes were over, she worked in a cancer lab. Patricia became part of the science team, analyzing experimental data, and developed a math equation to predict cancer cell growth. Her mentor, Dr. Robert Barnard, listed her as a co-author on a research report. This led to her receiving Mademoiselle magazine's Merit Award in 1960 at age 17 (1).

She was off to a fast start. After attending Hunter College in New York City, she went to medical school at Howard University, where for the first time she was exposed to Black professors who became her mentors. At Howard, she received several National Institutes of Health student fellowships and spent a summer in Yugoslavia on a children's health project. She became motivated to help disadvantaged people and served as a medical coordinator for the Poor People's Campaign that marched in Washington, D.C., for economic rights in 1968.



After medical school, she interned at Harlem Hospital followed by an ophthalmology residency at Columbia University. As an ophthalmology trainee in New York City, she learned that African Americans had a high frequency of blindness due to glaucoma, cataracts and other disorders. She performed community-based research by establishing an eye clinic system that increased the amount of eye care to those who could not afford to see medical professionals (2). When Dr. Bath graduated from the ophthalmology residency program in 1973, she was the **first** African American to complete a residency in ophthalmology in the United States.

Her career took her to California as an assistant professor of surgery at both Charles R. Drew University and at the University of California, Los Angeles, where she became the **first** female faculty member in the Department of Ophthalmology and the **first** African American woman to serve on staff as a surgeon at UCLA Medical Center. In 1976, she co-founded the American Institute for the Prevention of Blindness (AIPB), which proclaimed that “eyesight was a basic right.” In 1977 and 1978, she served on the White House Counsel for National and International Blindness Prevention Program. Then in 1983, she had another **first** when she created the ophthalmology residency training program at UCLA-Drew, becoming the **first** woman to lead a post-graduate training program in ophthalmology.

That is a lot of **firsts**, but Dr. Bath was not done. Laser surgery for cataracts was in its early stages and she wanted to learn more. In 1981, she went to the Rothschild Eye Institute of Paris and then to the University of Berlin where she became a laser researcher. She did experiments with excimer laser photoablation on human eyes in eye tissue banks. She invented the term “Laserphaco” for the process, which is short for laser PHotoAblative Cataract surgery.

As a result of her research and investigations, she developed a less painful and more precise device called the Laserphaco Probe to ablate and remove cataracts (3). In 1988, she was awarded a patent for this instrument, becoming the **first** African American female doctor to receive a patent for a medical invention. The Laserphaco produces a powerful concentrated beam that quickly and painlessly dissolves a cataract with a laser, irrigates and cleans the eye, and permits the easy insertion of a new lens. The device is now used throughout the world. The Laserphaco is responsible for improving and restoring sight to thousands of people. Dr. Bath continued to improve on her device and had additional patents awarded in 1998, 1999, 2000 and 2003.



In 1993, she retired from UCLA and became the **first** woman elected to the honorary staff of UCLA Medical Center. She returned to Howard University, where she was named a “Howard University Pioneer in Academic Medicine” in 1993. Hunter College had previously placed her in its Hall of Fame in 1988. A children’s book on her life and work was published in 2017 (5). Through the AIPB, she traveled the world performing surgeries, teaching and lecturing at universities. In Africa, the AIPB provided computers and other resources for visually impaired students. In recognition of her philanthropy, President Obama placed her on his commission for digital accessibility for blind children. In 2019, Dr. Bath testified about gender disparities in the STEM field and lack of female inventors in a hearing called “Trailblazers and Lost Einsteins: Women Inventors and the Future of American Innovation” (6).

In 2017, Medscape named her one of 12 “Women Physicians who Changed the Course of American Medicine” (7). In the same year, another **first** as Time magazine highlighted her in their “Firsts: Women who are Changing the World” for being the **first** to invent and demonstrate Laserphaco cataract surgery (8).

Dr. Bath died in 2019 at age 76. Recently, I came across a story of how her children were lobbying to have her inducted into the National Inventors Hall of Fame, the most prestigious society for inventors in the United States (9). The sad reality is that she was nominated 11 times before she died! One can only wonder why she was never elected into this society while she was alive. Apparently, the society does not give the award to inventors posthumously. Her children are trying to get this changed, and [this video](#) provides a look into those efforts. I suspect it will be another **first** for this remarkable woman.

Sincerely,

A handwritten signature in cursive script, appearing to read 'Ruth'.

Richard Barohn, MD
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A MESSAGE FROM THE
**EXECUTIVE VICE CHANCELLOR
FOR HEALTH AFFAIRS**



Friday, Feb. 26, 2021

Percy Lavon Julian, PhD - The Man Who Wouldn't Give Up

Dear Colleagues,

In my [Feb. 12 EVC message](#), I shared the story of Vivien Thomas, an incredibly bright and skilled laboratory technician who had to take a role behind white physician Alfred Blalock in the operating room as he struggled as a Black man in the scientific world. He is indeed a scientific hero worthy of honor in Black History Month. Let me tell you the story of another Black pioneer in health care science that has touched millions of lives but who you may never have heard of.

The scientific breakthroughs pioneered by a man named Percy Lavon Julian, PhD, over the course of his remarkable life have improved the lives of people around the world, including patients in my own clinic.

He was born in Montgomery, Alabama, in 1899. Early in life, Julian decided to be a chemist, but society was not on his side. He recalled an experience in which a white police officer chased him off school grounds as he watched young white boys conducting chemistry experiments in a school he could not attend because he was Black. Julian attended the State Normal School for Negroes, where he excelled and graduated at the top of his class before he was admitted to DePauw University in Greencastle, Indiana.

Even there, he was confronted with discrimination. The dean tried to discourage him from majoring in chemistry, but he persisted and graduated as valedictorian. Still, he faced discrimination. He applied to graduate school at DePauw and at many other institutions around the country but was denied admission based on his race.



Percy Julian is seen here in this 1920 photo at DePauw University.

Julian took a position teaching chemistry at Fisk University, a historic Black university. He won an Austin Fellowship to attend Harvard, where he obtained a master's degree in organic chemistry, again graduating at the top of his class. However, while others were offered jobs as teaching assistants, Julian was not. He went to the West Virginia College for Negroes to teach chemistry and continued his career at another historic Black institution, Howard University, as an associate professor of chemistry.

In 1929, he was awarded a fellowship grant to study in Vienna, Austria, where he studied natural products chemistry and completed his PhD in organic chemistry. In 1931, he returned to Howard University as the head of the chemistry department. Dr. Josef Pikl, a Viennese colleague who he began working with as a doctoral student, also moved to Howard so they could continue working together.

Only then did DePauw University, which had previously rejected his graduate school application, ask him to return as a research fellow along with Dr. Pikl. From 1932 to 1935, they focused on coming up with a way to synthesize the compound physostigmine, a compound first isolated from the Calabar bean in the 1800s.

Extracts from the bean were shown to reduce intraocular pressure in the eye caused by glaucoma. However, no one had figured out how to synthetically make physostigmine, which was necessary to be able to provide a less expensive and larger supply of the drug. Dr. Julian and Dr. Pikl published a series of amazing papers culminating in the pivotal 1935 publication, "Studies in the Indole Series V. The Complete Synthesis of Physostigmine (Eserine)." This was the first complete synthesis of what is known in chemistry as an indole alkaloid. Since then, physostigmine and its many derivative compounds have been used to treat glaucoma and help millions of patients.

It turns out physostigmine is very helpful for a much rarer condition called myasthenia gravis. This skeletal muscle disorder is one of the diseases in

which I specialize. In 1934, British physician Mary Walker discovered that physostigmine can make muscles stronger in patients with myasthenia gravis, but obtaining naturally occurring physostigmine was very difficult. Once this compound could be made synthetically using the discovery of Dr. Julian and his colleagues, physostigmine and its derivatives became the standard treatment for myasthenia gravis.

I still use a related drug called pyridostigmine with almost all of my myasthenia gravis patients. Drugs that are derivatives of physostigmine are used for many other conditions, such as Alzheimer's disease. This all is due to Dr. Julian and his team.

His career took him into industry, where he joined the Glidden Company in Chicago as their chief chemist and director of research, specializing in soybean products. His career with Glidden was spectacular. While there:

- His laboratory was the first to extract the proteins from soybeans, which he called the "Alpha" proteins, and this became the basis for dozens of home and food products.
- He discovered a protein in soybeans could be used to coat paper and make it less flammable. This was then made into a fire retardant foam that was used extensively on ships during World War II. It's estimated that it saved the lives of thousands of sailors.
- He discovered a method to synthesize and scale up production of progesterone, a hormone useful in helping pregnant women prevent miscarriages. In a 1946 article in Readers Digest Magazine, Dr. Julian was coined "The Man Who Wouldn't Give Up."
- He used soybeans to develop a way to synthesize a substance called cortexolone that could then be converted to cortisone. This was a huge breakthrough in the treatment of patients with rheumatoid arthritis and led to his recognition as Chicagoan of the Year in 1950. This paved the way for the low-cost production of various compounds, including prednisone, which I use as a mainstay for treating autoimmune neuromuscular disorders such as myasthenia gravis, polymyositis and inflammatory neuropathy.

Others then discovered that Mexican yams (yes, the potato) were a plentiful source of progesterone and other steroids. Dr. Julian left Glidden to form his own laboratory, and through his study of yams, the cost of synthesized drugs like progesterone drastically dropped and became more widely available.

In 1961, Dr. Julian sold his lab for \$2.5 million and became one of the richest Black men in America. He retired from business, spending time as a public speaker and remaining socially active. He sought to advance conditions for Black people by helping to found the Legal Defense and Educational Fund of Chicago. He raised money for the NAACP Legal Defense and Educational Fund throughout the country. He financially supported Dr. Martin Luther King Jr. and the Southern Christian Leadership Conference.

He served on the board of several universities and in 1967 was appointed to the DePauw University Board of Trustees – the very university that denied his application to graduate school. In 1973, he was voted into the National Academy of Sciences. Following his death in 1975, DePauw University named the Percy L. Julian Science and Mathematics Center in his honor. In 1993, the

U.S. Postal Service issued a stamp honoring Dr. Julian for Black Heritage USA.



I would like to quote remarks by Dr. Julian regarding racial issues facing Black scientists:

“The ghetto gloom of apartheid is slowly but surely fading on the horizon. And a completely new day is dawning for the hitherto schizophrenic Negro scientist. As he is finding his way into university faculties, where his creative talents may find uninhibited outlet, his total intellectual integrity is taking mastery over the frustrating necessity to bolster his own waning spirits. He is slowing arriving; he has faith in himself; and he is becoming a calm, determined scholar-eager, anxious, and definitely destined to write new chapters in the history of discipline. Indeed he is doing so already! ... The Negro scientist now need neither starve nor be condemned to a frustrating intellectual ghetto if he chooses pure science as a career. It will be exciting to see the success of this new Negro intellectual in passing his experience and rebirth on to the less fortunate among his fellow men.”

He was such a remarkable man, but I did not know of Dr. Julian until very recently. I wrote an article that included a history of the use of drugs for myasthenia gravis, and my research did not turn up his name. But then I began researching the early use of steroid drugs for myasthenia gravis and I learned of the role of Dr. Julian and his role in the synthesis of both cortisone and physostigmine. Who knew? Not me. But it turns out PBS knew! After I began working on this message, my senior executive assistant Amanda Sebok discovered that a bio-documentary about Dr. Julian was made by PBS in 2007! I just watched it this week and learned much about Dr. Julian. [Check out this amazing video](#) and learn about the dozens of other soy products his Glidden team invented, from soy-based paint, cosmetics, salad oils, margarine, plastics, linoleum, dog food and soy cheese.

Dr. Julian is an inspirational and accomplished scientist worthy of even more renown. It's an honor to be able to share about his legacy this Black History

Month. If you'd like to learn more about Dr. Julian, please refer to the references below. Additionally, I've written an expanded article about his career and the hardships he faced throughout his life that I would be happy to share. If you'd like to request a copy, please reach out to [Amanda](#).

Sincerely,



Richard Barohn, MD
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A MESSAGE FROM THE
**EXECUTIVE VICE CHANCELLOR
FOR HEALTH AFFAIRS**



Friday, Feb. 12, 2021

Black History Month – The pioneering work of Vivien Thomas

Dear Colleagues,

There are so many ways one can contemplate the significance of Black History Month. I am a history of medicine buff and have been thinking about Black medical scientists who have had a remarkable impact in the medical field. Let me briefly retell the story of one of these pioneers of whom you may have heard. In the next EVC message later this month, I will tell you about another hero of mine I suspect will be a new story to you.

The hero you may have heard of is Vivien Thomas. A movie was made about his inspiring life called “Something the Lord Made.” Vivien was born in Louisiana in 1910 and grew up in Tennessee. He graduated from high school on the cusp of the Great Depression. His father was a carpenter and taught Vivien carpentry skills, but Vivien wanted to be a doctor. He began working in the medical research laboratory as a technician for Dr. Alfred Blalock, a cardiothoracic surgeon at Vanderbilt University, in 1930.



This portrait of Vivien Thomas was commissioned by his former surgical residents and was displayed prominently at Johns Hopkins.

He enjoyed the work but was paid very little. He soon learned why: his official job description was a janitor because he was Black. When he told Dr. Blalock he would have to leave due to his pay, Dr. Blalock obtained him a pay raise equal to white research lab employees. He became an indispensable member of Dr. Blalock's team because of his technical proficiency in the animal research laboratory and his work ethic.

Vivien and his wife and children moved with Dr. Blalock to Johns Hopkins Hospital in 1941 when he became the chief of surgery at that eminent institution. Shortly after arriving, Dr. Helen Taussig, a pediatric cardiologist, asked Dr. Blalock to think about how to do open-heart surgery on "blue babies" with fatal congenital heart abnormalities (the medical name for the anomaly is tetralogy of Fallot).

Open-heart surgery had never been performed on these patients before. Dr. Blalock put Vivien on the problem and he began thinking creatively about how to correct the abnormality. In dogs, he devised a way to suture an artery coming from the heart to an artery going to the lungs while the dog was anesthetized and while the heart was still beating. The surgeries on the dogs were successful. (The first dog was called Anna and her portrait can be found in books retelling this story.) Vivien also designed very small needles that could be used in the tiny chests of infants and surgical clamps to help stop bleeding in a very small space.

On Nov. 29, 1944, they were ready to try this procedure on a blue baby patient of Dr. Taussig's. All of the dog surgeries were performed by Vivien, not Dr. Blalock. Therefore, Dr. Blalock had Vivien stand directly behind him in the OR. They conversed quietly during the 90-minute operation as Vivien instructed Dr.

Blalock on the proper techniques to use. Viewers wondered: Who was the Black man giving Dr. Blalock instructions?

The baby survived and over the next two weeks, her lips and body turned from blue to pink. This heralded a new era in open-heart surgery and in the treatment of congenital heart abnormalities. Dr. Blalock did many more procedures and Vivien stood behind him coaching him as he did in the initial operation. The news of the miraculous procedure went international, however, all of the attention and credit went to Drs. Blalock and Taussig. Vivien was not even invited to a celebration party about the new procedure. In fact, when he walked through the halls of Johns Hopkins wearing a white coat, he was often looked at with suspicion because a Black man in the hospital was expected to wear a janitor's uniform, not a white medical coat.

After Dr. Blalock's death in 1964, Vivien would continue to operate the medical research laboratory for 15 more years and trained hundreds of surgeons to do open-heart surgery. He finally began getting the recognition he deserved late in his career. In 1969, the Old Hands Club, a group of doctors who trained under Vivien, commissioned a formal portrait of him that was displayed in the hospital across from Dr. Blalock's portrait. In 1976, Vivien was awarded an honorary degree by Johns Hopkins University and he was officially appointed an instructor in surgery. He retired in 1979 and died in 1985.

Vivien Thomas was never able to make it into college or medical school. He and his family endured segregation in Tennessee and Maryland throughout their lives. Nevertheless, he used his talents in an amazing way to advance medicine. About 40,000 babies are born each year with heart problems. Because of the creative thinking, surgical skills and tenacity of Vivien Thomas, many of these children now have a chance to live.

Sincerely,

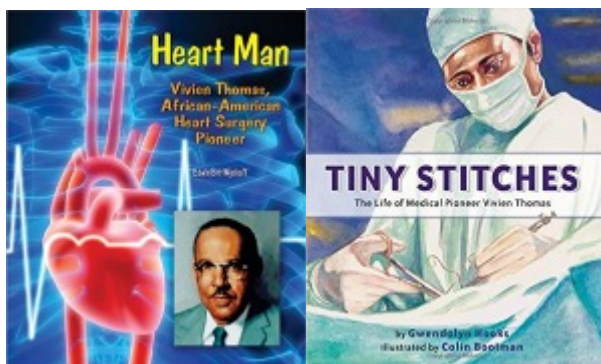


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P.S.:

For deeper reading on Vivien Thomas, read his posthumously published autobiography: "Pioneering Research in Surgical Shock and Cardiovascular Surgery: Vivien T. Thomas and His Work With Alfred Blalock."

Also, there are two wonderful children's books about Vivien. One is called "Heart Man: Vivien Thomas, African-American Heart Surgery Pioneer" by Edwin Brit Wyckoff. The other book is "Tiny Stitches: The Life of Medical Pioneer Vivien Thomas" by Gwendolyn Hooks and illustrated by Colin Bootman. I recommend you get these children's books for your kids 12 and younger. You can watch the movie on HBO!



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A MESSAGE FROM THE
**EXECUTIVE VICE CHANCELLOR
FOR HEALTH AFFAIRS**



Friday, Jan. 29, 2021

A look at the Center for Education and Development

Dear Colleagues,

From time to time, I like to share with you messages that highlight different facets of MU and our academic health system. I think it is important for us to be aware of the excellent work that takes place in all areas. In the fall, I was able to visit the new location for MU Health Care's Center for Education and Development (CED).

In early 2020, our CED team moved into a new location at 3215 Lemone Industrial Blvd., just up the road from MU Health Care's Quarterdeck Building. The CED is crucial for our health system, as it is where all our nurses and other health care professionals obtain consistent and continuous training to keep them on top of their game. While some training is offered on site at the new learning center, due to social distancing, new employee orientation and some other training opportunities are being conducted virtually for the time being.

The learning center is open 7:30 a.m. to 5 p.m. Monday through Friday and features specialized training and state-of-the-art simulation rooms, a computer lab and other resources to help employees grow and develop. Stephanie Hunt serves as manager of clinical education at the center. The CED reports to Beth Alpers, MU Health Care's interim chief human resources officer.



Stephanie Hunt does an excellent job serving as manager of clinical education at the Center for Education and Development.

Many of the CED employees are considered “clinical educators” or “service line clinical educators.” I can remember about 20 years ago when I would round on the hospital wards, each unit had an “educator” who was a nurse whose primary role was continuous education of the workforce. Stephanie and Beth explained to me how this has become more centralized and standardized among the service lines at MU Health Care.



Walls throughout the Center for Education and Development are adorned with inspiring quotes from thought leaders.

In addition to these educators, there is a group that serves as a think tank called the Learning and Organization Development team that brainstorms innovative ways to communicate with our learners. They contribute to many leadership trainings and development opportunities. The CED is home to an outstanding IT team that supports their programs.

When I visited the learning center, I was able to see two in-person classes — one for new nurses and one for new technicians. Both were using a game similar to “Jeopardy” to make their teaching points. These teaching exercises were excellent and effective.

The CED plays a crucial role in maintaining MU Health Care as an innovative academic health system. Bravo to our great team who helps keep us up to speed on the latest educational opportunities to best care for our community.

If you would like me to come visit your MU Health Care or School of Medicine work unit so I can meet your team and learn more about what you do, please reach out to my office and contact [Amanda Sebok](#), senior executive assistant in the executive vice chancellor for health affairs office. I always enjoy these visits and learn a lot.

Sincerely,



Richard Barohn, MD
Executive Vice Chancellor for Health Affairs
University of Missouri
rbarohn@health.missouri.edu

P.S.:

Our first installment of the series “NextGen Precision Health: Where are we Now? Where are we Going?” will be held virtually at noon on Wednesday, Feb. 10. I hope to virtually see you there. [Register here](#).

The Office of Continuing Education at the MU School of Medicine designates this live educational activity for a maximum of 1 AMA PRA Category 1 Credit(s)[™]. Physicians should only claim the credit commensurate with the extent of their participation in the activity. The University of Missouri Sinclair School of Nursing is approved as a provider of nursing continuing professional development and nurses can receive up to 1.0 contact hour for all participants who view the live sessions in their entirety and complete the evaluation form.

For questions, please reach out to senior director of education programs Mary Hindle at hindlem@health.missouri.edu.



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A MESSAGE FROM THE
**EXECUTIVE VICE CHANCELLOR
FOR HEALTH AFFAIRS**



Friday, Jan. 15, 2021

Our email security policy

Dear Colleagues,

In the fall, I shared an [important message](#) about data security. As part of our ongoing efforts to improve MU Health data security, we have adopted a new Email Security Policy to provide guidance on how to handle patient data and other sensitive information within our email inboxes. The purpose of the policy reflects the importance of keeping patient data safe and secure.

[Read the policy.](#)

Email is a way to share information and data, not a storage system. Just like postal mail, you wouldn't use your home's mailbox to store the mail you receive. You bring those things into your home and then make decisions about what to do with it. We need to take this approach with our email as well, especially those containing protected health information (PHI).

Our new policy requires you to remove PHI from your email inbox within 30 days of it either being received or sent. This also applies to emails you have in your inbox folders and to any calendar events that might contain patient information. To help you in this effort, resources are available to download from mymuhealth.org/data-security, and a required [SABA](#) training module has been assigned that will provide guidance and directions on how to search for and securely remove these emails from your inbox. If you have not taken this module yet, please do so before Feb. 5. Note: School of Health Professions and Sinclair School of Nursing employees will have this training added to MyLearn.

The policy also describes potential disciplinary actions for failing to abide by these requirements. For example, if your inbox is compromised and the investigation reveals that you maintained email containing PHI beyond 30 days, you could face disciplinary actions such as suspension or even termination. Data security is something we're taking extremely serious.

[Download this quick guide to keep at your workstation as a reminder to keep PHI out of your inbox.](#)

This is also a good time to remind you that if you receive a suspicious email, please report it. Simply open a new email, address it to: abuse@missouri.edu, and drag the suspicious email into this new email to make it an attachment.

As we have been working diligently on improvements to MU Health's data security efforts, I'm reminded of the [Code of Conduct](#) that was recently revised this past summer. Remember to **Pause** and to **Think** about whether sending PHI via email is the best approach, or if there is a [more secure way](#) to handle your communications.

If you're not sure, **Ask!** In addition to your supervisor, our information security officer Sean Rivera and the MU Health Information Security Team are here to help you. You can reach the team at infosec@health.missouri.edu or 573-884-0632.

Thank you for giving this your attention. Data security is everyone's responsibility.

Sincerely,



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A MESSAGE FROM THE
**EXECUTIVE VICE CHANCELLOR
FOR HEALTH AFFAIRS**



Tuesday, Jan. 12, 2021

An update on our vaccination efforts

Dear Colleagues,

The COVID-19 vaccine rollout — not only at our health system but also across the country — has been an exciting, yet complex, undertaking. I know many of you have questions about our process, and so I want to give you an update on where we're headed and when more people will be able to get the vaccine.

We began offering the COVID-19 vaccine to MU Health Care employees with direct or indirect patient contact on Dec. 16. We've been able to vaccinate more than 5,000 employees so far, and we're currently offering second doses to these individuals.

Although we have been able to vaccinate many MU Health Care employees, the registration process is unique for non-MU Health Care employees. Our teams have been working as quickly as possible to update and adapt our logistical processes so we can offer the vaccine to more employees across our health system. I'm pleased to share that this work is progressing, and even more employees will have the opportunity to be vaccinated through two upcoming clinics.

Two COVID-19 vaccination clinics for employees will be taking place **Jan. 14-15** and **Jan. 25-29**. These clinics are designed for:

- MU Health Care employees with direct or indirect patient contact. Employees classified as permanently working from home are not eligible at this time.
- Clinical learners rotating in clinical spaces and **MU School of Medicine**, **MU School of Health Professions** and **MU Sinclair School of Nursing** faculty and staff necessary to directly support our clinical mission. People in these areas who are classified as permanently working from home are not eligible at this time.

The clinics are by appointment only, and individuals will receive email invitations for a clinic as part of a designated group for either Jan. 14-15 or Jan. 25-29. When you receive your first dose, you will make an appointment to receive your second dose.

We realize that many of you may not be eligible yet for either of these clinics and will need to wait as the state progresses through its phased rollout. You can find information on the [phases here](#). We are hopeful this will occur soon so our entire community can have the opportunity to receive the vaccine.

The vaccine represents a huge turning point in our fight against COVID-19. Thank you to our vaccine committee for working through the complex details with vaccination rollout, and thank you to those who have stepped up to already receive the vaccine. Please know that we value your feedback and encourage you to share your thoughts using this [feedback form](#).

Sincerely,



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