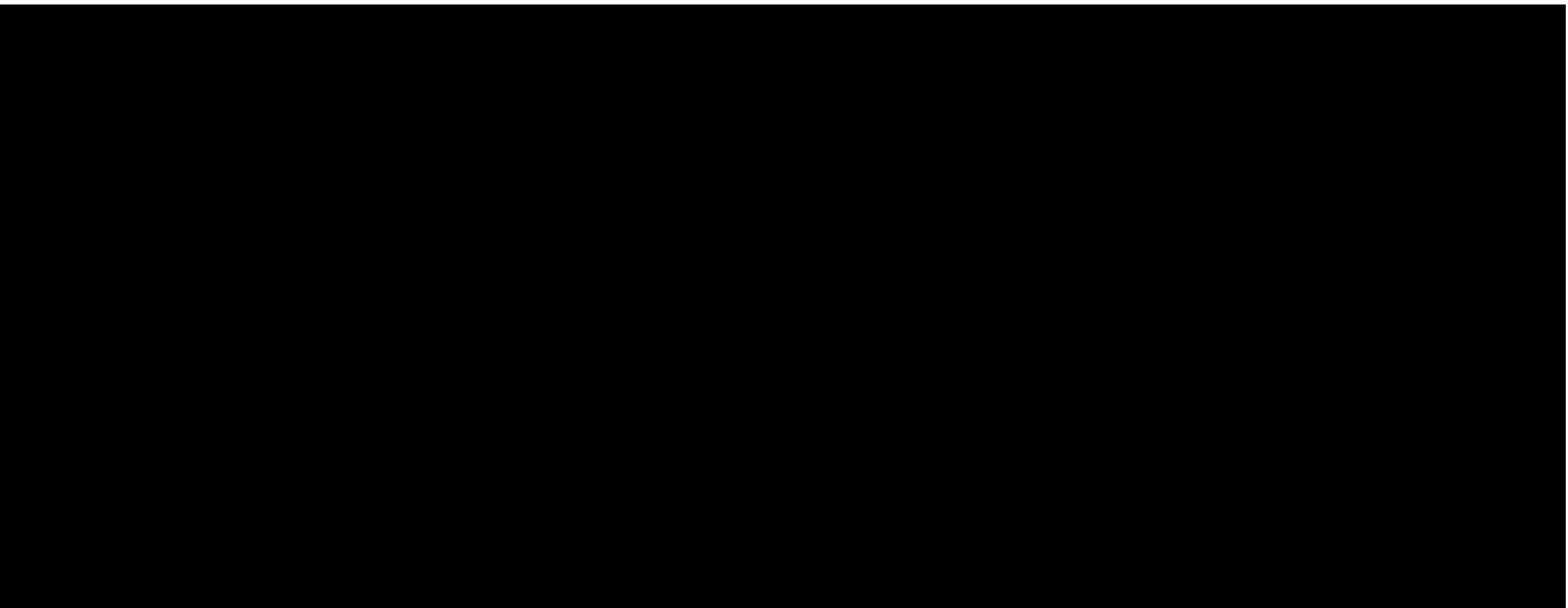




## UNDER THE PLANE TREE

### Celebrating Our Founding Women In Medicine

PRESENTING THE UC DAVIS SCHOOL OF MEDICINE'S CENTENNIAL CELEBRATION OF EARLY WOMEN FACULTY



## FOREWORD

The UC Davis Centennial serves as a reminder of how important it is to preserve and honor our past. Celebrating the history of our School of Medicine will help future generations to learn, grow and benefit from the experiences and accomplishments of those who have come before them. The UC Davis School of Medicine tradition began in 1966 when Dr. John Tupper, our founding dean, planted a young plane tree on the Davis campus. Hippocrates is believed to have gathered his students under a plane tree on the Greek island of Cos, hence the plane tree symbolizes the perennial medical education. In December 2006, when the UC Davis Medical Center Education Building was inaugurated, a cutting from the campus tree was planted in front of the new building (previous page). This book links our past and present, by honoring the careers of pioneering women faculty.

Increasingly greater numbers of women are pursuing careers in medical sciences. Female participation in science enriches scientific discourse, providing new perspectives. However, women continue to face many barriers due to a number of interacting factors, such as individual, family, institutional and societal influences coupled with the complexity of medical science careers. Yet, the success stories of the women featured in this book highlight the rewards of medical careers. Like the School of Medicine tree, their careers have developed to their full potential, growing larger and stronger, and yielding fruit in research, teaching, clinical care, service, and community outreach.

We want to ensure that the stories of the women who helped establish our school and who paved career pathways for others in medicine are not forgotten. Through a search of academic personnel records, we identified to the best of our ability those women who have been on our faculty from its founding or who joined the faculty through 1990. We invited them to contribute a poignant and pivotal moment in their careers – in their own words – that best represents their experience as a faculty member in our School of Medicine. Not everyone responded to our invitation to contribute, and we regret if our list may have been unintentionally incomplete. Nonetheless, we believe that we have collected a representative and meaningful collection of remembrances that preserve the spirit of the time and the pioneering experience of these women, sharing important lessons for those who follow. We are saddened that some of our school's most beloved women faculty died before the publication of this book, and that our efforts were not timely enough to preserve their stories. However, we honor their memories and contributions to the School of Medicine. All of these women's accomplishments and impact provide a testament to the legacy and strength of women faculty at UC Davis.

This book is our tribute to the school's pioneer women faculty, and our gift to future generations. We hope that you will enjoy and be inspired by these wonderful stories!

*The Women in Medicine Executive Committee*





# **THE PLANE TREE**

*(Platanus orientalis L.)*

## **PROPAGATED**

from the tree planted at the 1966 School of Medicine founding in

## **DESCENDANT**

from the Greek Isle of Cos, home of Hippocrates

## **DEDICATED**

December 11, 2006, at the opening of this Education Building

## INTRODUCTION

### THE FERTILE SOIL UNDER THE PLANE TREE

Since its founding in 1968, UC Davis School of Medicine has proven to be fertile soil for women and men to discover and share knowledge, and advance the health of society. Our diverse faculty members – and the thousands of students they have mentored over the years – have nurtured a collaborative culture that has led to breakthroughs in research, education, clinical care and community outreach.

Trailblazing women physicians have helped lead the way. Women accounted for about 10 percent of our founding faculty at a time when fewer than 8 percent of all physicians in the U.S. were women and even fewer held doctoral degrees in the life sciences.

Today, women comprise 31 percent of our faculty, serving as role models to UC Davis medical students, more than half of whom are women. This year, in fact, 57 percent of our incoming class members are women, nearly 10 percentage points above the national average.

The voices you will hear in these pages are from women who paved the way for the progress we have made in our first 40 years as a school. They challenged tradition. They expanded our understanding of medicine. And they are leaders who continue to shape the health of our world.

Importantly, these women remind us that we still have much work to do. We must work together to reduce health disparities, to advance social justice and to more fully understand the social determinants of health. Also, we must remember that women are still woefully underrepresented in the higher echelons of academic medicine. For example, only about 15 deans at 130 U.S. medical schools are women.

This anthology is a wonderful treasury of insights and memoirs written by the exceptional women who were among the founding faculty members of the UC Davis School of Medicine. We are grateful to these dynamic women whose values and hard work have built a strong foundation that will allow even more progress toward our goal of better health for all.


Thank you for joining me Under the Plane Tree to celebrate their strength, perseverance, creativity, humor and wisdom. I hope their legacy will inspire you... as we look forward to our university's next 100 years.

*Claire Pomeroy, M.D., M.B.A.  
Vice Chancellor, Human Health Services  
Dean, School of Medicine*





## OUR STORIES



I joined the faculty in July 1969 as assistant professor in Pathology. There was no one like me back then. I was married with four children. I was very lucky that my chair allowed me to use vacation time to spend two afternoons a week with my daughter at nursery school. It was challenging for women back then, especially women with children. But I loved being a physician as much as I loved being a mother. I couldn't see why I couldn't do both.

I have always enjoyed being in academic medicine here at UC Davis, my only job after finishing my training at the University of Washington. I remember with gratitude the encouragement and support I received from Dean Tupper. One of the best aspects of academic medicine is teaching the young, especially when you see they really grasp the concepts. I really love that the students ask questions that are so penetrating but naive. It makes me think about what I know differently. What a gift to be asked questions like that!

Sometimes it takes a naive look to see things in new and different ways. That was the case with a discovery I made early in my career that went against conventional wisdom. Doctors then assumed most human breast cancers arose in the larger ducts closer to the skin's surface. But I was looking at thick slides of breast tissue and saw cancer in the innermost milk ducts and milk glands.

My breast cancer research opened many doors. I became part of the National Institutes of Health breast cancer research group and met many international researchers in breast cancer. It was my entrée into international research and I was able to travel many places. My work with NIH also helped my career at UC Davis, facilitating a promotion to associate professor, and later full professor. It was a very enriching and exciting time.

After all these years, I am still in awe of the beauty of living organisms. And, every day, I do something different – teach, conduct research, run the blood bank. Every day is an adventure for me.



1969

"Every day is an adventure for me."

**HANNE M. JENSEN, M.D.**

Professor, Pathology and Laboratory Medicine

Director, Transfusion Services





A memorable moment in a long career?

Looking back, I'm tempted to focus on a celebratory occasion – perhaps when I received an award – or a serendipity that caused my life to pivot – as when I met another scientist who became a friend and collaborator on new avenue of research. Yes, I've had those moments.

But I've also experienced difficult times over the years – and those moments, too, shaped my career – and me – in ways I couldn't imagine that day in 1969 when I first buttoned my white lab coat and started my professional life in the new School of Medicine. I'd watched as the Surge III building sprang up while I finished my graduate education in Hutchison Hall, across the street, and now I was a Post-doctoral Research Biochemist there in the laboratory of Dr. Donal Walsh and one of the cadre of scientists and physicians who would write the early chapters of the school.

During more than 30 years of research, I learned that good science demands keen observation and clear thinking, repetition of experiments to confirm findings, objectivity and critical scrutiny of data – lessons I've tried to pass on to the students I've taught in my lab and in the classroom.

I also learned that it was not easy being a woman scientist in a field and in an institution where women were vastly outnumbered by men. Often, particularly when I was a young researcher, visitors to the department and sales people would mistake me for a lab technician or secretary – occupations populated by women. They'd apologize for not realizing that I was the person – a Ph.D. scientist, directing the project, doing experiments – in charge of my own research lab.

I advanced through the Professional Research Series and was promoted to Research Biochemist in the Division of Cardiology in 1988 – to my knowledge, the first person in the School of Medicine to reach the top rank of that series through promotion. But there was a glass ceiling – no way to the tenure-track for me, I was told – and so I faced long, stressful years of litigation before a reasonable settlement was reached. Now sixteen years on, and as I finish this chapter of my life, I must remain hopeful that the path to the tenured faculty ranks will be more open for my young women students who desire careers in academic medicine. We're not there yet.

I began and ended my career in the UC Davis School of Medicine, retiring on July 1, 2008, as Professor in the Department of Surgery in the School of Medicine and Lecturer in the Department of Molecular and Cellular Biology in the College of Biological Sciences.


# 1969

"...I began and ended my career in the UC Davis School of Medicine..."

**LEIGH SEGEL, Ph.D.**

Professor Emerita, Surgery





I was appointed to the UCD School of Medicine faculty in the fall of 1969 as Assistant Professor of Psychology in the Department of Psychiatry. I was involved in the full scope of teaching, research, clinical work and community service. My teaching included MSI's in the Intro to Psychiatry course and teaching and supervision of psychology graduate students and interns, psychiatry residents, and child psychiatry fellows. As a child clinical psychologist, my clinical work focused on the needs of young children and their families at risk as a result of prematurity, illness, adoption, divorce and/or abuse.

I retired in June 1994. Happily, I “flunked retirement” and returned in January 1995 to the School of Medicine Office of Academic Affairs, initially as Associate Dean – Women's Affairs and ultimately as Associate Dean – Faculty Development. I retired again in 1998. In the decade since my retirement, I have developed a second career – this time as a potter and weaver.

### **Memorable Moment**

In the fall of 1976 I was appointed Chief of the Division of Clinical Psychology. Dean Tupper had established a monthly “Chairs and Chiefs” meeting the first Monday of each month. I arrived a few minutes early for my first meeting – with a briefcase full of work to do – and found a chair in the back corner. Other department chairs and chiefs began to arrive and clustered near the front of the room. Someone looked up and spotted me, and conferred with the secretary. Shortly thereafter, I was tapped on the shoulder and asked in a very quiet, polite voice, “Pardon me, but are you the reporter from the Sacramento Bee?” Even though my briefcase had my initials on it, I was dressed in a long flowing skirt (as a child psychologist I spent most of my time on the floor with young children) and my strawberry blond hair was braided down to my waist. I chuckled and had to admit that I probably looked much more like a Bee reporter than many people's vision of a Division Chief. I really enjoyed my role as the first woman Division Chief. Though I did not imagine it at the time, this was just the beginning of a number of fascinating opportunities I had in academic administration at UCD. I served as Chair of the Graduate Group in Clinical Psychology, was selected as Regents Management Fellow in the UCD Office of Research, spent 3 years as Faculty Assistant to the Vice Chancellor of Academic Affairs (actually 3 different Vice Chancellors), and throughout the years was 5 times Acting Chief of Child Psychiatry. My favorite academic administrative assignment was my final one in the School of Medicine Office of Academic Affairs as Associate Dean for Faculty Development. That opportunity to work with young faculty at critical points in their own careers in academic medicine was exciting and important and very fulfilling. Though I have cut my hair, I still love to wear long skirts and occasionally carry my briefcase – now full of potters tools and clay.

1969

"Happily, I "flunked retirement"..."


**MARGARET S. STEWARD, Ph.D., A.B.P.P.**

Professor Emerita,  
Psychiatry and Behavioral Sciences

Former Associate Dean,  
Faculty Development







When I was recruited to the UC Davis School of Medicine in May of 1971, the first medical school class was about to graduate. I had just finished 6 years of post MD graduate work at Stanford in Internal Medicine, Hematology/Oncology and Nuclear Medicine. I was recruited to join the faculty at UCD in Nuclear Medicine by Dr. Gerald DeNardo. I had turned down a similar offer at Stanford to come to this newly developing Medical School and help build this infant department.

I found an energetic faculty group in this School of Medicine, and had many memorable moments in the early recruiting and collegial interactions that crossed most departments within the school. However, since I became rapidly involved in the Committee on Educational Policy (CEP), I was soon besieged by Dean Tupper ('Tup') to be the first Dean for Curriculum, and as such, to lead the first curricular revision of the faculty (1976 through 1979). Since 'Tup' had no office for me until the new Dean's office building was finished, Dr. Lois O'Grady, then an Associate Dean, graciously suggested that we could share her office in the old Dean's office area, until the new Deans' administration building was finished. That was the gracious sharing that tended to occur among the early group.

In 1979-80, I took my first sabbatical, as faculty In Residence in Drs. Benjamini and Scibienski's laboratories (Immunology), but traveled widely to learn how to develop new Monoclonal Antibodies (MAb) in the same manner that Kohler and Milstein had just shown in their publication, for which they later received a Nobel prize.

This bend in the road led to my most memorable experience. In 1985, Drs. Lois O'Grady, Gerry DeNardo, and I treated the first B cell Lymphoma patient with our <sup>131</sup>I -MAbs. Within days the patient was showing remarkable therapeutic response, such that further treatment led her to have additional years of good life. We were all stunned and thrilled; this wonderful patient was persistent in helping us develop this type of therapy, and played a major role in encouraging the development of therapy for other patients here. This work became a stimulus for a broader group of MAb targeted radionuclide therapies developed over the next 20 years. Lois and I felt this series of events, albeit humbling, did help women faculty in the school to be taken more seriously as possible leaders.

# 1971


"This bend in the road led to my most memorable experience."

**SALLY J. DeNARDO, M.D.**

Professor, Internal Medicine and Radiology

Former Associate Dean, Curriculum





I joined the UC Davis medical school faculty in fall 1972 as an Assistant Professor of Human Physiology. I had come from Mt. Sinai Medical School in New York where half of the Physiology faculty were women. Imagine my surprise when I found I was going to be the first woman in the department! Not only were there vast gender disparities, but there were also racial disparities, since there was only one other minority member of the Basic Science faculty, a male.

In 1972, cardiovascular physiology teaching was directed by an interdepartmental committee made up of basic scientists and clinicians, rather than by the department. Lectures and labs were only given to freshmen in the morning and to sophomores in the afternoon, i.e. a half day formal program. Students were expected to fill the rest of their time with library study, use of special videos, and self-study aids. About 1980, there were massive changes in the curriculum, taking it back to a more classical model: department control of the lectures and all day classes.

In the late '70s/early '80s there was a great deal of dissension about the Bakke decision by the Supreme Court. Allan Bakke sued the university because he had not been accepted for admission to the medical school, while there were designated slots for minority students. The Supreme Court sided with Bakke and he entered the medical school class of 1982. I was on the Admissions Committee at that time, as well as on the Task Force Subcommittee which reviewed minority applicants. I also attended the Supreme Court hearing as one of the university's representatives and I was quite surprised at how much inaccurate information had gotten into the official legal record of how the committee operated.

Currently the campus Office of Academic Personnel, as well as the School of Medicine Offices of Academic Personnel and Faculty Development, put on annual programs to acquaint new as well as continuing faculty with the procedures for merit and promotion, so that everyone is aware of the university's expectations, and they especially emphasize the requirements for tenure and the timelines involved. In the 1970s and '80s, there were no such official programs and it was up to the individuals themselves to get the requisite information. In the early 1980s a group of faculty women from across the campus formed a group which met regularly to discuss their research and activities and their experiences in the tenure process. Members of the group were both tenured and untenured, and from all colleges/schools on campus. The group existed for at least ten years, and undoubtedly helped many faculty achieve tenure in a timely manner.

There were many changes made in the School of Medicine during the late '70s and early '80s, some of which are still in effect regarding curriculum and teaching, personnel process and tenure, selection of students and faculty. While there are more women on the basic science faculty than when I first came in 1972, minority representation is still low.

# 1972


"In the 1970s and '80s, there were no such official programs..."

## **SARAH D. GRAY, Ph.D.**

Professor Emerita,  
Physiology and Membrane Biology

Assistant Vice Provost,  
Academic Personnel





In 1969 I finished my training in Chicago at Presbyterian-St. Luke's Hospital (now Rush University) and was wondering what should be the next step. Dr. Lois O'Grady had left Presbyterian-St. Luke's two years earlier to become a founding faculty member in the Division of Hematology-Oncology of the Department of Internal Medicine at the new medical school being established at the University of California, Davis. She suggested that I come and look at a position at the Sacramento Medical Center, the teaching hospital operated by Sacramento County in conjunction with the university. Thus, I found myself employed by the county and running the general medicine clinic, staffed by a few full time physicians and medicine residents who rotated through. In 1972 I left the county position and joined the faculty in the Division of Infectious Diseases. By then the Department of Internal Medicine had grown to about 25 members (only 2 women) and the first class of 48 medical students (only 3 or 4 women) was graduating. There was periodic talk that both of the new state medical schools (Davis and Irvine) should be closed due to the state's budget problems (some things never change) but we continued on and the class size was increased to 100 students. Classrooms and faculty offices were in "temporary" buildings on the Davis campus, some of which remain today. There were relatively few women faculty but Lois O'Grady became Dean of Students and Sally DeNardo, Dean for Curriculum. Growth and development are challenging and I remember lots of turmoil, extremely bad press, and plenty of frustration for all. Nevertheless there was a certain sense of community and esprit of all being in it together that united faculty and students.

After 5 years at Davis I went to join another new medical school at Texas Tech University in Lubbock where I was the only woman in the Department of Internal Medicine and the only infectious disease physician in hundreds of square miles of West Texas. Both of these made for some very interesting experiences. At Tech I ran the Internal Medicine clerkship and was the Dean for Admissions. After 8 years there I decided that I would never truly be a Texan and came back to Sacramento, first working for the VA and then rejoining the UCD faculty in the Division of General Medicine. Both Sacramento and the medical school had grown enormously, new construction was everywhere, and HIV had completely changed the face of infectious disease practice. Becoming Director of the third year Internal Medicine Clerkship was a wonderful chance to interact with students. Eventually Neil Flynn and I transferred from General Medicine to Infectious Diseases where I served as chief of the division until I retired in 2000. I have had a chance to associate with amazing people in many different settings but at UC Davis women such as Lois O'Grady, Crystie Halsted, Betty Smithwick, Robin Hansen, Nancy Joye, Mary Metcalf, Pam Prescott, Huong Bach, Faith Fitzgerald, Satya Dandekar and many others have been inspirational colleagues and wonderful friends.




1972

"Growth and development are challenging..."

**RUTH LAWRENCE, M.D.**

Professor Emerita, Internal Medicine





I arrived at UC Davis Medical School in 1970 as a resident in Pediatrics. This was a big year for the Sacramento County Hospital, as the very first class of UC Davis medical students began their clinical rotations then. At the time the Pediatrics faculty consisted of two endocrinologists, two hematologist/oncologists, one metabolic specialist/nephrologist/generalist, a neonatologist, a full and part-time generalist, some volunteer faculty in the outpatient clinics (thank heavens for them!), and an occasional outside consultant. An adult neurologist ran our pediatric neurology program, but I stopped trusting him when he took credit for a diagnosis that I had surprisingly made myself. Two women were a very important part of my experience as a resident, Kathleen Mannion and Christine Johnson. They provided me with support, role models, friendship and psychological protection from a couple of their male colleagues who were less than easy to work with.

Kathleen “Kass” Mannion had been a general pediatrician working for the county of Sacramento when the medical school came into existence. She took on the responsibility of supervising residents and the first generation of medical students in the clinics and on the wards. She was an astute pediatrician who supported her residents and helped us take good care of patients in a new program which had a small faculty. She developed clinical guidelines for patient care at our institution and was eager to help us make the right decisions.

The other really important woman who taught me so much was Christine Johnson. Chris was a hematologist-oncologist. She was, of course, a skilled subspecialist, but she was also an amazingly knowledgeable generalist. Her involvement in my training made all the difference in my at least being exposed to areas of pediatrics that weren't represented by my faculty. She was a big support for the house staff, ready to help us when we were flailing, while at the same time setting a standard of excellence in knowledge and with clinical care that prompted us to keep on learning. She was able – and willing – to step in to help in almost any setting including the NICU, the ward, the clinic.

I found life as a resident to be tough – we were in-house by ourselves, supervising interns in the emergency room and on the ward, taking care of premature babies by ourselves, having very little back-up and really insufficient experience to take on the responsibilities that were demanded of us. Outside of my husband, Chris Johnson was the major support who kept me going. She was there to answer questions, to guide my judgment, to encourage me when I thought I could never know enough to take care of sick children.

Both Kass and Chris left UC Davis in the early 1970's. That was a big loss. Certainly Pediatrics has grown and prospered, but in its early years, these two women were essential for the clinical services and resident education. I owe them both a huge debt.


1972

"...they provided me with support, role models, friendship and psychological protection..."

**MARY BETH METCALF, M.D.**

Professor, Pediatrics





I joined the Founding Women in the fall of 1975, as Assistant Professor in the department of Human Physiology. For the Basic Sciences in the 1970s, the threshold for using the plural was barely crossed: Sarah Gray in Physiology, Eva Killam in Pharmacology, and Vijaya Vijayan (Kumari) in Anatomy. I was fortunate to have Sarah as a co-faculty member in the only department with more than one woman.

My perspective in 1975 as an Assistant Professor was based on medical school departments I had been associated with as a graduate student and postdoctoral fellow. For the former, the number of women faculty in all basic sciences was zero and for the latter the number skyrocketed to one. By comparison, Davis looked to be a trend setter.

For my first three years at Davis, there was no Tupper Hall, just a series of temporary buildings for lecture halls and research labs (and for one of those years, I had to share my temporary building with Pete Cala, but that's another story). The number of faculty was pitifully low, but the camaraderie was high. And good that we had that "we're in it together" spirit, because we had 93 medical students each year to admit, teach, and advise. There was no ramp-up time for new faculty. We did, however, have ample cross-communication and support between departments as a result of our integrated curriculum; for example, Reproductive Biology was taught by a team spanning three departments. I served on the Admissions Committee for three of my first four years at Davis, and while it was (as always) an enormous work load it helped draw me further into the School of Medicine community, gave me insight into the medical student culture and their wide-ranging talents, and clarified the need for a workable plan to incorporate diversity and disadvantaged students into the School of Medicine. We thought we had that plan, and then there was the UC v. Bakke decision in 1978.

Many of our research collaborations and journal clubs naturally involved the undergraduate campus. A related and invaluable activity was initiated in the late 1970's by a handful of women crossing schools and colleges: Faculty Women's Research Group. Our first meetings were held in each other's homes with 10-20 women representing about a third of all women on the UCD faculty ranging from law, sociology, botany, history, anthropology, physiology, psychology, biochemistry, math, statistics, zoology, nutrition, and agricultural economics. The Group's aim was to provide a forum for support and information sharing for women faculty, and the focus for each meeting was a research presentation. It's a struggle finding words to underscore the importance of this Group; for some it boosted self-assurance, for others it was a career-saver. Gradually over the next ten years, we required larger venues for our meetings as recruitment of women faculty grew. Eventually the meetings focused only on sharing information and celebrating each other's accomplishments. The Group disbanded in the early 1990's for the best of all reasons: it was no longer needed.

# 1972

"...for some it boosted self-assurance, for others it was a career-saver."

## **JUDITH TURGEON, Ph.D.**

Professor, Internal Medicine







My career at UC Davis actually began when my husband, Jim Joye MD, entered the first class at UC Davis School of Medicine and I was pursuing my Masters degree in Cell and Molecular Biology here. A few years later when I decided to finally pursue medicine as a career, I was on the alternate list at UCDSOM and went to the Medical College of Pennsylvania. When we returned to Sacramento so my husband could do his cardiology fellowship, I did a rotating internship here. A wonderful pediatrician, Kelly Kelso MD, convinced me to switch to pediatrics. I did a fellowship in pediatric infectious disease which included child abuse because Crystie Halsted MD and Kelly Kelso MD had teamed up to fill that void in the area. After completing the fellowship in 1980, the chairperson of pediatrics, Eli Gold MD, asked me to stay on the faculty where I have been ever since in General Pediatrics, Newborn Nursery, and Foster Care. In 1983, after the birth of our second child, I elected to work less than full time which meant I became a Clinical Assistant Professor and Medical Director on the Normal Newborn Nursery. Years later, I became Director of the Foster Care Health Program where I have been for ten years and continue today.

Crystie Halsted MD has always been my conscience – sitting on my shoulder and admonishing me if I think of being a bit less than rigorous in patient care. Sitting on my other shoulder is my good friend and colleague in pediatrics, Mary Metcalf MD who, as Crystie in her insightful way used to say “has more morals in her little finger than the rest of the department put together.”

I have been lucky to have many mentors in my career and they have included not only supervisors, but colleagues, students, nurses and other health professionals as well as patients, parents and foster parents who have encouraged me along the way.

1980


"...I elected to work less than full time."

**NANCY REE JOYE, M.D.**

Professor, Pediatrics

Director, Foster Care Health Program





It was one of those perfect Sacramento early autumn days in 1993. I was attending on the Family Medicine Ward Service, and supervising a resident doing a circumcision that was going very slowly. My secretary kept paging me to contact her, and I had to fight the urge to take over the procedure in order to finish up quickly. When I finally got back to the office, she told me that someone who “sounded very important” had called and needed to speak with me as soon as possible. The telephone number had a 919 area code, and I speculated that must be close to our own area code 916. I returned the call and found myself speaking to the Dean at Duke University School of Medicine. It seemed they had decided I would be an ideal candidate to Chair their Department of Community and Family Medicine. I was not a chair at the time, and had not applied for or expressed any interest in being a chair. When I told him that, as well as the fact that I always got Duke mixed up with Vanderbilt, he simply replied that I owed it to myself to come out for a visit. Over the next months, I actually made four visits to Duke. I am convinced that no one recruits quite like Duke – personal drivers, private planes, and an unrivaled recruitment package (that included season tickets for The Blue Devils) – were all part of the experience! Back home at UC Davis, Dean Lazarus (who had started his career at Duke) and Vice Provost Tomlinson-Keasey contacted me to discuss a counter offer from UC Davis. I thanked them, but informed them that I was not trying to use the situation to negotiate a better deal here or at Duke. I simply needed to decide if the move would be good for me and my family, and if it were, I would go. If it were not, then they did not have to give me anything to stay. I was unaware and oblivious to how “the game” is usually played! We came very close to going, and even opened escrow on a home in Durham. In the end however, the move would not have been good for my husband, who is a UC Davis Professor of History. While the decision to decline Duke’s offer was not easy, I have never regretted it. Shortly thereafter, I was approached in a similar manner by the Dean of Medicine at the University of Pennsylvania. Do these guys read the same playbook? These experiences were flattering, as well as valuable in establishing the price of “my stock” on the academic market. I also reassessed my personal and career priorities. I was subsequently asked by Dean Lazarus to establish a new Center for Health Services Research and was named Chair of the UCD Department of Family Medicine in late 1994. The story had a happy ending, with me staying here at UC Davis to become a senior “Woman in Medicine”.

# 1980

"I simply needed to decide if the move would be good for me and my family..."

## **KLEA BERTAKIS, M.D., M.P.H.**

Professor and Chair,  
Family and Community Medicine

Director, Center for  
Healthcare Policy and Research





Not long after I had moved to Davis, a single mother with three young children, to begin an academic career, 3 out of 4 of those whom I had met in recruitment interviews had resigned, retired or been fired. Three years later, as the only assistant professor on the tenure track, I was carrying the pager full time for the busy pediatrics consultation liaison service, serving as the child training director, and (wo)manning the child psychiatry outpatient clinic. My midterm review for academic progression noted “If she continues to give so generously to clinical and teaching needs, she will not achieve tenure,” and advised me to contact my department chair, the SOM Associate Dean for Academic Progression, and the Vice-Chancellor if I had questions.

First to offer an appointment time was the Vice-Chancellor. I presented myself to the fifth floor of Mrak Hall, and showed him a one-page graphic representation of the progression of my assigned duties over the previous 36 months, with currently over 40 hours of obligatory scheduled face-to-face work each week, excluding department meetings and night call. I emphasized that this was not “given” time. I was about to explain that the department was short-staffed, obligated to treat psychosocially devastated MediCal patients, that a new child psychiatry division chief could not be recruited, and that I was trying to be a “team player” and so on, when I noticed that all the color had drained from his usually ruddy face.

He said: “The University of California is not supposed to exploit assistant professors – it is supposed to support their academic progress. This could be an affirmative action situation.”

The idea had never occurred to me. Gazing out the window at Putah Creek, the reckless ducks, the striding students, and the hazy fields beyond, I turned back to him and said evenly: “I would hate to see it come to that.”

Next I met the Associate Dean. He criticized my department chair with surprising frankness, and suggested that I consider private practice. I told him: “You have me confused with someone who wants to fail.”

Last, I met with the department chair. He wrung his hands and repeated that the department did not have resources. I understood by this that we lost money on every MediCal patient I saw, and regardless of how hard I worked, we couldn’t make it up in volume. I suggested that this serious problem was his problem, not mine.

In due course, a letter from Mrak Hall to the SOM was followed by a letter from the Associate Dean to my chairman, and I was told that I could apply for a quarter of leave and use my Sabbatical time (in residence) to write some publishable papers.

This I did, and tenure I got: the first physician to receive tenure in the department of psychiatry in 17 years. I have never ceased being grateful to the University for sticking to its own rules to support the academic progression of faculty, even in the beleaguered School of Medicine.




# 1982

"You have me confused with someone who wants to fail."

**PENNY K. KNAPP, M.D.**

Professor Emerita, Psychiatry and Pediatrics  
Medical Director,  
California Department of Mental Health





As I am sure is true for any faculty member who has worked with students for more than a few years, there are so many memorable stories that it is very hard to choose just one. Adding the additional roles of clinician, administrator and researcher that so many of us also assume blends even more into the richness of the mix. There have been many stories that could demonstrate the joy of the teaching I've done for medical students and residents over the years but this one sums up so much.

I first met Paul Cox when he was an undergraduate pre-medical student at UC Berkeley. I was there on a recruiting trip as part of the role of Assistant Dean of Student Affairs when I did that job in the mid 1980's. He was energetic, bright and personable and I was glad to see him enroll as a medical student. He fulfilled his promise as a medical student and went on to UCSF for his residency in psychiatry. A few years later, I was happy to see him return to UC Davis as junior faculty. I was even happier when he assumed the job of Instructor of Record for the Core Clerkship in Psychiatry, a position I had held early in my career at UCD. I had no doubt that he would do a great job in these positions and he has. I've also been able to work with him in the clinical teaching and clinical care setting. We even wrote a paper together regarding medical education. At some point in the year or so prior to my retirement in 2005, we were chatting in the hallway and he commented that I had medical student grandchildren since I had taught him and he was teaching students, too. I hadn't thought about that but agreed that it was an apt comment as I've often said, "No, I had medical students instead", when I've been asked if I have any children. It warmed my heart so much that he could see the importance of medical education in much the same way I did.

I continue to feel much satisfaction when I hear of the accomplishments of students of graduates of the UC Davis School of Medicine. Though I have moved away and now practice as one of the campus psychiatrists at UC Santa Cruz, I still encounter our graduates and am reminded of many of the pleasant stories of my career at UC Davis.

1982


"...I've often said, "No, I had medical students instead",  
when I've been asked if I have any children."

**MARLENE M. MIRASSOU, M.D.**

Professor Emerita,  
Psychiatry and Behavioral Sciences

Campus Psychiatrist,  
UC Santa Cruz





I came to Davis in 1983 because my husband had accepted a position at the College of Agriculture and Environmental Sciences. We moved to Davis with our toddler son. I was a post-doctoral fellow in a neurobiology laboratory at the National Institutes of Health, Maryland. At that time, I could not find a suitable lab at UC Davis to continue that line of research. However, new opportunities came by my way. I joined the research groups led by Drs. Murray Gardner and Robert Cardiff as a post-doctoral fellow in the Department of Medical Pathology. They introduced me to the world of retroviruses that could cause cancer and immunodeficiency syndrome. The research labs were located in Tupper Hall at Davis campus. There were a number of women graduate students, post-doctoral fellows and women faculty in the building. They were fun to interact with. Seeing Drs. Sarah Gray, Judy Turgeon, Vijaya Vijayan, Hanne Jensen and others, we believed that we could also become faculty members someday.

In 1987, I moved to the Division of Infectious Diseases in the Department of Internal Medicine. This was a defining moment for my academic career as I got an opportunity to develop an independent research program. Dr. Joseph Silva provided great support and encouragement during this critical phase in my life. I have been very fortunate to have wonderful graduate students and post-doctoral fellows in my lab. They brought a lot of excitement and energy to the research program. Since 2002, I have been serving as the Chair of the Department of Medical Microbiology and Immunology. I was able to recruit outstanding women faculty to the Department.

There has been a remarkable change since the days of 1983. We have an increased number of women faculty at all ranks and in the leadership positions. We have been here to witness Dr. Claire Pomeroy become the dean of the SOM. Drs. Amparo Villablanca and Lydia Howell initiated hosting events for the Women in Medicine. Dr. Jesse Joad has provided leadership for the faculty development program. There is a strong commitment from the School to provide a supportive and nurturing environment for women faculty. It is no wonder that our young women medical students and faculty today exude confidence in their ability to build a successful career and maintain family life at the same time.

I have had practically all kinds of job titles at UC Davis, starting from the post-doctoral fellow to professional research series, adjunct professorial series to finally ladder rank faculty position. It has been a great journey filled with memories of very happy times and some challenging times. Those experiences helped me define my vision and built my confidence. I was also able to enjoy my family life. My both sons have grown up and gone their ways to build their careers. The environment at the SOM allowed me to bring balance between my academic career and family life.


# 1985

"Those experiences helped me define my vision and built my confidence."

## **SATYA DANDEKAR, Ph.D.**

Professor and Chair,  
Medical Microbiology and  
Immunology





It was a strange and somewhat isolating feeling to be a new junior faculty member in 1985. For the first time in my career, I was not surrounded by a cohort of students or residents of similar age and experience. I was the only woman in the Department of Radiology and there were very few senior women faculty in the School of Medicine. As a product of the women's liberation movement, I was anxious to establish myself as an equal to my male counterparts. I needed mentors and friends.

A few weeks into my career at UCD, I attended my first Tumor Board; Dr. Lois O'Grady, of the Division of Hematology and Oncology, was the moderator. She exuded confidence and knowledge. I felt both inspired and intimidated. I did not introduce myself to her at the time, but I grew to know her through the many breast cancer patients we shared.

Over the next several years other women who were interested in breast cancer joined the UCD faculty: Lydia Howell in Pathology, Janice Ryu in Radiation Oncology, Mary Rippon in Surgical Oncology, and Debra Reilly in Plastic Surgery. Carol Beatty joined me in Radiology and Virginia Joyce joined the Surgical Oncology Division. It was a marvelous core group of women who found stimulating interaction as a multidisciplinary team with primary interest in breast cancer. We also became good friends.

Lois, being the senior member of the group, proved to be a wonderful mentor and role model for all of us. In the early 1990s she suggested that we write a textbook aimed at answering the questions we often heard from our referring clinicians. Our efforts culminated in the publication of *A Practical Approach to Breast Disease* in 1995. We had fun writing the book together and we learned a great deal about each other's specialties during the process.

Lois retired in late 1994 after 27 years on the faculty at UCD and other members of the team moved on to further their careers elsewhere, but the impact of that group of women on my career was profound. Good mentorship and an inquisitive, collegial multi-specialty peer group are the cornerstones on which solid clinical and academic careers are built. Good friends may be even more important.

# 1985


"...the impact of that group of women on my career was profound."

**KAREN K. LINDFORS, M.D.**

Professor, Radiology  
Chief of Breast Imaging







What a treat to be able to contribute as one of the “founding women”! One of the things I treasured most when I joined the faculty in 1985 was becoming colleagues with a handful of women who had been my favorite teachers and role models in medical school at UCD from 1973-77. They are truly the founding women of the School of Medicine: Lois O’Grady, Ruth Lawrence, Vijaya Kumari, Hanne Jensen, Faith Fitzgerald and, most especially, Crystie Halsted. Being a new faculty member was a challenge, but having all those women I knew from medical school available for support, and as mentors I could turn to, was incredibly helpful. I remember feeling like I was coming “home” professionally. They set the bar very high in terms of their commitment to teaching and patient care – as a student I was much less aware of the research they were also doing, and didn’t realize how challenging it was to add that to the mix of teaching and patient care until I joined the faculty.

For the women in Pediatrics, Crystie was always our touchstone – for patient care, for diagnostic dilemmas, for dedicated teaching and for unflinchingly standing up for what was “right” – whether that was equal salaries for men and women faculty, shared responsibilities for teaching that did not allow for ‘opting out’ or cutting corners, or fighting for better services for uninsured and underserved children and families. She was the department’s “conscience” even after she had to retire from faculty practice because of her diabetes. She was one of the most committed to starting and maintaining social traditions for the department outside of work, such as the Halloween “Come as a Disease” party. She always participated in the Pediatric “Women’s Caucus” get-togethers that we started as a way to get to know each other better outside of work, and was one of the well-known regulars at Biba’s due to her generous hosting of lunches and dinners for medical students, residents and fellow faculty members. It was a treasure to be part of the “old girls birthday club” over the years, and Crystie’s death this September leaves a huge empty place at the table, in the department and in the School. For me, Crystie will always represent the very best qualities of the founding women of UC Davis School of Medicine.


# 1985

"I...didn't realize how challenging it was to add that to the mix of teaching and patient care until I joined the faculty."

## **ROBIN HANSEN, M.D.**

Professor and Chief,  
Developmental-Behavioral Pediatrics  
Director, Center for Excellence  
in Developmental Disabilities





In retrospect, my approach may have been all wrong, at least according to our more enlightened perspective today. I was a husband-follower – we came to California in 1986 because my husband had an Air Force scholarship obligation to fulfill, and I just hoped that I’d find a pathology job somewhere. I sent letters to every hospital pathology department in the area and, to my great fortune, received a response from UC Davis. Much to the department’s surprise, I arrived at my interview 8 months pregnant. Mentors from residency and fellowship had told me not to share my condition in advance since a pregnant woman would never get an interview. When the shocked department chair asked me who was going to take care of my baby, I didn’t report him for discriminatory search practices, but calmly answered that I’d hire a babysitter (which I did). I’m sure that no one thought I’d actually show up on my first day or that I’d ultimately work out long term. But this shows that someone who doesn’t seem to fit the usual mold can be worth checking out and may turn out to be a great choice after all.

In the 22 years since then, I’ve raised two daughters. The daughter that I was carrying at that interview graduated from college this year and my youngest (born on a night that I was on-call) is now a college sophomore. Thanks to the precedent set by Karen Lindfors in Radiology, I was able to balance my life as a faculty member, wife and mom by reducing to an 80% appointment when my youngest daughter was 2 years old. Even so, I always tried to keep my part-time status “invisible” to others – I was concerned that I would be perceived as less serious about my career or not considered for research or leadership opportunities or that patient care would suffer. I therefore always answered pages on my “off” day, and was flexible about my time. I considered this to be a small price to pay for the privilege to work at a great place that offered me the opportunity to balance my life and develop a great career. I’ve advanced through the faculty ranks without any problems – even got an acceleration once – and I’ve held many important roles, including laboratory and division directorships, vice chair, acting chair, and associate dean, and I’ve held leadership positions in my professional organizations, too.

Now that I’m an empty nester, I’ve switched back to full-time status this year. I like to think that in my small way, I’ve helped show that a part-timer can still be a major player, and that it is worth investing in faculty members so they can balance their lives, shine when working, and nurture their careers. I hope that I’ve also set an example for my daughters and others that “doing it all” does not mean short-changing anyone, and that it is possible to have a meaningful, fulfilling life that includes everything and everybody that you love.

# 1986


"...“doing it all” does not mean short-changing anyone..."

## **LYDIA PLEOTIS HOWELL, M.D.**

Professor and Acting Chair,  
Pathology and Laboratory Medicine

Former Associate Dean,  
Academic Affairs





I completed my undergraduate (1970) and masters (1972) degrees in the biological sciences at UCLA and completed my PhD in epidemiology at the Johns Hopkins University in 1977, where I stayed on the faculty. I was hired at UC Davis in 1988 as an Adjunct Associate Professor in what was then the Division of Occupational/Environmental Medicine in the Department of Internal Medicine. That Division merged with the Department of Community and International Health in the early 1990's and became the Department of Public Health Sciences in 2002, when it also formed its three divisions (epidemiology, environmental and occupational health, and biostatistics). I became a regular series Associate Professor in 1993 through a Target of Opportunity, one of three given to women in the School of Medicine that year, and became Professor in 1996, Epidemiology Division Chief in 2004, Interim Department Chair in 2007, and Department Chair in 2008. I have previously been Chair (2003-2006) and Graduate Adviser (1996-2001) of the Graduate Group in Epidemiology and still serve on its Executive Committee. I am also Editor of the professional journal, *Women and Health*.

I have taught and mentored largely graduate students, although I have also taught medical students. I have mentored many junior faculty in the School of Medicine and have received several faculty and mentoring awards. My research has largely been in the areas of women's health (including lifestyle and environmental exposures affecting ovarian and endocrine function, menopausal symptoms and timing of menopause) and cancer epidemiology (particularly early in my career). I have been involved in a number of NIH-funded, nationwide studies and published research findings in both of these areas.

UC Davis has been a campus that fosters collaboration and has grown its research acumen and national recognition in the 20 years that I have been here. It afforded me good opportunities for career growth. Other than in my research, I have had a couple of "Aha" career-related moments while at UC Davis, and I have continued to learn their lessons since and have realized that they also have applications to non-professional life. The first one occurred in the early 1990's when I realized that financial independence in my career was essential not only to my career success but also to my peace of mind. The second "Aha" moment occurred about ten years ago when I realized that the few really important moves that I made in my professional life occurred when I uncharacteristically put myself forward to request what I really wanted and felt I merited. This has been reinforced by retrospective reflection about those few really special times in my career that something seemed really important and truly mattered to me. This lesson is related to choosing one's battles carefully, so that this approach should not be used too frequently. Finally, I have realized that many problems that arise with others emanate from a lack of adequate communication, an important component of life that is not a required part of most curricula for our careers (or life).

# 1988

"...the few really important moves that I made in my professional life occurred when I uncharacteristically put myself forward..."

**ELLEN B. GOLD, Ph.D.**

Professor and Chair,  
Public Health Sciences





My story emerges from a history of working in interdisciplinary teams; an early interaction with a woman faculty member at UC Davis; and unexpected opportunities. Nearly 30 years ago, I was recruited, as a pharmacist, along with physicians and nurses by United Mine Workers to provide health care in a remote mining town in West Virginia. I interacted with miners, a Lebanese community, wonderful other locals including a smallish 80ish year old deaf woman – who invited me for possum on Thanksgiving, physicians from the US, England, and Philippines, and nurses who grew up in West Virginia and knew black lung like most of us know common colds. Those experiences of interacting with individuals from multiple cultures, languages, and perspectives positioned me well, after I completed my PhD and fellowship, to come to UC Davis as an assistant professor with one foot in a basic science department (Pharmacology) and the other in a clinical department (Internal Medicine). I came to believe then and still do that the way to “feel at home” in academic medicine is to understand and value our differences and to treasure those opportunities to work with individuals who come with different perspectives, but with a shared commitment to improve human health.

As an assistant professor, I never imagined or even thought about leadership – my goal was to “get tenure” and maybe become a “full professor”; the mere term seemed magical. A stint on a graduate student qualifying committee introduced me to Rivkah Isseroff. Rivkah voiced an opposing opinion to the male members. As they “looked over their glasses” preparing to dismiss her view, she remained resolute and I joined her. I don’t remember how it turned out, but after the meeting, she invited me to join a “women’s faculty group.” So what does a “woman’s faculty group” think about? For one thing – “how do we recruit and retain women faculty.” A woman leader from another institution offered an answer: “I will give you three junior women faculty and you give me one woman chair, and five years later I will have more women faculty;” an answer, both simple and brilliant.

A few years later, a male mentor appointed me Vice Chair for Research for Internal Medicine and soon thereafter made an “OHMAGOSH WHAT WAS HE THINKING?” decision to appoint me, a PhD, as Interim Chief of Cardiology. In those positions, still remembering the “answer,” in collaboration with other very supportive faculty, we recruited three women – two MDs and one PhD, almost doubling the number of women in Cardiology. Later, as Chair of Pharmacology, again with good partners, we recruited three more women. In my tenure as Executive Associate Dean, while it has been more challenging, we did recruit an outstanding woman to direct the UC Davis stem cell program. So, my colleague was right, getting women in leadership positions can make a difference in women recruitments. Now my hope is that we make UC Davis a great place for women to prosper – personally and professionally.



# 1989


"...the way to "feel at home" in academic medicine is to understand and value our differences..."

**ANN BONHAM, Ph.D.**

Executive Associate Dean,  
Academic Affairs

Professor,  
Pharmacology and Internal Medicine





In the early 1990's, soon after arriving at UC Davis, I was approached by several women faculty about starting an ad hoc committee to advise the Dean on faculty women's issues. We were a group of assistant professors determined to make a difference. One of us was a statistician and so we were able to perform a faculty satisfaction survey adapted from one developed at Johns Hopkins. In the first survey area of career advancement and mentoring, we found that proportionally, men had about twice the number of FTEs than women and that both men and women received less than optimal specific career guidance. Of our 14 recommendations, some have at least partially been implemented, most since 2000 (such as sending two women per year to the two AAMC women faculty development programs, establishing an annual mentoring award, standardizing the search process). Many others sound very similar to the ones we are still working on (developing a standard for mentors, formally recognizing and rewarding mentoring). One suggestion, the appointment of an Associate Dean of Women, was granted, but the position, held by Dr. Marge Steward, ended soon thereafter with the passage of Proposition 209. In the survey area of acceptance and involvement in faculty life, women tended to feel excluded from informal decision making and networking. Of the three suggestions we made, one wasn't implemented until several years later when a "new wave" of interest in women in medicine, led by Drs. Amparo Villablanca and Lydia Howell, established our regular program of Women in Medicine (WIM) events. In the third survey area of family life and work, we found that family posed more demands for women than for men. Of our four suggestions, most sound very similar to the items being considered by our present work/life balance committee such as flexibility for meetings, awareness of part time and delayed promotion options, and on-site child care. In the fourth area of harassment, we found that nearly 50% of women faculty reported knowledge of a faculty or staff being denigrated including sexual harassment. We suggested education on sexual harassment which now occurs regularly. We ended by asking that our survey be repeated every three years to look for progress. However, our statistician moved to Michigan, the rest of us moved on to nurture our own careers and personal lives, and the survey was never repeated. So how does this feel now, about 15 years later? It feels like progress has been slow. The issues are clear as are most of the solutions. When I showed our report to Dr. Sarah Gray, who joined our faculty well before I, she said, "that looks a lot like what we did 8 years ago!", an effort I had known nothing about. So progress is not only slow, it comes in waves in which we seem to have to reinvent the wheel each time. Let's hope this time, we won't sputter out but keep working steadily on.


# 1989

"The issues are clear as are most of the solutions."

## **JESSE JOAD, M.D., M.S.**

Associate Dean,  
Diversity and Faculty Life  
Professor, Pediatrics





I first came to UC Davis in 1979 to join the medical school class of 1983 after just having received my bachelor's of science degree from UCLA. I would have never imagined then that nearly 30 years later I would still be at the same institution and still be living in Davis! I also could not have imagined that my career would have taken me in the direction that it has, that it would become so rich and fulfilling, and that I would some day be a contributor to the School's Centennial celebration of early women faculty.

Like most women featured in this book, my journey has consisted of many firsts: I joined the faculty in 1990 as the first woman cardiologist to become a faculty member in Cardiovascular medicine (and remained so for over 10 more years); in 1994 I founded the Women's Cardiovascular Medicine Program, years later becoming aware that it was the first of its kind in the country; and in 2005 I became the first woman holder of an Endowed Chair in the Department of Internal Medicine. However, of all the experiences I have had at this institution, my career has been most shaped by something I did not know - that heart disease is the leading killer of women. Ironically, it was not until after completing my Internal Medicine Residency, Cardiology Fellowship, and sitting for specialty and subspecialty Boards that I became aware of it. I was not alone and subsequently learned that women and other physicians were equally unaware. What women didn't know was literally killing them. Shortly after that, I attended the AAMC Professional Development Seminar for Junior Women Faculty and had an opportunity to speak one-on-one to the woman president of a leading U.S. University about my developing interest in women's health and women's cardiovascular medicine. Those were the early days in the field of women's health. To my surprise, she advised that to enter the field would be "career suicide". How could something that felt so right be so wrong? As it turned out, something that felt so right was indeed right. It is important to follow your dreams and passion, while never taking your eye off the fact that you must nurture your career, family and friendships. This institution is in many ways a very different one from the one I joined three decades ago. Academic medicine is a rewarding, yet challenging career. However, the experiences and opportunities I've had have far surpassed those I could have planned for myself. I look forward to what the future holds, and to the accomplishments and path that will be charted by the women that will follow.

# 1990

"...you must nurture your career, family and friendships."

## **AMPARO C. VILLABLANCA, M.D.**

Professor, Internal Medicine

Frances Lazda Endowed Chair,  
Women's Cardiovascular Medicine








IN MEMORIAM





Lois O'Grady was one of the original faculty members of the UC Davis School of Medicine and the first woman on the school's faculty. She was born on June 9, 1936, in Medford, Mass. She received her bachelor's degree from Simmons College in Boston in 1958, and her medical degree from Boston University in 1962. She completed residency training in internal medicine, and fellowship training in hematology and oncology at Presbyterian-St. Luke's Hospital (now Rush University Medical Center) in Chicago.

Initially hired as an instructor, Dr. O'Grady rose through faculty ranks and served in many important roles. She eventually became vice chair of the Department of Internal Medicine from 1973 to 1977. She served as the Associate Dean of Student Affairs from 1976 to 1979, the first female to serve in that role in an AAMC institution. As a professor of medicine, she was honored with a Citation for Distinguished Teaching. In her clinical practice, she was widely respected by her colleagues as an expert on breast cancer and loved by her patients.

In 1978, Dr. O'Grady was promoted to full professor. That same year, the dean of the School of Medicine, Dr. John Tupper, asked Dr. O'Grady to formulate a new admissions policy for the school in the wake of the U.S. Supreme Court's landmark decision in *Regents of the University of California v. Bakke*. In that historic decision, the court barred quota systems in college admissions but affirmed the constitutionality of affirmative action programs giving equal access to minorities.

Dr. O'Grady retired from the faculty in 1994. She collected African art acquired during her frequent trips to many countries on that continent, and was an active member of a jazz society in Sacramento. She died at her Sacramento home on December 23, 2007 at age 71.

Dr. O'Grady was highly regarded as a strong mentor and advocate for women faculty. Many of the women on the faculty at UC Davis Health System owe at least part of their careers to Dr. O'Grady. She is greatly missed, but her memory lives on in her pioneering contributions to our school.

1967  
IN MEMORIAM


**LOIS O'GRADY, M.D.**

Professor, Internal Medicine

Former Associate Dean, Students

1936-2007





Dr. Eva King Killam was a founding faculty member of the School of Medicine. She and her husband, the late Keith Killam Jr., joined the new medical school in 1968. An expert on anesthetic, sedative and anti-convulsive drugs, Dr. Killam became the first woman president of the American College of Neuropsychopharmacology in 1988 and received the Paul Hoch Award for her numerous contributions to the College over the 41 years as a member of their council, and as a committee chair and scientific presenter. Dr. Killam became the second female president of the American Society of Pharmacology and Experimental Therapeutics in 1989-90. She was also editor in chief of the *Journal of Pharmacology and Experimental Therapeutics* from 1978-1991.

Dr. Killam was a graduate of Sarah Lawrence College and trained at the UCLA Brain Research Institute. After marrying Dr. Keith Killam, the couple moved to Stanford University in 1959. Dr. Killam moved to the new UC Davis School of Medicine when her husband became founding chairman of the Department of Pharmacology. She joined the faculty first as a professor of physiology, and in 1972, as a professor in the Department of Pharmacology. Her interests were varied, but centered on the effects and actions of drugs on brainstem reticular formation. Dr. Killam and her husband enjoyed traveling to Africa where they studied a troop of baboons that suffered from a type of epilepsy. In the course of her career, she published over 150 papers in reviewed journals. Dr. Killam retired from UC Davis in 1991 and died at her home in Pasadena at age 84.

Dr. Killam and her husband were instrumental in organizing the Western Pharmacology Society, which provides a forum for graduate students, postdoctoral fellows, and senior investigators to present their work. The memory of Dr. Killam and her husband lives on through the Western Pharmacology Society's Keith and Eva Killam Memorial Award, the American Society of Pharmacology and Experimental Therapeutics' Keith and Eva Killam Student Travel Fund, and through the work of the many trainees whose lives they touched.

1972  
IN MEMORIAM

**EVA KING KILLAM, Ph.D.**

Professor, Pharmacology

1922-2006





Crystie Halsted was among the first women to join the faculty of the UC Davis School of Medicine. Born on Sept. 30, 1936 in Gloversville, N.Y. as Crystalea Combothekras, Dr. Halsted attended Barnard College in New York City on a full scholarship from the New York State Regents. She received her medical degree from the University of Rochester School of Medicine in 1962 and completed an internship and residency at Cleveland Metropolitan Hospital of Case Western University from 1962-66, a period that included one year as chief resident in pediatrics. Her department chair and inspiration at that time was Dr. Frederick Robbins, who won the 1954 Nobel Prize in physiology and medicine for his work on the polio virus, which led to the development of the polio vaccine.

Dr. Halsted was a fellow in pediatric infectious diseases at Johns Hopkins School of Medicine from 1968 to 1970, and then was an assistant professor of pediatrics at Baltimore City Hospitals from 1970 to 1973. She joined the faculty of the UC Davis School of Medicine in 1973. As one of the few women on the medical school faculty at the time, she served as an important role model for the increasing numbers of women who chose medicine as a career. Dr. Halsted taught several generations of pediatricians and family physicians who practice in the Sacramento area.

A gifted physician and pioneer in treating AIDS and other infectious diseases in pediatric patients, Dr. Halsted was instrumental in initiating and expanding programs for abused and neglected children in Sacramento County. Her work in those areas fostered the development of many community experts who went on to work for child protection in the fields of social work, medicine, and law enforcement. In 1992, she received the Sacramento Women in History Award for her work with impoverished, abused, and neglected children. In honor of Dr. Halsted, the pediatrics department renamed its Pediatric Award for Excellence for a graduating senior student the Crystie Halsted Award in 2006.

Dr. Halsted died after a long illness on September 23, 2008 at UC Davis Medical Center at age 71. She is deeply missed but will remain in our memory as an extraordinary mentor and a touchstone for women faculty in Pediatrics and in our school.


1973  
IN MEMORIAM

**CRYSTIE HALSTED, M.D.**

Professor, Pediatrics

1936-2008





Dr. Eleanor McKinnon was a medical pioneer in the Sacramento community. She was the area's first woman obstetrics and gynecology specialist and a newspaper columnist. She served on the medical staff of Sutter General Hospital, Mercy General Hospital, and joined the faculty of the new UC Davis School of Medicine in the 1970s.

A Sacramento native, Dr. McKinnon was born in Oak Park and graduated from Sacramento High School. She attended Sacramento City College, and then Stanford University where she received a bachelor's degree in 1931 and MD in 1935. Dr. McKinnon interned at Stanford Hospital and completed one year of residency in obstetrics and gynecology at Children's Hospital, San Francisco before moving to pursue additional training at the Chicago Lying-In Hospital and Chicago Maternity Center.

Dr. McKinnon returned to Sacramento where she established a private obstetrics and gynecology practice. Though her original dream was to become a medical missionary, Dr. McKinnon provided many volunteer services to the underserved, including home deliveries to Chinese community who, by tradition, wanted these attended by a woman. She was the resident physician for the Fairhaven Homes for Girls, and served as a volunteer medical trainer in Afghanistan. Dr. McKinnon also enjoyed writing and had a syndicated newspaper column, *Questions Women Ask* which she wrote as Eleanor B. Rodgerson, M.D. She contributed many articles as a member of the editorial board of the *Sierra Sacramento Valley Medicine* magazine. In 2000, the Sierra Sacramento Valley Medical Society honored her with their Golden Stethoscope Award "for her memorable service to the community in the finest tradition of the profession."

Dr. McKinnon retired from medical practice at the Student Health Clinic at Sacramento State University in 1979 at age 70. She is remembered as an outstanding example of pioneering spirit, volunteerism, and as a dedicated physician.




1970s  
IN MEMORIAM

**ELEANOR B. RODGERSON McKINNON, M.D.**

Obstetrics and Gynecology

1909-2007



Dr. Suzanne Agnew Snively was the director of Student Health and Psychological Services at California State University Sacramento for 22 years. She was a member of the faculty of the UC Davis School of Medicine's Department of Internal Medicine in the division of infectious disease, and a preceptor for medical students at Clinica Tepati.

A 1949 graduate of the University of Minnesota Medical School, Dr. Snively remained in Minnesota for her internship. She then served as a resident at New York City's Bellevue Hospital, and was a fellow in infectious disease at Case Western Reserve University in Cleveland. After a few years in private practice in Sacramento, Dr. Snively joined the staff of the CSUS health center as a part-time physician. In 1965, she assumed the directorship and oversaw the center's dramatic growth from 3 to 50 staff members with the addition of many new services. She was most proud of the health education program which educated students on nutrition, birth control, and AIDS. When she retired in 1987, the student health center was named in her honor.

Dr. Snively and her husband were known for their philanthropy and were founding members of the Snell Memorial Foundation, a non-profit organization dedicated to research, education and advocacy for helmet safety standards. Dr. Snively's husband, George G. Snively MD, was a former chair of the UC Davis Department of Family Medicine and one of the major architects of this foundation. After her retirement, Dr. Snively established a health endowment fund at CSUS to support workshops, research, and training. She was a member of the board of directors of many organizations, including Planned Parenthood, the regional blood bank, and the Los Rios College Nursing Advisory Board. Following her death in 1992, she left a gift through her estate to provide graduate teaching assistantships. Dr. Snively is remembered for her community service, leadership and contributions to the health and education of many generations of students at both CSUS and at the UC Davis School of Medicine.


# 1970s

IN MEMORIAM

## **SUZANNE AGNEW SNIVELY, M.D.**

Associate Professor, Internal Medicine

1918-1992



Dr. Lynn Wiley was an expert on reproductive biology and internationally respected as a scholar. Her research focused on the earliest stages of embryonic development, including the changes that occur in the first few days of the embryo's life when a cell ball forms and then implants in the mother's uterus. This work in basic science had implications for studies of birth defects and cancer. Dr. Wiley was the first to describe the flow of electrical current that helps embryonic cells orient themselves and begin the process of differentiation that leads to fetal development. She also demonstrated that the effects of radiation were heritable, and showed that after male mice were exposed to radiation, their embryonic grandsons did not develop normally and were less fertile.

Over the years, a number of scientific advisory panels relied on Dr. Wiley's expertise in reproduction. She was a member of two NASA committees on cell and developmental biology and of the NASA Space Science and Application Advisory Committee, which determines strategy for allocating NASA research funds. She also served four years on a committee for the National Institutes of Health, reviewing grant applications and surveying research in the physiological sciences.

Dr. Wiley graduated from the University of California, Irvine, with a bachelor's degree in biological science in 1968 and a master's degree in radiological science in 1971. She was awarded a doctoral degree in anatomy at the University of California, San Francisco, in 1975. After a period of postdoctoral research at UCSF, she was an assistant professor of anatomy for three years at the University of Virginia. She joined the UC Davis faculty in 1984. Dr. Wiley was known for her humor and a balanced perspective in all aspects of her work. She was very dedicated to her students, both in the classroom and in the laboratory, and was a previous nominee for the prestigious UC Davis Prize for Undergraduate Teaching and Scholarly Achievement.

Dr. Wiley died June 19, 1999 at age 52 in an airplane crash in Paso Robles. The school mourned the loss of one of its finest teachers, and remembers her as a caring educator and an outstanding scientist who lived all aspects of her academic and personal life with remarkable intensity.

1984  
IN MEMORIAM

**LYNN WILEY, Ph.D.**

Professor, Cell Biology and Human Anatomy  
Obstetrics and Gynecology

1947-1999



## ACKNOWLEDGEMENTS

### EDITORS

Andreea Seritan, M.D.

Lydia Howell, M.D.

Amparo Villablanca, M.D.

Jesse Joad, M.D., M.S.

### PROJECT COORDINATOR

Lynn Hanacek

### ART DIRECTOR

Patricia Grind

### DESIGN

Circle Design

### CONTRIBUTORS

Elizabeth Abad

Cameron Blount

Cheryl Busman

Felicia Carrillo

Steve Gutierrez

Terri Madderra

Emi Manning

Kathe McDonald

Mary H. Tupper

© 2008 BY THE REGENTS OF THE UNIVERSITY OF CALIFORNIA.  
ALL RIGHTS RESERVED.





**UCDAVIS**  
*SCHOOL OF MEDICINE*

