Class Notes

80s

Marcel E. Salive (M.D. 1985), M.P.H., a medical officer at the National



Institute on Aging, National Institutes of Health, recently received the Ronald Davis Special Recognition Award from the American College of

Preventive Medicine. The award is given annually in recognition of leadership and outstanding contributions to the field of preventive medicine. Salive also is vice chair of the American Board of Preventive Medicine.

Thomas P. Waldinger (M.D. 1980, Resi-



dency 1985) received the Arnold P. Gold Foundation Humanism in Medicine Award at the annual meeting of the American Academy

of Dermatology in March. The award recognizes his career-long dedication to compassionate patient care. Waldinger specializes in skin cancer and geriatric dermatology at Oakwood Healthcare System in Dearborn, Michigan.

David M. Yousem (M.D. 1983) in March



became associate dean of professional development for Johns Hopkins Medicine. In his new role, he will work to support the promotion and retention of faculty. He also is the director of neuroradiology and vice chair of program development in the Russell H. Morgan Department of Radiology and Radiological Science.

90s

Lydia Best (M.D. 1996) received a Michigan State Medical Society

Presidential Citation at the organization's House of Delegates meeting in April. She is the medical director at Covenant Community Care in Royal Oak, Michigan, a faith-based non-profit community health center serving the citizens of metro Detroit. Best, who began as a volunteer with the organization in 2003, was recognized for her dedication and commitment to the humanitarian goals of the Hippocratic Oath.

00s

Stefani Hudson (M.D. 2003, Residency 2006) was named 2012 Fam-



ily Physician of the Year by the Michigan Academy of Family Physicians. She serves as medical director of the University of

Michigan Ypsilanti Health Center, working with individuals from a wide range of socioeconomic and ethnic backgrounds. She also volunteers in a leadership role at Ypsilanti's Hope Clinic, a non-profit organization which provides free care to the underserved, and works with the Medical School to involve students and residents in community work. —MF

Class Notes may be submitted online at www.medicineatmichigan.org/classnotes, mailed to 1000 Oakbrook Dr., Suite 100, Ann Arbor, MI 48104, or e-mailed to frostm@umich.edu.

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Alumni Profile Heinz Hoenecke: 'Sustainability is Always the Objective'

WHEN HIS FATHER, A LUTHERAN MINISTER,

set out with another clergyman to establish missions along the west coast of Africa, Heinz Hoenecke (M.D. 1954) was a senior at the U-M, trying to get into medical school. "I wished I could have gone along," he says. Some years later, his mother, a public health nurse, along with another young nurse, started a clinic in Zambia at one of the missions his dad helped found. By then, Hoenecke was practicing pathology in Phoenix, Arizona.

But his time finally came. "After being chained to a microscope for 35 years, I was anxious to break out," he says. He and his wife, Alice, turned their retirement toward altruistic ends and embarked on their first overseas venture in Swaziland, where Hoenecke served as a general practitioner.

"That's where I discovered a deficiency of surgical pathology services," says Hoenecke. "There were none. I'd see all these tumors and had no way of diagnosing them." On the plus side, however, "My clinical work in Africa helped me understand what the problems were," he says. "I worked in a ward of 75 patients, and in outpatient clinics and emergency rooms."

His next volunteer assignment, in a Zaire hospital, was just as frustrating. "I tried to set up a pathology lab but was unable to obtain the reagents and necessary supplies," he recalls.

Realizing that few African mission hospitals had the surgical volume to justify establishing their own laboratories and hiring a pathologist, he launched his first central pathology lab project in Nairobi, Kenya. "In Kenya, all roads lead to Nairobi," he says. That made it possible to maintain a regular flow of specimens and reports.

His system there resembled the one he and colleagues set up when he directed a lab in Arizona that served remote American Indian hospitals, in which specimens and reports hitched rides on a vegetable truck and a bank courier vehicle that traveled between his location, the nearest lab and the reservation. His medical and administrative skills were beginning to align with the needs he saw.

When an article in the College of American Pathologists' *CAP Today* calling for volunteers to staff the lab on



a rotating basis reaped a gratifying harvest, he organized Pathologists Overseas to institutionalize the concept. That was in 1991. Since then, Pathologists Overseas has sent hundreds of volunteers to establish pathology laboratories, provide diagnostic pathology services, and train local physicians as pathologists in Eritrea, Madagascar, Nepal, Bhutan, Peru, El Salvador, St. Lucia, Christmas Island and Ghana. Victor Lee, M.D., Ph.D., was one of the earliest volunteers and has been an integral partner ever since, and Alice was always an encouraging and active participant.

The lab in Kenya was eventually transferred to the Kijabe Mission Hospital and is still in operation, staffed by volunteers recruited by World Medical Mission of Boone, North Carolina. "Sustainability is always the objective," says Hoenecke. "The goal is to make them self-sufficient."

The goal is also to improve the societies in which the labs are sited. Some of what Hoenecke calls "spinoffs," many led by program volunteers, have included building schools, furnishing dental supplies, helping control diabetes, and a project Alice headed which supplied solar cooking panels to deforested areas of Madagascar.

"There are a lot of things you can do," he says. "You're there, and you see these problems. It isn't only pathology. I like the challenge. Sometimes your solution isn't that good, sometimes you might look foolish, but you've got to hang in there." —JEFF MORTIMER