UPCOMING RFA MEETING

“CONSUMERS’ PERCEPTIONS OF GENETICALLY MODIFIED FOODS AND THE CONTROVERSY OVER MANDATORY LABELING”

Speaker: William Hallman, PhD
Professor and Chair
Department of Human Ecology
Rutgers, the State University of New Jersey

Friday, May 9, 2014
12:00 pm – 1:30 pm
Dean’s Conference Room
Rutgers Robert Wood Johnson Medical School
Piscataway

All current and retired faculty and staff are welcome to attend. Lunch will be available, and contributions for the lunch may be made at the meeting. Please RSVP to Paul Lehrer (732-235-4413; e-mail: Lehrer@rwjms.rutgers.edu) by Monday, May 5, if you plan to attend and wish to reserve lunch.

ANNUAL REPORT
OF THE RFA PRESIDENT

By Eckhard Kemmann, MD
Robert Wood Johnson Medical School
Retired Faculty Association President

2013 was the year of “The Merger.” The process affects not only faculty of the legacy institutions, but also their retired faculty. So, we are a part of it and embrace it. During the year, our Executive Committee discussed how to assist, put our resources to use, and how to adjust to the new realities. The integration process will continue for some time.

The Program Committee again did an excellent job selecting speakers for our four meetings. We received an inside look at the integration process, heard about drug decriminalization, discovered the history of the creation of a medical school in N.J., discussed issues of retirement, and learned about global health care work by faculty and students.

Our newsletter provided a summary of these presentations, talked about developments at the school, and kept us up-to-date with friends and colleagues from afar. Sadly, we had obituaries.

Our tax-exempt status as a 501 (c) (3) allowed us to collect $4,000 to support travel expenditures of medical students participating in the approved global health elective.

(Continued on page 2)
Annual Report
(Continued from page 1)

A list of thanks would be again very long, - just look at our committee members, all working to make this a better organization. A special thank you goes to Paul Manowitz for his work as editor of the newsletter. We extend special thanks for their support to Peter Amenta, MD, PhD, Ms. Marie Kleeman who helps with the newsletter and all of our mailings, and Ms. Ruthe Gardino who, among other things, keeps our website current.

My wishes remain the same. This is your organization and your participation makes it alive. Take advantage of it. Also, there are a myriad ways to spend money, but are there any better ways to have it make an impact than this: supporting medical students in their learning by exposing them to the medical problems in a third world country. My plea, support our students in the Global Health Fellowship Program.

Have a good year. And stay healthy, please.

Eckhard Kemmann, MD
President RWJMS RFA

Vicente Gracias, MD, Appointed Rutgers RWJMS Interim Dean

Vicente Gracias, MD, was appointed the interim dean of Rutgers RWJMS effective February 1, 2014. Prior to this appointment, Dr. Gracias was chief of the section of trauma and surgical critical care in the Department of Surgery at RWJMS and Director of the Level 1 Trauma Center at Robert Wood Johnson University Hospital.

Dr. Gracias received the MD degree from the University of Utah School of Medicine in 1991 and did his residency training in general surgery at the University of Illinois. He completed a fellowship in trauma/surgical care at the University of Pennsylvania Medical Center and was promoted to its faculty. He joined RWJMS five years ago and is presently professor of surgery.

Dr. Gracias has published widely on the treatment of trauma patients in the surgical intensive care unit and has been a principal investigator or co-investigator on a number of grant awards.

Dr. Gracias assumed the position of interim dean following Dr. Peter Amenta's decision to step down after serving as dean for the past eight years. Dr. Amenta will resume his career as professor of pathology and laboratory medicine at RWJMS. A national search will be conducted to select a permanent dean.
WHY AND HOW RUTGERS MEDICAL SCHOOL’S NAME WAS CHANGED TO RWJMS

By Stanley S. Bergen, Jr., MD

[Editor’s Note: Stanley S. Bergen, Jr., MD, served with distinction as President of the College/University of Medicine and Dentistry of New Jersey for 27 years, from 1971-1998. A twelve part oral history interview with Dr. Bergen was conducted by Ms. Lois R. Densky-Wolff, who was the Archivist/Librarian of the Special Collections Department of UMDNJ. The interviews were transcribed and bound in two volumes entitled “An Interview with Stanley S. Bergen, Jr., M.D.” that are housed in the Special Collections Departments of the George F. Smith Library in Newark and the Alexander Library in New Brunswick. Mr. Bob Vietrogoski, the Head of Special Collections at the Smith Library, was instrumental in bringing the transcripts to our attention and helping us view a copy. The following selection was from an interview of Dr. Bergen conducted on September 11, 1995.]

L. DENSKY-WOLFF: But during these early years of RMS’s affiliation with the college, there was always great confusion in the public’s mind as to which institution Rutgers Medical School belonged to, whether it was Rutgers University or the College of Medicine & Dentistry of New Jersey. Don’t you agree with that?

S. S. BERGEN: Yes. Oh, tremendous confusion in everybody’s mind, including such things as the federal government and grants; the lawyers and litigation against us for liability cases often would end up on the desk of Dr. Bloustein (President of Rutgers University). There was tremendous confusion. Some people did nothing to clarify it. In fact, they seemed to relish the confusion. I think there was a group of faculty at the Rutgers Medical School that resented that they were ever put into the College of Medicine & Dentistry of New Jersey. They wanted to be part of Rutgers. They had this dream of going back to being part of Rutgers University at some time in the future. There was a companion group at Rutgers University, mostly in the sciences, who also wanted the medical school back. Felt that they were not a complete university or a comprehensive research university without a medical school. So we had tremendous confusion over that.

L. DENSKY-WOLFF: Let’s talk a little bit about how the college tried to rectify the problem. One of the ways was there was a name change in 1986 that affected both Rutgers Medical School and the Middlesex General Hospital. Would you tell me how this came about and what happened?

S. S. BERGEN: Dr. Reynolds, the dean at the Rutgers Medical School, and I recognized that there was this problem. We also recognized that this problem was very divisive in its nature in that it gave a rallying-around point. It gave a hope for the future kind of overlay to the problem. In that as long as we’re called Rutgers Medical School, it means we’re going to go back to be part of them. It means we really are part of them. It means that who we identify with, after all, geographically. We sit right on their campus and everything else.

The first problem was, if we’re going to rename it, what are we going to rename it? We had all kinds of ideas. We renamed both the schools or all three of the medical educations programs: CMDNJ-North, CMDNJ-Central, CMDNJ-South. We thought that that’s ridiculous. It sounds like three high schools in a big city where you have West High and North High and things like that. Then Dick Reynolds got an idea which was a very good idea at its inception. And that was to rename the school the William Carlos Williams Medical School. Dick is a renaissance man. He’s a very interesting man in that he’s steeped in medical education, but also in the history of medicine. He’s very interested in people who have written about medicine, people who are physicians in their own right and have gone off into fields like poetry and literature and art and music. Many of these people have performed equally well in both fields. He’s now, in fact, edited a book on this. He’s edited a book on what it means to be a physician, and he has written a lot of short stories and articles and monographs. So he knew all about William Carlos Williams.

I knew that William Carlos Williams was a physician. I knew that he was from New Jersey. (Continued on page 4)
I knew that he also was a poet of some note. But that’s about as much as I knew about him. Dick educated me, broadened my interest and understanding that this was a man who was a general practitioner in the Passaic area of New Jersey, the Paterson area. This was a man that had as his friends all kinds of artists and literary people, out-of-work actors and actresses. That he would open his home to those people from time to time, allow somebody to use the back bedroom when they were down and out, and didn’t have any place to live. He was also known for taking care of the poor if you couldn’t afford it. He would walk into people’s homes along the Hudson River who didn’t have two nickels to rub against each other, care for them or their children, never ask for any payment. Would have a little work done for him maybe around his home, or get a piece of art given to him by an out-of-work artist—aart that later became very, very important art. So he had this wonderful aura and atmosphere about him, in addition to his role as a physician. He seemed like the perfect thing. I mean here is a New Jersey physician, born and bred in New Jersey. We found out he had two sons, both still living, one living in the family home. We had dinner one night with Mr. Williams and his wife, and he said to us, “I think it would be a great honor for my father’s name to be attached to your medical school. It would be just incredibly fine for the family. We have no opposition to it, and anything we can do to help.” One or two of our faculty got very turned on by the idea. In fact one, our chairman of OB/GYN at the Rutgers Medical School, a Dr. Jim Jones, went out to a couple of cemeteries, did some stone rubbings of some headstones, and, you know, kind of collecting the background information about the family. We had touched base with our board of trustees, upon which Rabbi Freedman served. There were no warts on Dr. Williams. His poetry, though some pieces of it, were a little controversial, some of the terms he used, and some of the subject matter. We found nobody who had any opposition to him on a social or emotional basis of any kind. And then, out of the clear blue sky, somebody called our attention to that he had been considered an anti-Semite. I got in touch with Rabbi Freedman who looked into it a little bit. I called the Anti-Defamation League and talked to Jeff Maas there. He did some of his own research. The amazing thing about it was that the rabbi didn’t seem to know about this, that Jeff Maas didn’t seem to know about it, or anything else. But what began to emerge was that some of his friends, who were considered Communist sympathizers and actually had been investigated by the Un-American Affairs Committee of the Congress, in the fifties—I’m trying to think of the man’s name who was from Wisconsin. Senator—?


S. S. BERGEN: McCarthy. It evolved to the fact that William Carlos Williams, Dr. Williams, had been on two or three radio talk shows with some of these people. And of course, there was the association history that did not look too good for him. But he actually made some statements himself on a couple of these shows that could have been read or construed as anti-Semitic. The rabbi said, “Pshaw! Tempest in a teapot. He was making editorial comment. And, Stan, if everybody who has ever said anything was held to some kind of standard like this, everybody.” And he said, “Some of the worst anti-Semites in the country are Jewish themselves.” He said, “The way they talk, and the things that come up, and everything else.” He said, “I don’t see anything.” I called Jeffrey Maas back and told him what we’d found. And he said, “Look, do what you think’s right for the school. Do what you want to do. We’re not going to make an issue out of it. A lot of people that I’ve talked to don’t think it’s that significant. It was one of those things where he was kind of caught up in the discussions of the time. Everybody tells me who knew the man, or knows anybody who knew the man, this guy was not an anti-Semite. I mean he might have said these things, but that was not him. I mean he treated everybody alike and was a very liberal, broad-minded person.” Dick and I talked it over, and we said, we don’t care. Whatever the situation is, it’s risky, and we don’t want to be associated with it. It would be a bad move. So that ended the William Carlos Williams [School of Medicine].

What do we do? We said, “Gus Lienhard School of Medicine.” Gus had been on our board and the board of the foundation, the Robert Wood Johnson Foundation. He had become the chairman of the board of the Robert Wood Johnson Foundation. His whole life career had been associated with Johnson & Johnson. We (Continued on page 5)
went to see Gus, and we read it that Gus was being appropriately noncommittal and appropriately correct in not jumping to the idea of his name being put on the school and saying, “oh, no, no, no, no. Not me.” I then got a telephone call from his son who was in a Ph.D. program at Dartmouth College, who said to me, “Dad really doesn’t want his name associated with the school. His name is already on a nursing school at Pace College where he was a graduate. To this day he feels uncomfortable about that. He wanted to give them the money as a gift, not as a namesake.” And he said, “He really means it when he says, no.”

So we went back, and saw Gus, and we said, “Gus, now you’re on the hook. You say, no, and we’re going to follow that and accept and respect your opinion. You’ve got to come up with a name. You’ve got to come up, and you’ve got to help us get a name and get somebody. How about getting the Johnson Family to agree to using the General’s name?” And he said, “Oh I don’t know about that. I work for the General, very good friend of his, I could certainly talk to the widow with no problem at all...Really only the grandson, Woody, is in any way really involved with the corporation any longer.” So we said, “But, Gus, we’ve got to do something. Would you talk to some of the family?” “All right, all right, I will. But I’m not sure it’s a good idea.”

Well, he did. But in the meantime, just fortuitously, I happened to be with Jim Burke, the president of Johnson & Johnson, one night, and I talked with him about it. He thought it was great. I mean he took to it like a duck to water right away. He thought it was a perfect idea. Gus came back and said he had gotten a lukewarm reception. But the family, if we didn’t expect any monetary gift from them, and it would just be a closeness of the relationship between the corporation, the foundation, the school, those things, that was fine.


S. S. BERGEN: Right, right. So it seemed like we were beginning to make some headway. Then we got the idea—somebody did, I forget who. I think it may have been Bill Walsh got the idea. He was still on the board, no longer the chairman of the board, of the hospital, but I think it may have been him. He said, “Now’s the time to break the mold. Let’s change the name of the hospital at the same time we change the name of the medical school.” Well, if you think that Jim Burke was excited over naming the school, when we suggested that, the hospital that General Johnson had been so vitally interested in, the hospital that he’d spent—anecdotally stories about going there one or two hours a day just to see how it ran, help it run, and put in his two cents. He went around the nation speaking about the U.S. hospitals and this great hospital in New Brunswick. I mean, Mr. Burke thought it, you know, perfect.

So we got the two boards, the board of the university and the board of the Middlesex General Hospital; they both were in accord. To show the commitment of Johnson & Johnson Corporation and the Robert Wood Johnson Foundation, Mr. Burke—we did it on University Day—and Mr. Burke gave the address and formally announced it. And how proud the corporation was to share their name with the university, and with the school and the hospital. The Foundation made similar remarks, David Rogers representing the foundation as its president. And there we were.

L. DENSKY-WOLFF: ...There’s obviously been a lot of changes in what’s now Robert Wood Johnson Medical School. I have the impression that especially in the last few years or so that the school really has built up its reputation considerably. I’d like to ask you what you think accounts for this.

S. S. BERGEN: I think there are a number of factors. I think they are located in a part of the state that does not have impinged upon it either the New York influence or the Philadelphia-Baltimore influence as much as we have experience in the north and the south. Therefore they are able to develop their programs separate from that influence and competition. I think the second thing is we have been very successful in recruiting a top-flight faculty and faculty leadership there, and some of that is due to the presence of Rutgers University, but also Princeton University. I mean you’ve got that little 12, 15 mile corridor there with these two institutions being very influential...■

2Rabbi Martin Freedman, Member, UMDNJ Board of Trustees, 1977-95.
MY SUMMER EXPERIENCE IN INDIA

By Julie Szymaniak

Hello esteemed members of the Retired Faculty Association!

My name is Julie Szymaniak and I am currently completing my second year at RWJMS. This past summer I, along with several of my classmates, travelled to Himachal Pradesh, which is a state located in northern India.

Specifically, we travelled to Shimla and from there to the isolated Rupin Valley, which is inaccessible six months out of the year when heavy snowfall closes Chansal Pass, the only road into the valley. It is a largely agrarian society, with 90% of the state’s population living in rural areas. Interestingly, the state has found large economic success in apple farming. The program I participated in is called Himalayan Health Exchange or HHE. It was founded in 1996 by a Himachal Pradesh native, Ravi Singh, and has continued to provide medical care to the area since then. I chose it based on recommendations from other RWJMS students, and because the program was well established and provided some continuity of care by returning annually.

The program was three weeks long, of which there were 10 clinic days. Our route included five villages where we set up medical camps, and due to the composition of the health care professionals in our trip, we had two internal medicine tents, gyn, peds, dental, and a pharmacy. As medical students, we were assigned to a different tent each day, and were responsible for developing a history of present illness and performing a focused physical exam, presenting to the attending, and then working with them on the assessment and plan for the patient. The autonomy and learning curve were remarkable: the first day we were shaking in our boots, but by the second day there was an organized pattern to our work.

A major component of our trip was camping and hiking. We lived in tents for the duration of the trip, and hiked to the villages on several occasions. The scenery was incredible. Each morning we woke up with yoga, and during the evenings often had student clinical presentations as well as anthropology lectures that furthered our knowledge of the region.

(Continued on page 7)
My Summer Experience
(Continued from page 6)

Unfortunately, our clinic days were cut short when a freak three-day storm caused intense flooding in the region, as well as in states to the south of us. Perhaps you heard of this flooding in the news as it stranded tens of thousands of people and over 5000 people are missing, presumed dead. We were forced to evacuate at night by foot as the river continued to rise and flooded our campsite. Thankfully, our whole group of thirty-some people was graciously hosted in the home of the village’s teacher. Due to the numerous landslides in the area, our cars were unable to drive up the only road to Chansal Pass. We had to continue our journey back towards Chansal Pass by foot, with the hopes that either a bulldozer would clear the lower road or that new cars would meet us at the other side of the Pass. Just in the nick of time, the road was cleared and we made it back to Shimla in time for everyone to catch his or her flight home. Surviving this natural disaster brought our group closer together and will remain an unforgettable experience for us.

One of the observations we made in clinic was the stark difference in patient presentations from what we were used to seeing in New Jersey. Rarely did we encounter hypertension, diabetes, or obesity. Rather, there was a large number of patients presenting with epigastric pain, musculoskeletal pain, headaches, and gynecologic issues. We also saw several patients with STIs, skin infections, tuberculosis-like symptoms, and scythe wounds.

Our arsenal of medications consisted only of a limited pharmacy, pulse oximeter, handheld EKG monitor, glucometer, and urinalysis test strips. Therefore, our differential diagnosis was completely reliant on our history and physical exam skills, which as a first and second year medical student is crucial to develop.

One of the major difficulties we experienced was the lack of adequate translators. There was usually one translator assigned to each tent, however there was a large variation in the skill level of the translators. Throughout the program, we learned to adapt our history taking and recognize that when the patient’s account did not make sense, it was time to call upon the more veteran translators. We found that it was helpful to use a few Hindi phrases so that the patients felt more at ease during the physical examinations. The other shortcoming was the lack of a female translator, which made translating during gynecologic exams challenging. The solution, though not ideal, was to have the translator explain in detail the reason for and the steps of the exam prior to the exam, and then step out of the tent as the female physician performed the exam.

The clinical experience gained on this trip is often hard to come by for first year medical students and we all feel that it immensely improved our history taking and physical diagnosis skills. It was interesting to work with physicians and medical students from the U.S., UK, and India. Plus the scenery was beautiful. Lastly, it’s truly a much-needed experience to forgo the luxuries that we are accustomed to, such as indoor plumbing. It brings out a level of personal reflection and appreciation.

Your support of the global health fellowship translated to a literally life-changing experience for my fellow classmates and me, and I cannot emphasize enough how thankful we are!
Marian R. Stuart, PhD  I officially retired from RWJMS on July 1, 2008. My last official act was to give a commencement address to the residents of the Capital Systems Family Practice Residency Program. A few months later, Radcliffe Publishing released the 4th Edition of The Fifteen Minute Hour: Therapeutic Talk in Primary Care authored by Stuart and Lieberman. I continue to be delighted when I am invited to speak at various CME venues. In the past year I presented at a hospital in Mishawaka Indiana, gave a Webinar for General Practitioners in the UK and presented at the Annual Scientific Assembly of the Ontario College of Family Physicians in Toronto, Canada. I also continue to see patients on a regular basis in my private psychology practice in my home. I once claimed that I would never retire, and I suppose that might actually be true, at least for the moment.

On a more personal level, a little over two years ago I married my long-term companion, Keith R. Sagers, and we sold my house in Morristown and moved to Tapestry, a brand new over 55 age restricted community, in Skillman, N.J. just outside of Princeton. We love this area and are very involved with the Princeton dance community, dancing every Wednesday evening, most Saturday and some Friday evenings. We also travel to weekend dance events such as the Florida Snow Ball in January, the New York Flurry Festival in Saratoga Springs in February, and the New England Folk Festival in April. We do New England Contra Dancing (much like square dancing but done in lines) as well as English Country Dancing (much more elegant--think Jane Austen movies). We refer to ourselves as "dance gypsies."

Since I left the medical school, we have also done some serious travel including a cruise to the Antarctic, visits to Machu Picchu and the Galapagos Islands, and several trips to the UK where we explored the Lake Country. This year we took a cruise to the Arctic, which was spectacular--visiting Oslo, the Svalbard Islands, Greenland and Iceland. Other than witnessing the disturbing effects of global warming--you can see how the glaciers are retreating--it was a magnificent trip. We also did a 21 day Mediterranean Cruise, a luxurious exploration of the west coast of Italy, Corsica, Sicily, Monaco, Barcelona and assorted islands. This coming summer we plan to take a Canadian Railway trip from Vancouver to Jasper Park and then South to Banff. On the way there, we will stop in Washington State and visit my son, Peter, his wife, Hall, and my 16-year-old granddaughter, Alexandra. My daughter, Laurie, who is doing an internship as a Unitarian minister, will be there at the same time, so that will be lovely. I got to see the two Philadelphia granddaughters at Christmas time. My grandson, Zachery, who graduated from NYU Film School, is living in NYC and making a living as a film editor. He will be getting married in November. We are looking forward to attending the wedding, which will be held at a beach resort in Mexico.

As you can see, my life is full. I am fortunate that my health is excellent--I visit the local health club four mornings a week, I swim two times a week and take Pilates classes the other two days. Before leaving Morristown, I became a Certified Pilates instructor and taught one class at the YMCA for over a year (They actually paid me $18.50 an hour). For an "academic" verbal person, this has been one of my "most fun" achievements. I now teach a Pilates class every Monday morning in our Tapestry community clubhouse. No pay, but great satisfaction. I wish everyone reading this good health and much happiness in whatever phase of retirement you may find yourself.
PHOTO OF THE MONTH

The Retired Faculty Association invites all retired faculty and staff to submit their interesting and pertinent photographs with original content (no copyrighted or trademarked material) for publication in this newsletter. One photo will be selected for publication in each newsletter. The photos should be of such quality that the printed version will have 300 dpi (dots per inch). Send the photos as an email attachment to Manowitz@rwjms.rutgers.edu.

Peter Amenta with members of the RWJMS Retired Faculty Association Executive Committee: From left to right: Ron Morris, Michael Gochfeld, Peter Amenta, Eckhard Kemmann, and Paul Manowitz. Paul Lehrer and Donald Wolff, who are also members of the Executive Committee, were absent when the photograph was taken.
Rutgers Retired Faculty and Staff Association Center Grand Opening

By Carolyn Knight-Cole
Associate Vice President of Human Resources Operations
Rutgers University Human Resources

The grand opening of the Rutgers Retired Faculty and Staff Association (RFSA) Center was held on February 28. Members of the RFSA Advisory Council and long-time supporters, including former Rutgers President Dick McCormick and Brent Ruben, professor of communication and executive director of the Center for Organizational Development and Leadership, joined Dick Edwards, executive vice president for academic affairs and Vivian Fernández, vice president for faculty and staff resources, in formally opening the center. The Retired Faculty and Staff Association and the center and its activities serves as an important bridge between the university and the retiree community—a bridge that has benefits for all involved.

Located in the Administrative Services Building II on Route 1 in New Brunswick, construction of the center was recently completed with funds provided jointly by the university and Todd Hunt, director of the Rutgers Retired Faculty Association and a former faculty member of the Department of Communication. Carolyn Knight-Cole, associate vice president of human resources operations, served as project manager for the building of the center and is leading the effort in the development of the retiree website and retiree database.

Ms. Fernández is the officer responsible for the RFSA and will oversee policy development, planning, and coordination of programs and services related to retired faculty and staff. This building also houses the Office for Faculty and Staff Resources and the Center for Organizational Development and Leadership, both of which have been instrumental in the creation of the RFSA and in promoting and supporting its activities.

The Retired Faculty and Staff Association Advisory Council, chaired by Gustav Friedrich, PhD, is currently at work outlining potential programming and use of the center’s facilities. I’m pleased to report that University Human Resources has recently hired a staff person to provide administrative support for the work of the RFSA and center activities.

Rutgers University organizations that may find center facilities useful include the Rutgers Retired Faculty Association, the Silver Knights Staff Retirees Association, the AAUP Emeriti Assembly, the Osher Lifelong Learning Institute of Rutgers University, the School of Environmental and Biological Sciences’ Office of Community Engagement, and the RWJMS Retired Faculty Association.
Robert Wood Johnson Medical School Retired Faculty Association
Global Health Fellowship Fund

The RFA is sponsoring medical students to learn, help, and teach in foreign countries, a potentially life-changing experience under the aegis of the Global Health Initiative of Robert Wood Johnson Medical School. The RFA is helping to support summer programs or international electives for medical students and is asking you to consider adding your support to this effort. All funds go to help the students without any deduction for administrative expense.

You can submit your donation to support the RFA Global Health Fellowship Fund by sending a check made payable to the “RWJMS Retired Faculty Association” and mail it to Paul Lehrer, PhD, Department of Psychiatry, Rutgers Robert Wood Johnson Medical School, 671 Hoes Lane, Piscataway, NJ 08854. All contributions are tax deductible as charitable contributions. The RFA is a 501(c)(3) tax-exempt organization.

The following people have made donations to support this fellowship in the 2013/2014 cycle:

- Peter Amenta
- James Chandler
- Lourdes Laraya-Cuasay
- Michael Gochfeld
- Norma Greenfield
- Eckhard Kemmann
- Paul Manowitz
- Virginia Mehlenbeck
- Paul Mehne
- Robert Risimini
- Paul Smilow
- Marian Stuart
- Mary Swigar
- Frank Wilson

Erratum: The captions in the January 2014 issue of the RFA newsletter were incorrect. The correct captions are as follows:

a. Caption for picture on page 8 of the Newsletter:
   Gisela Witz Painting the Lilly Brook at Leonard J. Buck Garden in Far Hills, NJ
b. Caption for picture on page 9 of the Newsletter:
   Painting by Gisela Witz of a Dogwood Tree before Bloom in her Backyard

RETIRED FACULTY ASSOCIATION MEMBERSHIP

The members listed below have paid their RWJMS RFA 2014 dues.

- David Alcid
- Peter Aupperle
- Gordon Benson
- Bruce and Mary Breckenridge
- Barbara Brodsky
- Wilfredo Causing
- Joan Chase
- John Crowley
- Norman Edelman
- Drik Eikenberry
- Herbert Geller
- Michael Gochfeld
- Norma Greenfield
- John Harrigan
- Richard Harvey
- Marcia Jessup
- Eckhard Kemmann
- Virginia Mehlenbeck
- Peter Scholz
- David Seiden
- Norman Sissman
- Frank Snope
- Paul Stein
- Marian Stuart
- Marshall Swartzburg
- Mary Swigar
- Arthur Upton
- Frank Wilson
- Alan Wilson

- Peter Aupperle
- Gordon Benson
- Bruce and Mary Breckenridge
- Barbara Brodsky
- Wilfredo Causing
- Joan Chase
- John Crowley
- Norman Edelman
- Drik Eikenberry
- Herbert Geller
- Michael Gochfeld
- Norma Greenfield
- John Harrigan
- Richard Harvey
- Marcia Jessup
- Eckhard Kemmann
- Virginia Mehlenbeck
- Peter Scholz
- David Seiden
- Norman Sissman
- Frank Snope
- Paul Stein
- Marian Stuart
- Marshall Swartzburg
- Mary Swigar
- Arthur Upton
- Frank Wilson
- Alan Wilson
Retired Faculty Association

If you have not already done so, please send in your 2014 dues. Dues are collected for the calendar year. Also, if you like to support medical students to have an opportunity to participate in the Global Health Program, consider donating to the RFA Global Health Fellowship Fund. Please send your check to Paul Lehrer. Both contributions are tax deductible as charitable contributions. Thank you.

RWJMS Retired Faculty Association 2014 Dues

Benefits of RFA Membership:

• Defining, advocating for and publicizing the benefits of retired faculty at RWJMS,
• Fostering ongoing engagement and participation of retired faculty in RWJMS activities,
• Promoting continuing interaction among retirees,
• Providing information and options for faculty considering retirement, and
• Interacting with other academic retired faculty associations (e.g., Rutgers Retired Faculty Association, The Rutgers Retired Faculty and Staff Association).

Please cut along the dotted line below and return this portion with your payment.

Please Print:

Name: __________________________________________
Address: ________________________________________
______________________________________
Phone: _________________________________________
E-mail address: ________________________________

Please enclose a check for a donation to the Global Health Program and/or for dues ($15) made payable to the “RWJMS Retired Faculty Association” and mail the check to Paul Lehrer, PhD, at the address shown below.

Global Health Program (indicate dollar amount) __________________
RWJMS RFA Dues ($15) ______________________
Total Amount __________________________

Paul Lehrer, PhD
Department of Psychiatry
Rutgers Robert Wood Johnson Medical School
671 Hoes Lane
Piscataway, NJ 08854

Please include any personal information that you wish to share with others. Thank you.

April 2014