

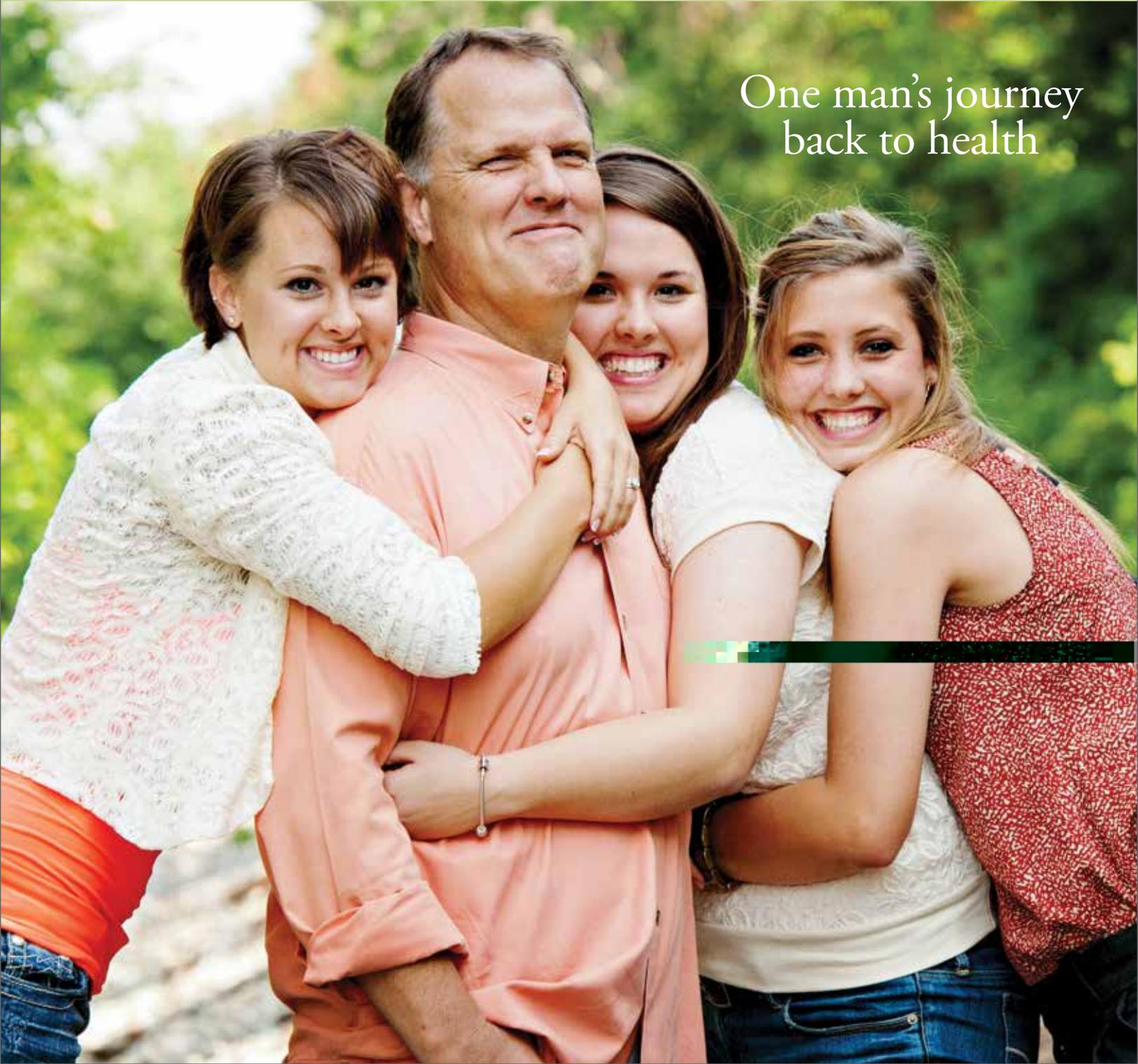
# St Paul

FALL 2015

MEDICAL FOUNDATION

IN THE SOUTHWESTERN MEDICAL DISTRICT

One man's journey  
back to health



This magazine is a publication of St. Paul Medical Foundation, a support organization of UT Southwestern Medical Center.

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**About the cover**

John Godwin is shown with his daughters (l to r) Ashley, Morgan, and Courtney, who almost lost their father in 2013 to a life-threatening heart attack. A patient at UT Southwestern Medical Center's St. Paul University Hospital, Mr. Godwin received a new heart and has made an extraordinary recovery. Beginning on page 4, Mr. Godwin chronicles his experience in a candid, inspirational first-person account.

## CHAIRMAN'S LETTER



**H**OW COOL IS IT that the band accepting Soul Train's Legend Award last November, Kool & the Gang, will be the featured entertainers at St. Paul Medical Foundation's Legends gala this fall.

To be precise, on Saturday, September 26, at the Hilton Anatole Hotel, after enjoying a reception and seated dinner, some guests will be out on the dance floor while others are tapping their toes. But all will be loving the sound of the familiar songs from the band's playlist, drawn from a half-century of great jazz, R&B, soul, funk, and disco recordings. (For details on how you can participate, please see the article on page 16.)

To experience all the fun surrounding the gala, however, is not to lose sight of the much more serious purpose behind it, which is funding heart, lung, vascular, and cerebrovascular programs at UT Southwestern Medical Center.

Reminding us of the event's true function are the many completed projects assisted by previous Legends – most recently the St. Paul Medical Foundation Heart, Lung, and Vascular Therapy Gym in the new William P. Clements Jr. University Hospital (please see the article on page 12). The combined income from several Legends galas helped build and equip this new gym, which will aid in the recovery of countless UT Southwestern heart and lung patients in the years ahead.

All of this adds up to an enviable position for everyone here at the Foundation. Given that our two signature special events – the Legends gala and the Transplant Tee golf tournament – consistently deliver both a good time and significant income, we have as much fun getting the funds as we do giving them away – whether for important research, the latest equipment, or exciting capital projects like the new St. Paul Medical Foundation Therapy Gym.

RICK O'BRIEN  
FOUNDATION CHAIRMAN (2014-2015)

## PRESIDENT'S MESSAGE



**W**E ARE PLEASED TO RETURN TO OUR TRADITIONAL FORMAT for this magazine, after devoting the previous issue entirely to the history of St. Paul University Hospital.

I hope you enjoyed reading about that remarkable institution's long years of dedicated service and the legacy of caring it left to UT Southwestern Medical Center's new William P. Clements Jr. University Hospital. If you know of others who would be interested in St. Paul's history, please notify our office at 214-645-1000 or direct them to our Web page at [www.utsouthwestern.org/spfoundation](http://www.utsouthwestern.org/spfoundation), where an electronic version is posted.

Also found on our Web page is a video produced for the 2014 Legends gala, titled "Research Making a Difference." In this video, you will meet Mr. John Godwin, city manager of Paris, Texas, and the subject of the article on page 4. A published author of three novels, Mr. Godwin wrote a candid 10-part series of stories for his local online newspaper about his experience at UT Southwestern in the summer of 2013, when his failing heart was removed and a new one implanted. The first-person narrative allows the reader to imagine a procedure that was the stuff of science fiction not too many years ago, making the stories a fascinating read – and "Research Making a Difference" a compelling video.

While Mr. Godwin was fortunate in having an organ match found quickly and in close enough proximity to save his life, others – many others, in fact – have not been so lucky. To address this pressing issue, UT Southwestern physician-scientists are investigating ways to lengthen the amount of time a heart can remain viable during transport, knowing that each additional hour they gain will increase the number of organs available to those who will not survive without them.

We are pleased to acknowledge that a generous endowment, established by a Foundation donor several years ago, will supply substantial funding in perpetuity for this and other heart-related studies at the Medical Center – research that will continue to make a life-or-death difference to heart patients, not just here in Dallas but well beyond.

SALLY RIDGWAY  
FOUNDATION PRESIDENT

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*St. Paul Medical Foundation deeply appreciates the support of donors whose generosity advances the mission of promoting excellence and innovation in patient care at UT Southwestern University Hospitals.*

**John Godwin appeared to be the picture of health. In his mid-40s, this husband and father of three grown daughters was athletic, enjoying water skiing and playing softball. He had an active career as the city manager of Paris, Texas. But he began to notice symptoms — being out of breath and feeling older than his years — and suddenly everything changed. In the summer of 2013, Mr. Godwin had a heart attack.**

*He was brought to UT Southwestern Medical Center, and after a 10-hour surgery, he remained in the intensive care unit for four weeks, connected to a device that kept his heart pumping and his blood flowing. And then, on July 2, 2013, everything changed again. Mr. Godwin received a new heart.*

*With the expertise of surgeons and caregivers at St. Paul University Hospital and the support of his wife, Stacy, other family members and friends, Mr. Godwin made an extraordinary recovery. Less than two months after his heart transplant, he returned to work in August 2013. Since then, life has gotten back to normal, but like most heart transplant recipients, Mr. Godwin lives with a deep sense of gratitude to the donor. He also is thankful for the care and support he received. "I was very fortunate to get the kind of medical care I received at UT Southwestern – and the support of family, friends, and so many more," he said.*

*Mr. Godwin – the author of three historical novels – chronicled his heart transplant experience in a 10-part series that was published in eParisExtra, the online newspaper in Paris, Texas. With candor and sincerity, Mr. Godwin shared the challenges and inspiration he experienced during his journey back to health. Here are some excerpts.*

**By John Godwin**

### **Before the transplant – a baseball game with my daughter**

More like a bad church league softball game. I wonder if these are the real Cincinnati Reds. Errors, mistakes, clumsiness, booted balls. After only two innings, the outcome is pretty well decided. As a Texas Rangers fan, I am OK with that.

I am at the game with my middle daughter, spending quality time together. It has always been important to us. Baseball gives us an excuse to spend three mostly uninterrupted hours together, just the two of us. Family is the most important thing in my life, so I spend lots of time with my wife and three girls as a group. But I have also always sought out and valued those one-on-one times with each child, too.

Tonight is about the middle daughter. She loves family, history, tradition. She says that all comes from her father. She is a 2013 honor graduate of Texas A&M University. She discovered baseball and the Texas Rangers a number of years ago.

At the end of the seventh inning, out come the lemon chills. Baseball with my daughter. Rangers on



# One Man's Journey Back to Health

Heart transplant recipient John Godwin chronicles his transplant experience

top. Warm summer evening. Life is good. Life is very, very good. Except for one minor detail. We are not in Arlington. Not at the ballpark. The entire game plays out on the television in my hospital room in the intensive care unit. I am very, very sick. But my daughter is here and the Rangers are here, so it's all OK.

And the lemon chills? Shay, a young father of six, is my nurse for the weekend. Shay is a caregiver. He sees a family in distress and he cares. Cares enough to slip into the hospital kitchen after hours, sneak out a couple of lemon chills, and turn a tough night into a wonderful memory. No worrying if it's his job or not (I am pretty certain after-hours lemon chills are not his job, in fact). He just takes care of things. Correction. He takes care of people. He is greatness.

The baseball game? Rangers blow their big lead but still manage to win. I know I will never forget this game. I know it's the best one I will ever see. And I know it's because Shay, my nurse, is the true MVP of the night. Because he gets it! Thank you, Shay. And go Rangers!

**“I hope she knows I made it. I hope she knows I got the new heart and am doing well. I hope she knows, too, what a vital role she played in getting me well enough to get one.”**

—John Godwin

### The nurse from India

My new nurse is from India, and she has a mission. She gets me as her patient shortly after I wake up from more than four days of unconsciousness that followed an almost 10-hour post-heart-attack surgery. I am heavily drugged, uncomfortable, weak, and confused. Her mission is to get me well enough for a heart transplant. My mind goes back to my rural roots, and I think she is treating me like a prize animal she must hurry and get

ready for auction at the fair. And I am OK with that. We share this mission – get me fat and sleek and healthy so the judges will be impressed with me and I will win the blue ribbon. In my case, of course, a blue ribbon is a new heart and getting to go home.

Every single thing I do, she watches like a hawk. She monitors the number of visitors and length of time spent with them. “You really love your family,” she observes quite correctly. “You enjoy them; you all talk so much and laugh together. But they tire you out. We have to get you well so you can later spend all the time you want with them.” So we have a couple of days with minimal visitors, which was just what I needed.

She tries to reassure me. Everyone here has one interest only, she promises, and that is to get you better. After a few days, I tell her that she may be the person who saves my life. She smiles and nods. She is going to India soon on a four-week vacation. Unfortunately, she starts on her vacation before I am ready to lose her. Yet even on her day off when her vacation is supposed to have started, she stops in to check on me one last time and to tell me goodbye.

I hope she knows I made it. I hope she knows I got the new heart and am doing well. I hope she knows, too, what a vital role she played in getting me well enough to get one, and strong enough mentally and physically to make the July 2 transplant almost a minor surgery and my recovery about half as long as typical.

She is just one in a line of fine nurses, though. UT Southwestern is full of them. What a noble profession. Such a fine calling. My oldest daughter is so impressed and inspired, she registers to begin nursing school this fall.

Do I give my nurses too much credit? I do not think that's even possible. I cannot ever adequately express my deep gratitude and great respect for these nurses. Everyone should hug a nurse today and tell him or her thank you. They are among our very best, and what they do for other people is magnificent.

### The doctors – “rock stars” and regular people

UT Southwestern is a teaching hospital, so the doctors roam the halls in groups of threes and fours. One expects them to carry their brilliance on their sleeves, using lots of big words and technical terms, always looking serious. But it turns out they are just regular, real people.



From left to right: Dr. Alpesh Amin, Dr. Pradeep Mammen, Dr. Michael Jessen, and Dr. Mark Drazner

The youngest of the bunch, a Missouri native, looks more like a software engineer than a surgeon, and would look more natural at a kids' soccer game than at an operating table, which by the way is a good way to see him outside the hospital. He spent two years coaching his young sons' teams.

One of the doctors looks like a high school science teacher. He speaks with a quiet confidence, in friendly tones and with a reassuring voice. In my ICU room, he sits on the bed and pats me on the foot.

Still another is professional and knowledgeable, but so very personable, always with a smile.

The fourth is a hockey fan who coached his own sons. He laughs freely and jokes with me, lifting my spirits.

I hear doctors have lost their bedside manner. Not these guys. They seem to be some of the nicest people I have ever met. I consider my doctors rock stars – Dr. Alpesh Amin, Dr. Mark Drazner, Dr. Pradeep Mammen, and finally, the man who put in my new heart, Dr. Michael Jessen.

Rock stars. They work as a mutually supportive team, paying careful attention to every detail of my care. The overall team is big and broad too. Not just surgeons, but a pharmacist, an RN, a Ph.D., a nutritionist, physical therapists, and a social worker. That's why their success rate far exceeds the national average and is one of the best in the nation. There's a lesson to be learned here. The value of a fully engaged, multidisciplinary, caring team. It multiplies the resources of individuals acting alone. Decision-making improves, output and efficiency increase, innovation is encouraged.

It is something I have always tried to emphasize in my work. We can accomplish so much more as a team than as individuals segregated off into departments and jobs and duties, where all we care about is quitting

time and payday. As we become a true team, we become more efficient, more productive, more innovative, and even happier with our jobs and the service we offer. I am reminded of the 1970s television show “M.A.S.H.” Their motto was: “The best care anywhere.” I think UT Southwestern should adopt that motto. They deserve it.

### The human touch

The night begins with the most basic of human needs denied and ends with the most important of human needs satisfied. It's suppertime. I need to call the cafeteria and order another bland meal. My wife dutifully calls for me – only to be rebuffed. We do not have him on our list to get a meal tonight, the voice tells her. The nurse tells us there is no problem in the cafeteria. The hold on your meal is from the surgeon. I am confused.

The same surgeon who told me to eat, eat, eat because I am starving to death? That surgeon?

The only reason I have ever been told by a doctor to skip a meal is because I am about to undergo some test or because I have a surgery coming up. That last sentence hangs in the air. There is only one surgery I am waiting for. A heart? No way, I say. I have been on the list only a week. It is too soon. Way too soon.

Sometime later, a group of four doctors shows up in my room. We might have good news for you, the surgeon equivocates. There is a heart, and it looks good so far. A lot of things can go wrong and this is still a long way from happening, but we want you to know that one has become available.

The doc squad leaves us alone, just my wife and me, to ponder what they had to say. My wife calls our daughters, emphasizing that we do not know anything yet but that they should be ready, just in case. The evening goes by, the two of us chasing random topics of conversation, trying to watch the television to kill time and keep our minds off the possibility of impending surgery.

The nurse tells us that another doctor is on his way, bringing us paperwork to sign. Although he cautions again that something can still go awry at the last minute, everything, so far, looks like a go. It is a very good, very strong heart and is an excellent match. We should be back to take you to surgery about midnight.

The clock moves slowly, but before I know it I am strapped to a narrow board, my arms tied down, various wires and gadgets attached to me. I am minutes away from being placed under. A phone rings and one of the techs answers. There is a problem.

The doctor says not to give him anesthesia yet, she reports. Says there has been a delay and he does not want him under so long.

For me it's an immediate problem. For the last 20 years I have suffered from periodic severe back pain caused by stenosis and a bulging disc. In no time, my back is screaming in pain, and I beg the doctor to untie me and give me relief. I explain I am not normally a whiner but my back injury is very real.

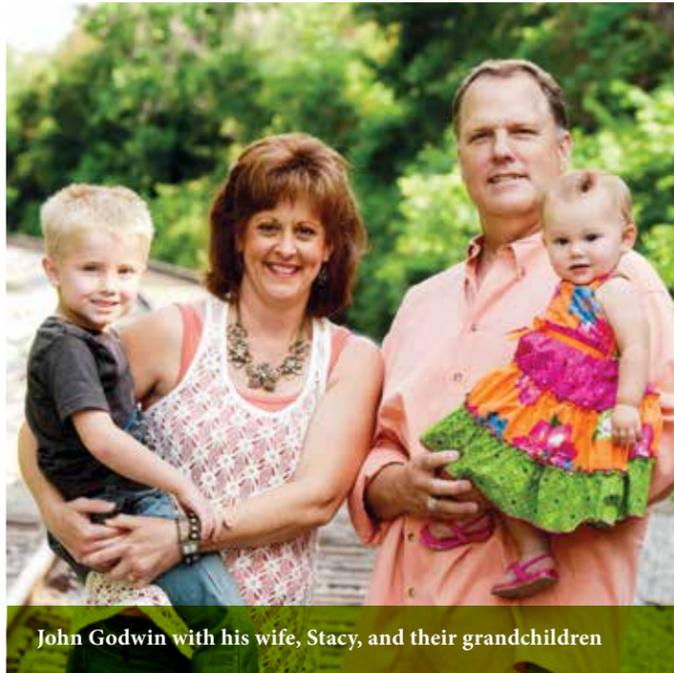
She cannot move me, she explains. This will happen quickly when it happens, and we may not have time to do this all over again. Every minute counts. I lie still and quiet, trying to think about other things, trying to push the pain away, arching and stretching in a vain

effort to gain some advantage over it. Then there is nothing for any of us to do but wait.

The doctor does not leave me there alone, though. Instead, she pulls up a seat beside me and we talk. It makes the time go by faster and takes my mind partially off my back. She seems genuinely interested in who I am and what I do. She asks about my family and my work. I sense that chitchat does not

come easily to her, which makes me appreciate the effort all the more. The delay continues, and the phone still does not ring.

Then the most amazing thing happens. This well-educated, highly skilled, probably bored, and maybe sleepy doctor reaches out and puts two fingers on my lower back. She rubs tentatively, and I feel almost instant relief from the worst of the pain. More importantly, it is a human touch in a sterile room in a sterile place, and it somehow touches me deep inside too. Human kindness. Compassion. Reaching out to someone in need. Some-



John Godwin with his wife, Stacy, and their grandchildren

one she does not even know but whom she knows she can help. She rubs my back for well over an hour. Instead of lying alone, hurting and worried – for I would not have blamed her for going in another room and taking a nap or eating a sandwich – I am comforted by this magnificent doctor. Word finally comes – the heart is on-site. She instantly changes from compassionate neighbor to skilled doctor. Within minutes I am out, the surgery begins at 3:16 a.m., and before dawn it's over and my new heart is pumping blood through my beat-up body.

It all happens so fast, I never even get to thank her for taking such good care of me. Not just during the operation, but as we strangers shared two hours in a sterile room, one sitting on an uncomfortable stool and the other strapped to a torturous board. I do not even know her name, but I will never forget what she did for me that long night. There's nothing like the human touch when we are hurting and alone and sick, and she offered me that without being asked. I hope when given the opportunity to do the same for someone else, I will respond the same way. Not because it's easy or because it comes naturally to me. But because there is nothing so powerful as reaching out to someone in need.

### Home at last... with lasting gratitude

Home is a magical talisman for me. Much more than a word or a place. But a part of me. It's where I draw comfort and support and strength. After 27 days in a hospital, most of it in intensive care, it's the place I want to be more than any other in the whole world. I am home now, at last. And it's here that I know I will heal and get better and finally get back to normal.

Then my daughter asks if I want to hear her letter. The letter is for the family of my heart donor ... the person to whom I owe an eternal debt. Contact between donor families and recipients is generally discouraged, but recipients are invited to write anonymous letters to the donor family if they wish. The donor family may accept and read the letter or return it unopened. My daughter has written her letter, and it's incredible.

With passion and emotion she shares something of who I am – as a husband, father, and grandfather. She expresses her deep sorrow for the grieving family and

admiration for their courage and selflessness. She knows that without their actions, her father might never have enjoyed home again, while showing how deeply she understands that just the opposite is true for the donor family. Their loved one will never enjoy home again.

According to the National Heart, Lung, and Blood Institute, some 3,000 Americans are on the waitlist for

**“I lived in part because of the wonders of modern medicine and the incredible skills of a rare group of surgeons. But I live, too, because a family made a choice to reach out in their darkest hour and save me with a donated heart.”**

—John Godwin

a new heart on any given day, but only about 2,000 hearts become available each year. Yet becoming a donor is surprisingly easy. In Texas, a person can simply check a box when getting a driver's license.

One night at the hospital, before I got my new heart, I mentioned to my family that several years ago I began listing myself as a donor. My heart will not do anyone any good, and there is still concern about my kidneys and liver, too. But maybe I have something of value to someone. My wife noted she also is listed as a donor, and I was surprised to learn my youngest daughter is as well. None of us knew about each other's decision. I later found out my two older daughters and my one son-in-law are all registered donors, too. That makes me proud.

Ultimately, I lived in part because of the wonders of modern medicine and the incredible skills of a rare group of surgeons. But I live, too, because a family made a choice to reach out in their darkest hour and save me with a donated heart. ■

# Spotlight on Our Directors

Community and corporate leaders play a crucial role in the workings of St. Paul Medical Foundation, from its decision-making to its daily activities. Four members of the Foundation's Board of Directors – Sheila Beuerlein, Harold B. Kernodle, Tamara R. O'Connor, and Richard J. Szelc – are featured here, discussing why they devote their time and talents to the work of the Foundation.

## ■ Sheila Beuerlein

Sheila Beuerlein, MBA, brings more than 20 years of experience in marketing, business consulting, and engineering to the Foundation. She began her career as a senior engineer at General Dynamics, now Lockheed Martin, where she was an aerodynamicist. After receiving her MBA, Ms. Beuerlein served as Director of Marketing at Johnson & Johnson, managing the \$100 million vascular access catheter franchise. In addition to her work with the Foundation, Ms. Beuerlein is a board member with the Perot Museum of Nature and Science, and Children's Medical Center Foundation. She earned a B.S. degree in aerospace engineering from Texas A&M University and an MBA from the University of Texas at Austin.

"Sandy Laber, who serves on the Foundation Board, introduced me to the organization," Ms. Beuerlein said. "After attending a lunch meeting with her, where I was able to learn more about the group and hear one of the doctors speak, I became very interested in the Foundation and its mission."

"The opportunity to support excellence in patient outcomes through its heart, lung, and vascular programs is exciting. The Foundation has a responsibility to carry on the original mission of St. Paul University Hospital in a manner that is consistent with the values of the Daughters of Charity. Although it has been many years since the nuns ran the hospital, their legacy and the role that faith and religion play in medicine cannot be forgotten."



## ■ Harold B. Kernodle

Harold B. "Kip" Kernodle is the former Chief Financial Officer and Director at Allflex Holdings III Inc. A graduate of the University of Texas at Austin, Mr. Kernodle led Allflex Holdings as it expanded its annual revenue from \$125 million to \$300 million. He now serves on the Board of Directors of Texas Security Bank, as well as Swift Media, a technology company founded by two recent graduates of Notre Dame – both of whom Mr. Kernodle mentored.

Mr. Kernodle was an active member of St. Paul Medical Foundation's 2015 Transplant Tee golf tournament committee. He and his wife, Cecilia, are longtime supporters of Catholic education, as their four grown children are graduates of Jesuit College Preparatory School of Dallas and Ursuline Academy of Dallas. Mr. Kernodle's community contributions include serving on the Ursuline Foundation Board and the St. Patrick School Foundation Governing Board.

His connection with St. Paul Medical Foundation grew from his friendship with Board member John Grimes, who was a baseball coach for young Kip Kernodle.

"John knew that we've done things to help out in the community," Mr. Kernodle said. "He felt the Foundation was a good fit for me, and I believe he's right. The Foundation is well-known for its service to the community."



Looking ahead, the Foundation is writing a new chapter in its history, and I am proud to help chart its course for the future."

## ■ Tamara R. O'Connor

Tamara O'Connor has been in the banking business in Dallas since 1983 and currently holds the title of Senior Vice President, Private Client Advisor with U.S. Trust, Bank of America Private Wealth Management. She has been working with affluent individuals and families with U.S. Trust for 15 years.

She began her career at Republic Bank and then worked in the Corporate Lending Division for both Bank of New York and PNC Bank. Prior to joining U.S.



Trust, Ms. O'Connor worked in the Commercial Lending Division at Chase Bank, where she chaired the Chase Bank Chamber of Commerce Campaign, achieving record results. Ms. O'Connor earned an undergraduate degree in psychology with high honors from the University of Oklahoma, and earned an MBA in finance from Vanderbilt University's Owen Graduate School of Management. Ms. O'Connor and her husband, Tim, have a daughter named Shannon who is a sophomore at Bucknell University.

"Since the closing of St. Paul Hospital, the Foundation has broadened its mission to include promoting health care excellence for all UT Southwestern patients, without regard to where they are being treated," Ms. O'Connor said. "When you look at it that way, we have actually increased our reach. One example is the role we played in supporting the William P. Clements Jr. University Hospital. The Foundation funded a physical therapy gym in the new hospital that is helping many heart and

lung patients recover more quickly. We're also funding lifesaving medical procedures for patients referred from Parkland Memorial Hospital. These are patients who, otherwise, could not afford to have these procedures done."

## ■ Richard J. Szelc

Richard "Rick" Szelc relocated to Dallas from the Detroit area in 1980 and has lived here for more than 34 years. He is a Managing Director and Wealth Advisor at Neuberger Berman, a 75-year-old private investment management firm. During his 15-year tenure at Neuberger, Mr. Szelc has been a member of the firm's 12-member Partnership Committee and has been recognized by *Worth* magazine and *Barron's* as one of the top 100 Wealth Advisors in America. He received a B.S. degree from Lawrence Technological University and an MBA in finance from the University of Texas at Austin. He and his wife, Rebecca, have an 18-year-old daughter, Camille, who graduated from The Hockaday School and will be attending The University of Texas McCombs School of Business.

Mr. Szelc was exposed to UT Southwestern in a unique way. His brother-in-law, Dr. Robert Kelly, is working on a joint research project with Dr. Helen Hobbs, Professor of Internal Medicine and Molecular Genetics at UT Southwestern, Director of the Eugene McDermott Center for Human Growth and Development, and a Howard Hughes Medical Institute Investigator.

"I don't think you can overstate the importance of St. Paul Medical Foundation to Dallas. The hospital itself may be gone, but institutions such as this Foundation have longtime horizons – decades, even generations long. It's an honor to be of service."



# Therapy gym funded by Foundation speeds patient recovery and improves functional outcomes

Byron McCuin, 48, had a heart transplant on Jan. 23, 2015, at William P. Clements Jr. University Hospital. A mere two weeks after receiving a new heart, he was in the gym – the St. Paul Medical Foundation Heart, Lung, and Vascular Therapy Gym at the new hospital. Having the opportunity to exercise in the gym, with the guidance and assistance of his therapists, enabled Mr. McCuin to have a particularly speedy recovery.

A \$500,000 donation from St. Paul Medical Foundation funded the therapy gym on the hospital's 10th floor, where cardiothoracic surgery patients recover. Tall

Heart transplant patient Byron McCuin, shown with physical therapist Christine Kearney, exercises on an upper body cycle machine in the St. Paul Medical Foundation Heart, Lung, and Vascular Therapy Gym at William P. Clements Jr. University Hospital. Eight weeks after his surgery, Mr. McCuin had made so much progress that he was already walking on the treadmill. "Being able to do something in a gym-like environment gives the patients a sense of progress and excitement about the future," said Julie Buchl, Clinical Therapy Manager.



Getting patients up and moving as soon as possible after surgery is important to prevent blood clots and pneumonia. "Early mobilization is the key to achieving

optimal functional outcomes," said Julie Buchl, Clinical Therapy Manager for Clements and Zale Lipshy University Hospitals.

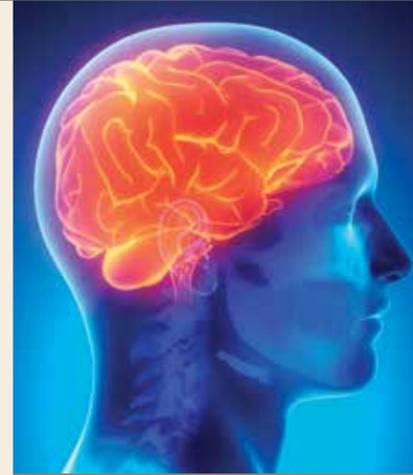
Ms. Buchl says equipment at the St. Paul Medical Foundation Gym, such as a custom-made walker that has apertures for holding multiple lines and an oxygen tank, allows patients to get up and walk short distances even while they are still in the cardiovascular ICU. Some exercise equipment, such as a machine

windows spread across two walls of the high-ceilinged gym, letting in abundant natural light and providing a view across the city.

Although many medical facilities have gyms for rehabilitation patients, it's not typical for a hospital to have a gym for acute-care patients. Not typical – but it is desirable.

that moves a patient's arms and legs for them, helping with range of motion in patients who have been immobile, can be brought to the bedside.

Once patients are a couple weeks out from their surgery, they are usually able to visit the gym, and doing so gives them a psychological lift, along with boosting their physical progress. ■



# St. Paul Foundation's Legends gala funds stroke education study for women

St. Paul Medical Foundation's annual Legends gala is an exciting night for everyone who attends, but the purpose of the event is far more important.

The funds raised support critical medical programs and research, which can improve patient care and literally change the lives of millions of people.

One of the three research projects the 2014 Legends gala supported was called "Helping Educate Women About the Risk of Stroke," or HER-Stroke.

Stroke is the third leading cause of death in women, and the fifth leading cause of death for men. Some 55,000 more women than men experience a stroke in the U.S. every year. Despite the prevalence of stroke among women, far too many are unfamiliar with the symptoms of stroke.

According to a recent study published in *Stroke: Journal of the American Heart Association*, at least half of the women surveyed would not be able to recognize the signs of stroke should they occur. This is especially concerning since women are more likely to experience a stroke, and they are more likely to be caregivers for parents and other family members.

HER-Stroke's goal is to develop and assess a novel stroke education and prevention program designed exclusively for women.

In the study, the knowledge of a control group of women (with known risk factors for stroke) who are educated with a traditional stroke education packet will be compared to a similar group who have access to an innovative education and support system, including information provided through an electronic tablet from a health care provider.

Additionally, the HER-Stroke team intends to support stroke prevention education for at-risk women by reaching out to primary care providers, internists, and OB/GYN professionals, as well as by stressing the importance of early medical intervention should a stroke occur.

"I'm very pleased that proceeds from our Legends gala are funding this innovative study," said Foundation Board member Connie Carreker who, with her husband, Denny, chaired the highly successful event. Mr. Carreker added: "Enabling more women to know the symptoms of stroke and encouraging them to seek treatment quickly can help reduce the effects, which can be devastating. We want to make a difference in the lives of women, as well as their families and friends, and this study will help us accomplish that very important goal." ■

## Know the Symptoms of Stroke—Think "F-A-S-T"

- F** **Face drooping.** Is one side of the face drooping or numb? Ask the person to smile. Do you notice an asymmetry in the smile?
- A** **Arm weakness.** Is one arm weak or numb? Ask the person to raise both arms. Is there any difficulty in keeping an arm up?
- S** **Speech difficulty.** Is speech slurred or hard to understand? Ask the person to say a simple sentence such as "My name is ..."
- T** **Time to call 911.** If the person shows any of these symptoms – even if they quickly go away – call 911 immediately.

# A Tee-rific Transplant Tournament

Mother Nature winks and lets golf event score a big win

On April 13, 2015, John J. White awoke to the sounds of heavy rain and the occasional clap of thunder. It didn't look good for St. Paul Medical Foundation's annual Transplant Tee, a fundraiser for the Foundation and UT Southwestern Medical Center's Heart and Lung Programs. All that work, all that lost opportunity ...

But then, "the skies just parted for us," said a relieved Mr. White, a member of the Foundation's Board of Directors and Chair of this year's event.

The 2015 Transplant Tee survived the early-morning water hazard and went on to raise the highest net income yet, a full 32 percent increase over the previous year's tournament, which had set the prior record.

Mr. White attributes the success of this year's tournament to the efforts of his fellow committee members. "You can't do this sort of thing by yourself. It was a great group of people who joined me on the committee. We started early and everybody made lots of personal contacts."

Dr. Brian Baldwin launched the golf tournament in 1993 as a way for transplant patients and their physicians to get together and socialize outside of the medical setting. Community volunteers and members of the UT Southwestern transplant team assist with the event, making sure everything stays on course ... well, everything that can be controlled. The weather is up to Mother Nature, who proved to be kindly disposed to the tournament after her morning prank.

This year's event, held at Dallas' Northwood Club, featured 106 players, including a foursome that came all

the way from Midland. Four transplant patients played and double-lung-transplant patient Tina Rueles served as a volunteer, helping to set up for the event. Next year she plans to play.

"My team for next year is a friend of mine and heart recipient from UT Southwestern; my pre-transplant coordinator, Rhonda; and my post-transplant coordinator's husband, Blair. As you can see, we all have a very close connection with UT Southwestern. It's a wonderful event for recipients to show off how well we are doing in front of the people who helped put us back together," Ms. Rueles said.

Tournament play was accelerated with the help of C.J. Moucka, a sophomore at Jesuit College Preparatory School of Dallas, who executed perfect long drives for four-somes who made an extra donation to the cause. As each group completed play, they joined guests at the Northwood clubhouse for a cocktail buffet and live auction.

The auction items – all donated by Foundation Board members and other supporters – included once-in-a-lifetime experiences. Guests bid on the opportunity to play with World Golf Hall of Fame member Lanny Wadkins and sports broadcaster Bill Macatee at Dallas National Golf Club. Those who bid on the trip to True North Golf Club in Michigan didn't have to worry about how they would get there; transportation on a private jet was part of that package. Other live auction items included trips to Ocean Reef Club, Gateway Canyons Resort, Rough Creek Lodge and Resort, and Disney World.

An especially fun raffle item was a day on the set of the Discovery Channel's "Fast N' Loud" with the "Gas Monkey Garage" team. It's no wonder this year's tournament was so successful.

The funds raised by the tournament will help support UT Southwestern's highly successful Heart and Lung Transplant Programs. UT Southwestern recently crossed an important volume milestone. On April 22, 2015, cardiothoracic surgeons performed their 500th lung transplant, placing UT Southwestern among an elite group of fewer than 25 U.S. medical centers that have reached that number.

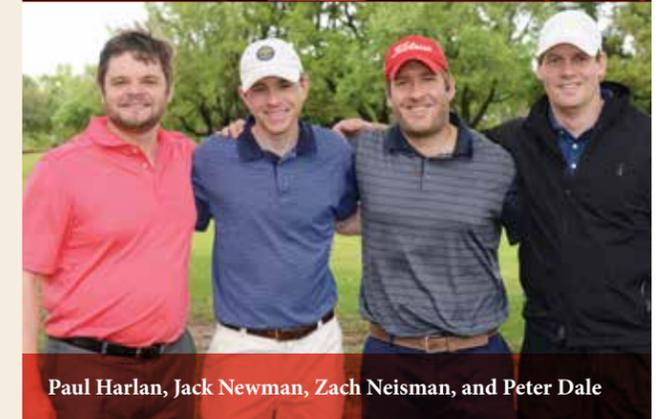
UT Southwestern surgeons have performed more than 1,000 cardiothoracic transplants, a category that combines heart and lung transplants. ■



C.J. Moucka (Jesuit sophomore and long drive hitter)



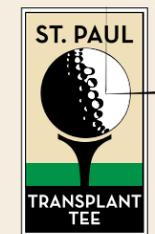
John White, Mike Terry, and James Hamilton



Paul Harlan, Jack Newman, Zach Neisman, and Peter Dale



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usic legend Kool & the Gang melded jazz, funk, and R&B to create some of the most memorable hits of the '70s and '80s, including "Get Down On It," "Fresh," and "Ladies Night" ... songs that still make you want to get up and dance. In the '90s and beyond, their style evolved to a more romantic R&B sound, with hits like "Joanna" and "Cherish," which has become a wedding staple.

While the band's eponymous debut album was a hit on the

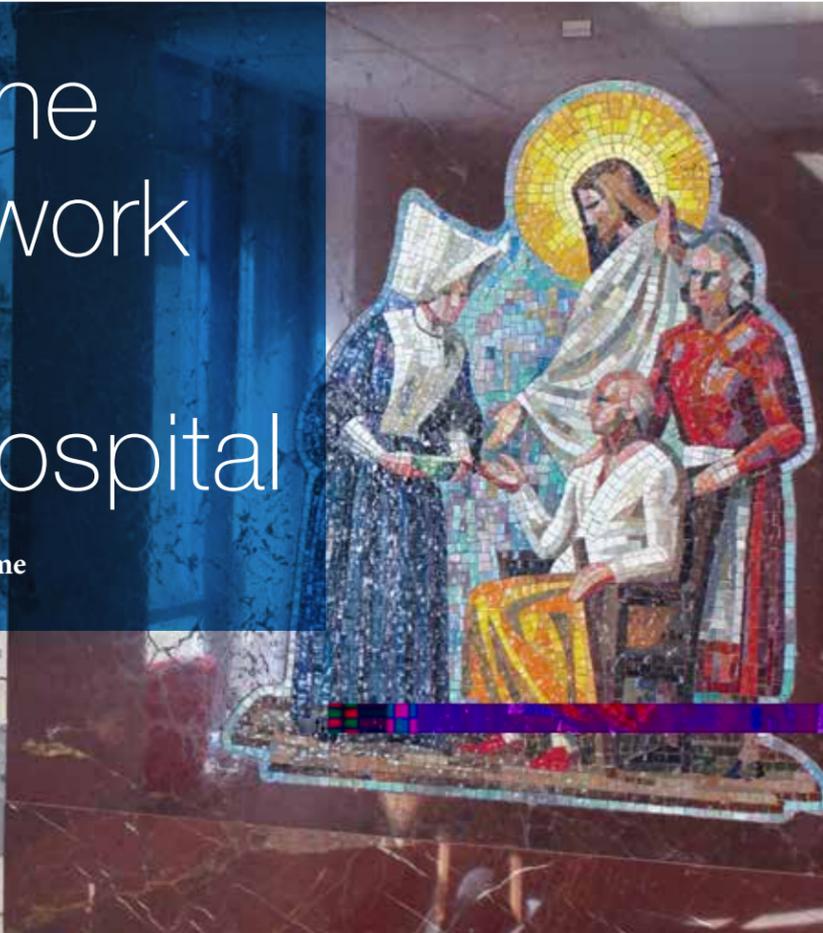
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When the new William P. Clements Jr. University Hospital opened in December 2014, it meant saying a bittersweet goodbye to St. Paul University Hospital, which closed after serving patients for more than 50 years. To preserve St. Paul's historical and religious heritage, mosaics that adorned the hospital walls and stained-glass windows from a small chapel have been painstakingly removed and will soon be relocated.

# Preserving the religious artwork of St. Paul University Hospital

Supporters give historic treasures a new home



“Part of St. Paul Medical Foundation’s mission is to preserve the legacy of St. Paul University Hospital to the extent possible. So finding new homes for the mosaics, which were so emblematic of the hospital, was important to our directors,” said Rick O’Brien, Chair of the Foundation Board of Directors.

“We are indebted to the new owners, as they are rescuing pieces that are appreciated not only for their historic and religious significance, but highly valued as extraordinary examples of fine art,” Mr. O’Brien said.

Eight mosaics and three stained-glass windows were carefully removed and preserved. The mosaics depict six biblical Corporal Works of Mercy, a large panel called “Christ Healing the Sick,” and the oval red-and-gold Seal of the Daughters of Charity of St. Vincent de Paul, the Roman Catholic women’s order that founded the hospital in 1896 in Dallas. The stained-glass window pieces, which were located in the hospital’s Chapel of St. Catherine Labouré, are individual representations of St. Catherine, St. Vincent de Paul, and St. Louise de Marillac.

The artwork was installed when the hospital relocated to Inwood Road and Harry Hines Boulevard in 1963. Famed New York artist Allyn Cox worked with a Venetian mosaic craftsman to design the mosaics. Mr. Cox’s other work includes painted murals in the U.S. Department of State and U.S. Capitol, including the fresco-frieze in the Capitol Rotunda.

“Knowing the history of Allyn Cox, to me it was important artwork that needed to be preserved,” said Michael Marz, who with Mike Terry became new owners of the mosaic pieces.

“The mosaics are more than just beautiful works of art; they each carry a meaningful biblical message. They really speak to our faith and the mission of the

Foundation,” said Mr. Terry, who serves on the St. Paul Medical Foundation Board.

Mr. Terry, President of M. Terry Enterprises Inc. and Founder of The Mike and Mary Terry Family Foundation, plans to install four of the

mosaics in a chapel on his ranch in Breckenridge, Texas. He is giving two others to the Jesuit College Preparatory School of Dallas, including the largest mosaic, “Christ

“We are indebted to the new owners, as they are rescuing pieces that are appreciated not only for their historic and religious significance, but highly valued as extraordinary examples of fine art.”

—Rick O’Brien

Healing the Sick.” Several members of Mr. Terry’s family have attended Jesuit, where he serves on the school’s board, while his wife, Mary, serves on the Jesuit Dallas Museum Board.

“When I approached the president of Jesuit about donating these mosaics, he thought they would be a wonderful addition to the school to provide a daily reminder to faculty and students about the call to serve,” Mr. Terry said.

Mr. Marz, Vice Chairman of the Capital Markets Group of First Southwest Company, a public finance firm, and Chairman of the Jesuit College Preparatory School Foundation, is receiving the mosaic called “Feed the Hungry,” a cause close to his and his wife Margue-

rite’s heart. He is talking with the Vickery Meadow Neighborhood Alliance Food Pantry – where he and his wife have served for years – about possibly installing the mosaic there.

The three stained-glass windows will go to St. Joseph Catholic Church in Richardson and be incorporated into parts of the church undergoing renovation.

“St. Vincent de Paul served the poor. We have been trying to develop a culture of caring for the poor, so the stained-glass piece will be a reminder of that,” said Deacon Randy Engel.

The stained-glass panels are in storage with a local stained-glass artisan pending installation. Meanwhile, the mosaics are being stored by van Enter Studio, Ltd., a Dallas art preservation company

contracted to remove, restore if needed, and later install the mosaic pieces.

“We have done conservation and repair work for all of the major museums in Dallas and Fort Worth. We also worked with the Texas Historical Commission to restore more than 160 Victorian vaults and safes in historic courthouses, and in 2006, we salvaged a mosaic art collection from the Mercantile Continental Building prior to its demolition,” said Michael van Enter, owner of van Enter Studio.

The art preservation process involves removing a piece of the wall surrounding the mosaic while keeping the artwork within stabilized and protected.

“If we don’t save the art we have, we will destroy both our history and a bit of our humanity,” said Mr. van Enter. ■



Art preservation company owner Michael van Enter shows Mike Terry and Michael Marz (left to right) one of the St. Paul University Hospital mosaics he removed and is working to restore. Mr. Terry and Mr. Marz are the new owners of the mosaics.



Four mosaics will be installed in Mike Terry’s family chapel at his ranch in Breckenridge, Texas.



“Feed the Hungry”



Workers carefully transport one of three stained-glass windows from St. Paul University Hospital that will be installed at St. Joseph Catholic Church in Richardson.



A technician prepares to remove the mosaic “Visit the Imprisoned” from the hospital. The removal process involves stabilizing the mosaic and then removing a piece of wall containing it.

UT Southwestern interventional cardiologist is featured speaker at Foundation Friends event

# Scrapping the Scalpel

What happens when the standard remedy for a narrowed heart valve — opening the chest and replacing the old valve with a new one — can't be used because a person's age or medical issues make operating too dangerous?

Until recently, there was no solution. These patients simply had to live with the shortness of breath and diminished quality of life caused by the damaged valve. Now, however, patients have new options for treatment.

In February, Dr. Sarah K. Gualano discussed the transcatheter aortic valve replacement (TAVR) procedure as the presenter in St. Paul Medical Foundation's Friends Speaker Series for Heart, Lung, and Vascular Programs. Dr. Gualano is an Assistant Professor in the Department of Internal Medicine's Division of Cardiology at UT Southwestern Medical Center.



Drs. Pat Jenevein, Sarah Gualano, and Daniel K. Podolsky

During her presentation titled "Scrapping the Scalpel, A Nonsurgical Solution for High-Risk Valve Patients," Dr. Gualano described TAVR, which is used to replace a critically narrowed aortic valve, the valve between the heart and the main artery in the body. TAVR patients' narrowed aortic valves prevent sufficient blood flow. The TAVR procedure is a less-invasive treatment, widening the artery without the need for open-heart surgery. The procedure involves inserting a balloon catheter containing a collapsible replacement valve into an artery, guiding it into the aorta, wedging it into the old valve's position, and then expanding it — with the new valve taking over the job of regulating the flow of blood.



Bill Fynes, Bill Buchanan, and Rick O'Brien



**Dr. Sarah Gualano, UT Southwestern Assistant Professor of Internal Medicine, answers questions about valvular heart disease, transcatheter valve replacement, and heart attacks.**

**Q: How does UT Southwestern's transcatheter valve program benefit patients?**

**A:** It's fantastic to be able to offer these minimally invasive alternatives to traditional surgery and medical therapy to some of our otherwise inoperable and high-risk patients with severe symptomatic aortic stenosis or mitral valve issues.

As with all procedures, there is some risk — and patients typically spend a couple days in the hospital — but overall, transcatheter aortic valve replacement helps appropriately selected patients live longer and feel better. Similarly, the transcatheter mitral valve repair procedure helps patients breathe easier and feel better.

**Q: What's next for the transcatheter valve program?**

**A:** The transcatheter valve program is expanding to treat valve disease in the lungs as well as in the heart. We can offer a minimally invasive approach to replace surgically placed bioprosthetic valves, which often wear out in 10 to 15 years.

**Q: What should people do if they think they're having a heart attack?**

**A:** Regardless of their cardiac history, people shouldn't try to diagnose themselves if they're having symptoms. It's critical they work with a physician to figure out what's going on and what the next step should be. This is especially true among patients with risk factors for developing coronary disease, such as age, smoking history, or diabetes.

It's also important that people seek medical care quickly. Many studies have shown that the faster people having heart attacks seek care, the better our chances of being able to open the coronary artery that's involved and reduce the amount of damage to the heart muscle. People who think they're having a heart attack should always call 911 — and never try to drive themselves to the hospital. Patients who dial 911 are monitored by emergency personnel and, if necessary, receive lifesaving care en route to the hospital. They also avoid putting themselves and other drivers at risk. ■



Holly Hassman, Patty Sullivan, and Danya Casey

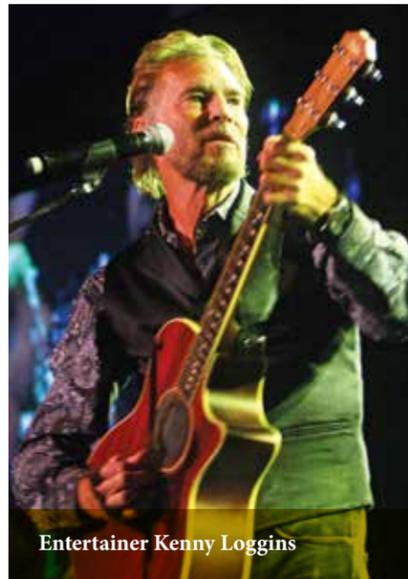


D'Andra Simmons, Linda Gibbons, and Dr. Don Krause



KENNY LOGGINS

Building up to Legends 2014, a kickoff party at Christian Louboutin at Highland Park Village and a patron party at the home of Kathy and Harlan Crow set the stage for a memorable gala. Following a reception and seated dinner, Kenny Loggins opened the live concert with “Footloose” as a flash mob filled the dance floor, surprising and delighting all the guests. ■



Entertainer Kenny Loggins



Bob White and Lisa Armstrong with Carolyn Anderson and Daryl Kirkham



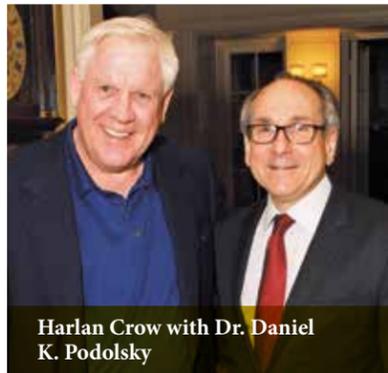
Denny and Connie Carreker, Kenny Loggins, Margo and Jim Keyes



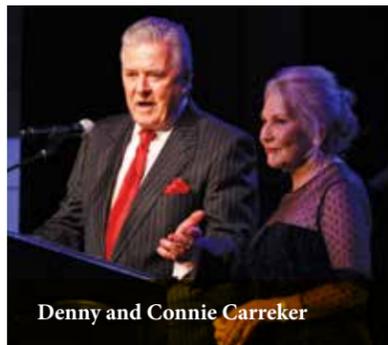
Rick and Caroline O'Brien with Kenny Loggins



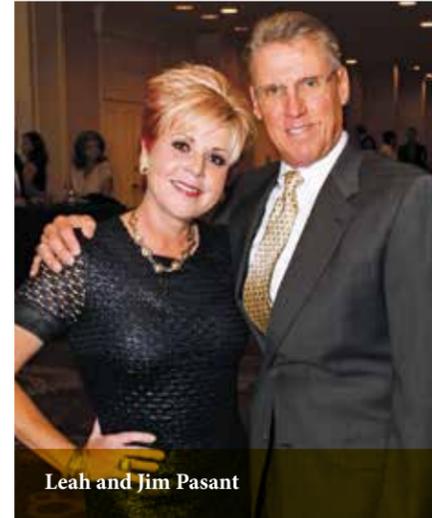
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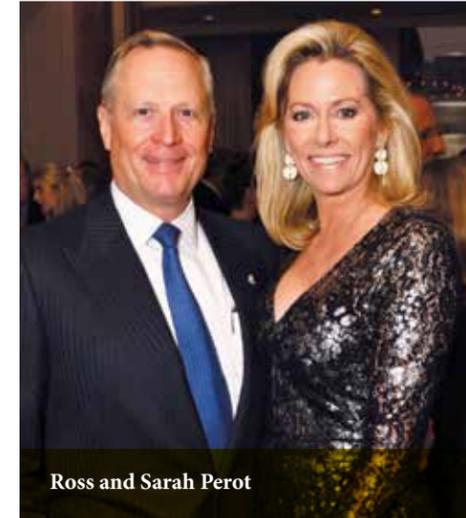
Harlan Crow with Dr. Daniel K. Podolsky



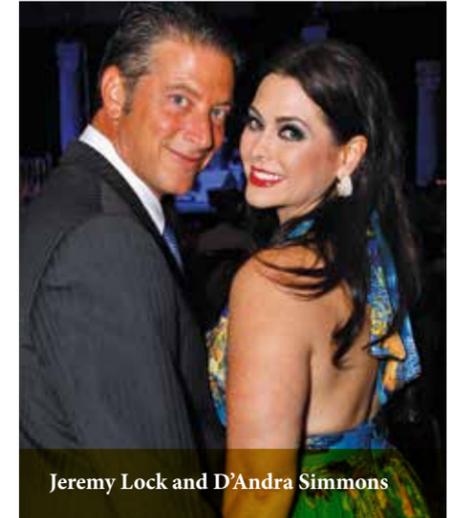
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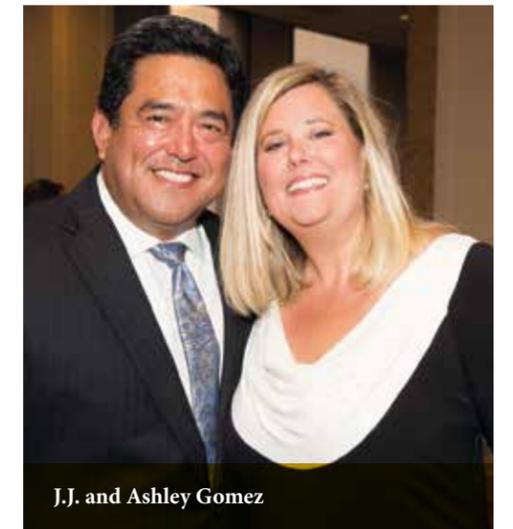
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## IN CONCERT

**Saturday, September 26, 2015**  
**Hilton Anatole Hotel**  
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