



## Proton Therapy Takes Aim at Solid Tumors



*A view of the new Radiation Oncology Center at the east side of the UAMS campus.*

**The world's most advanced** cancer treatment is now available at the Proton Center of Arkansas, the crown jewel of the new \$65 million, 58,000-square-foot UAMS Radiation Oncology Center.

Proton radiation therapy, an innovative form of radiation that is ideal for treating solid, hard-to-reach tumors in children and adults, became available to patients across Arkansas and the region following a Sept. 27 grand opening ceremony.

A collaboration between UAMS, Arkansas Children's, Baptist Health and Proton International, the proton center occupies 9,000 square feet on the second floor of the three-story building, which is connected to the Cancer Institute.

It is the first proton therapy center in Arkansas and the 43rd nationwide. Previously, patients in the region had to travel to Memphis, Tennessee, or Shreveport, Louisiana, to receive proton therapy.

**"This center will provide the most advanced cancer radiation medicine in the world that will give patients the best chance of survival and quality of life," said Michael Birrer, M.D., Ph.D., UAMS vice chancellor and director of the Cancer Institute.**

Proton therapy is an innovative form of radiation treatment in which proton particles are precisely targeted to deliver a high dose of radiation at maximum energy into a solid tumor. The beam only releases its full energy when it reaches the tumor. It conforms to the tumor's shape and depth, but then stops, protecting healthy tissue beyond the tumor from radiation exposure.

It is particularly useful in children, who face risks from radiation, such as developmental delays, hormone deficiencies, effects on bone growth, and

potential long-term effects of secondary cancers in exposed tissues.

UAMS is the only provider of pediatric radiation therapy in Arkansas.

The UAMS Radiation Oncology Center was built to accommodate the proton center, which includes a 55-ton cyclotron, a type of particle accelerator that powers the proton radiation beam. The cyclotron arrived at UAMS in October 2022 after a five-week journey by sea followed by a cross-country convoy of six tractor-trailers.

The oncology center also was built to accommodate existing X-ray radiation treatment services that were already offered in another building, as well as three new linear accelerators that provide more enhanced, disease-specific external beam radiation treatments.

Treatments now available with the advanced X-ray radiation technology at UAMS include



As we approach the end of the year, we need to make sure that we have completed our annual wellness visits for ourselves,

our families and our patients. This provides dedicated time to focus on wellness and prevention, and to make sure we are up to date on our immunizations.

This year the FDA and CDC have approved and added recommendations for respiratory syncytial virus (RSV) prevention and vaccinations for both children and adults.

In August, the monoclonal antibody nirsevimab was approved for infants younger than 8 months and for 8-19-month-olds who are at risk for severe disease such as bronchiolitis or pneumonia in the second RSV season. Nirsevimab significantly reduced visits and hospitalizations for RSV in the treated infants.

In June, the CDC recommended shared decision-making for RSV vaccination in adults 60 and older who would be at higher risk for severe illness from RSV infection based on underlying health conditions. RSV vaccination in adults reduced the risk for severe RSV disease.

Also in August, the FDA approved the RSV vaccination for pregnant women at 32 to 36 weeks' gestation to prevent severe RSV infections in children from birth through six months of age. Endorsement by the ACIP and the CDC were pending at press time.

Until next time,

*Michelle W Krause*

Michelle Krause, M.D.  
Senior Vice Chancellor, UAMS Health  
CEO, UAMS Medical Center  
Professor of Nephrology  
Department of Internal Medicine  
UAMS College of Medicine

## UAMS Sleep Apnea Specialist Recognized for Excellence in Implantation of CPAP Alternative

**Patrick Fraley, M.D.**, a board-certified otolaryngologist at the University of Arkansas for Medical Sciences (UAMS), recently became the only physician in Arkansas to be recognized as an Inspire Physician of Excellence – a designation of expertise, experience and positive clinical outcomes.

Inspire is a small implantable device that serves as an alternative for people with moderate to severe obstructive sleep apnea who can't find relief with a continuous positive airway pressure (CPAP) machine.

It's a small pacemaker-like device that is implanted in the upper chest through two small hidden incisions – one in the chest and one under the jaw – during an outpatient procedure lasting about two hours.

The patient activates it after getting into bed and clicking a remote control held above the implant. As the patient falls asleep, the device uses a gentle pulse to move the tongue out of the way, keeping the airway open and allowing normal breathing.

Fraley has performed more than 130 of the procedures since becoming the first surgeon in Arkansas to use Inspire in 2019.

**He said Inspire isn't meant to replace CPAP, which is considered the standard of care and the best option for most patients. However, some patients find the CPAP apparatus too bulky to use comfortably or complain that it causes skin irritation, sores, congestion, headaches, runny nose, dry mouth, nosebleeds or infections.**

Inspire has a success rate of 70% to 80% and is generally the most effective surgical treatment for sleep apnea.

Patients must try CPAP first and undergo a drug-induced sleep endoscopy to qualify for the implant, which most insurance companies won't cover for patients with a BMI above 32.

**Fraley said sleep interruptions may not go away completely for some Inspire patients, but they will get better. He said patients can return to normal activities three to five days after the surgery.**

Fraley is now training otolaryngology residents at UAMS to implant the Inspire device.

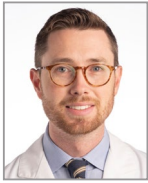
*To refer a patient to Fraley, call the UAMS Health Ear, Nose & Throat (ENT) Clinic in Conway at 501-932-7600 or the UAMS clinic in Little Rock at 501-686-5878.*



*The Nevro HFX spine model with the implantable pulse generator (IPG) and percutaneous leads. Photo courtesy of Nevro*



# News to Know: Updates from UAMS



## Thoracic surgeon Nicholas Tingquist, M.D., joins UAMS

**Nicholas D. Tingquist, M.D.**, a fellowship-trained, board-certified surgeon,

has joined UAMS as an assistant professor in the UAMS College of Medicine's Division of Thoracic Surgery.

Tingquist treats patients with lung, esophageal and other cancers of the chest, as well as non-cancerous thoracic diseases and conditions, including infectious lung disease, emphysema, pulmonary fibrosis, reflux and hernias. He performs minimally invasive laparoscopic and thoroscopic procedures, as well as robotic chest and abdominal surgery.

The Sherwood native earned his medical degree and completed his general surgery residency at UAMS, and a cardiothoracic surgery fellowship at Vanderbilt University Medical Center in Nashville, Tennessee. He sees patients at the UAMS Winthrop P. Rockefeller Cancer Institute and at the UAMS Baptist Health Cancer Center at Baptist Health Medical Center in Little Rock. *To make a referral, call 501-296-1200.*



## Orthopaedic Surgeon J. Ryan Hill, M.D., Joins UAMS

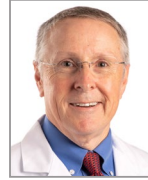
**J. Ryan Hill, M.D.**, a fellowship-trained orthopaedic surgeon

who specializes in shoulder and elbow disorders and injuries, is seeing patients at the UAMS Health Orthopaedic and Spine Clinic in North Little Rock and the UAMS Health Orthopaedic Clinic on Colonel Glenn Road in Little Rock. Hill earned his medical degree from the Keck School of Medicine at the University of Southern California, receiving the university's top honor for graduate students as well as a Distinction in Research and induction into the Alpha Omega Alpha Honor Medical Society.

He completed his orthopaedic surgical residency and a fellowship in shoulder and elbow reconstruction at Washington University in St. Louis. *To refer a patient to him, call 501-526-1046.*

## UAMS is First in Arkansas to Earn Gold Seal of Approval for Spinal Fusion

UAMS recently became the first health organization in Arkansas to earn The Joint Commission's Gold Seal of Approval for Certification in Spinal Fusion, indicating its commitment to providing safe and quality care for patients needing the complex surgery.



## Robert H. Hopkins Jr., MD., Named Medical Director of National Foundation for Infectious Diseases

**Robert H. Hopkins Jr., M.D.**, a professor of internal medicine and pediatrics at UAMS and director of the UAMS Division of General Internal Medicine, has been appointed medical director of the National Foundation for Infectious Diseases (NFID).

Hopkins will continue teaching and seeing patients at UAMS, and remains chair of the national vaccine advisory committee and vice chair of the American College of Physicians Immunization Committee.



## Neurosurgeon Hector E. Soriano-Baron, M.D., Joins UAMS

**Hector E. Soriano-Baron, M.D.**, has joined the UAMS Department of

Neurosurgery as an assistant professor and co-director of Joint Spine Services.

He received his medical degree at Facultad de Medicina UNAM in Mexico City. He completed a neurological residency at the National Institute of Neurology and Neurosurgery in Mexico City and a neurosurgery residency at Wake Forest Baptist Medical Center in Winston-Salem, North Carolina. He completed two fellowships at the Spine Lab of the Barrow Neurological Institute in Phoenix, Arizona, one in biomechanics of the spine, and a third fellowship in complex spine and robotic surgery at Johns Hopkins University in Baltimore, Maryland. He practiced in Georgia before arriving at UAMS. *To refer a patient to him, send a fax to 501-686-8767 or use your office's EpicCare Link.*

## Physician Relations

### Physician Relations & Strategic Development

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### Vice Chancellor for Communications & Marketing

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## CONSULT

### Quiz of the Month

#### QUESTION

You are seeing a 20-year-old man who complains of "puffy eyes" and "swollen ankles" for the past 2 months. He says his urine "looks kinda frothy and foamy". On exam, all of his vital signs are within normal limits, and the exam is unremarkable (including funduscopic) except for mild bilateral edema 2+ in the bilateral feet to the ankle. He has never had any medical problems or surgeries. His laboratories reveal a normal serum creatinine, and urinalysis is significant for 4+ protein without blood or bacteria. He undergoes a kidney biopsy, which is normal on light microscopy but shows diffuse podocyte effacement on electron microscopy. Immunofluorescence is negative. Which is the best treatment for this patient?

- a) Tacrolimus
- b) Cyclophosphamide
- c) Cyclosporine
- d) Corticosteroids
- e) Rituximab

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ANSWER

# News to Know: Updates from UAMS

(Continued from page 3)



## Vascular Surgeon Andre Ramdon, M.D., Joins UAMS

**Andre Ramdon, M.D.,** has joined the UAMS Department of Surgery

as an associate professor of vascular and endovascular surgery.

He received his medical degree from the University of the West Indies in Mona, Jamaica, completed a general surgery residency at the University of Pennsylvania and completed a vascular surgery fellowship at Albany Medical College in New York.

He participated in advanced limb-salvage treatment in Italy and endovascular aortic treatment in Germany. At the University of Pennsylvania, he contributed to a 25% reduction in amputations and the start of a complex endovascular aortic care program. *To refer a patient to him, call 501-686-6176 or use your office's EpicCare Link.*



## Brian Langford, M.D., Specializes in Urologic Reconstruction

**Brian Langford, M.D.,** has joined the UAMS

Department of Surgery as an assistant professor in the Division of Trauma with a specialty in urologic reconstruction.

Langford received his medical degree from UAMS, where he also completed a general surgery internship and urology residency. He received

advanced training in urologic trauma, reconstruction and prosthetics through a fellowship at the UT Southwestern Medical Center in Dallas, Texas.

His clinical interests include the surgical management of Peyronie's disease, male stress incontinence, erectile dysfunction, urethral stricture, upper tract reconstruction and benign prostatic hyperplasia (BPH). *To refer a patient to him, call 501-686-6324 or use your office's EpicCare Link.*

## UAMS Kidney, Liver Transplant Programs Among Nation's Highest Ranked

The Scientific Registry for Transplant Recipients (SRTR), which evaluates transplant programs for the U.S. Department of Health and Human Services, recently ranked UAMS' kidney and liver transplant programs, the only adult programs in Arkansas, among the highest in the nation in categories that have the largest impact on patients' survival.

The kidney transplant program ranked third among 256 programs, while the liver transplant program ranked fourth among 149 programs.

Both received five out of five bars for the speed at which patients obtain transplants after being listed. Also, the kidney transplant program received five bars for patient survivability one year after transplant, while the liver transplant program scored four bars for survivability one year after transplant.

**ARresearch.org**



## Helping Connect Arkansans with UAMS Health Research

Arkansans have a simple way to participate in health-related studies. **ARresearch.org**, an online registry created by the UAMS Translational Research Institute, is available in Spanish and includes more than 8,500 Arkansans from all 75 counties. When filling out the form, registrants choose from 31 health interest areas, such as COVID-19, weight management, cancer, heart disease and a healthy volunteer option. Many studies, such as online surveys, do not require travel, and some are conducted at UAMS Regional Campuses. Compensation is provided in many. Study volunteers are crucial for helping researchers meet enrollment goals and improve the quality of their findings. Please spread the word to your patients and others.

**For more information, visit [ARresearch.org](https://ARresearch.org) or contact [ARresearch@UAMS.edu](mailto:ARresearch@UAMS.edu).**

## UAMS PHYSICIAN RECRUITMENT & PROVIDER PLACEMENT PROGRAM

### The UAMS Physician Recruitment & Provider Placement Program

has a team of placement specialists dedicated to serving the recruitment needs of our partner communities, UAMS Regional Campuses and UAMS faculty. Physician/provider opportunities are available in all specialties throughout Arkansas.

### FEATURED JOBS

**Family Medicine Faculty:** Family Clinic of Ashley County is seeking a motivated board-certified/board-eligible family medicine physician to join a well-established practice in operation since 1982.

**Specialty Opportunities:** New opportunities available in neurosurgery, neurology, pediatrics, rheumatology, urology, pulmonary and radiology.

**Recruitment services contact:** Carla Alexander: 501-686-7934 or [carla@UAMS.edu](mailto:carla@UAMS.edu)

For a complete listing of job descriptions and opportunities, visit: [MedJobsArkansas.com](https://MedJobsArkansas.com)

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# PHYSICIAN PROFILE

*A view from the first-floor lobby, looking up*

*Cover story continued*

adaptive therapy, which allows clinicians to adapt the radiation treatment plan to the patient's normally shifting anatomy to better target the cancer and spare normal tissues; edge radiosurgery, or stereotactic radiosurgery (SRS), a nonsurgical technique that destroys tumors in the brain and spine while sparing the brain and spinal cord; radiotherapy with motion management, which controls radiation directed at tumors that move as patients breathe; and dual-energy CT.

In fact, UAMS is the first cancer center in the United States to have a Philips Spectral CT, the dual technology that provides greater tumor visibility and tissue information than a conventional CT, reduces the number of CTs required, and works in tandem with radiation therapy to improve dose calculation accuracy.

**“The innovative therapies and advanced technology available here place UAMS among the top centers worldwide at the forefront of cancer treatment,” said Cam Patterson, M.D., MBA, chancellor of UAMS and CEO of UAMS Health.**

The cancers that can be treated with proton therapy include those in the brain, spine, breast, esophagus, head and neck, liver, lung, eyes and pancreas, as well as lymphomas and sarcomas.

Treatments typically last 30 minutes or less, and there is little to no pain or discomfort from the radiation.

There is no minimum age for a child to be eligible for proton therapy, and to reduce anxiety, children can even choose their own room theme, displayed through wall and ceiling projectors and accompanied by soothing audio.

***To schedule a physician-to-physician phone consultation or make a referral, call 501-664-4568 or 1-800-371-7996, or send a fax to 501-614-9880.***

***ProtonCenterofArkansas.com***



*In the treatment room of the proton center, children can choose their room theme.*



## **WAYNE BRUFFETT, M.D.**

**Assistant Professor,  
Department of Orthopaedic Surgery  
UAMS College of Medicine**

### **What inspired you to become a doctor?**

Early on, I was fascinated by the structure and function of the human body. Then, as I got into medical school and started doing surgery as a resident, I was even more intrigued by how God designed us. For example, when I review radiographic images of the body and correlate that with what I see during surgery, it just shows me the majesty of God. Couple that with the ability to help people with their painful spinal conditions and you have yourself quite an occupation!

### **What do you like most about your specialty?**

The problems that people can have with their spine are particularly painful and debilitating. There is no pain like nerve pain. If I can relieve that type of pain through non-operative means or with surgery, it is especially rewarding.

### **What makes you unique among your peers?**

I tend to find ways of doing surgery that historically have a good outcome and try not to deviate significantly from those things. The basic principles of spinal surgery that were pioneered years ago in my opinion continue to be the best foundation to build on. It's OK to complement those initial principles with the latest technology, but never substitute for them.

### **What are your clinical specialties?**

Our orthopaedic spine surgery section is really unique in that we have a nationally recognized deformity surgeon in Dr. David Bumpass, a nationally recognized cervical spine expert in Dr. Sam Overley, and a third attending, Dr. Jordan Walters, who has received training from both. I think my 25 years of experience in private practice complements my partners in that I tend to do more straightforward lumbar degenerative conditions and cervical surgeries. Between us, the entire spine is covered from occiput to pelvis, from the more common surgical procedures to the extremely complex!

### **What is the phone number doctors can use to make a referral?**

They can call 501-526-1046 or call or text me directly if they have my mobile number. I am all about being accessible to referring physicians.

# MEDICAL CASE STUDY:

## PULMONARY THROMBECTOMY

### Initial Contact/Assessment

**A 75-year-old woman arrived** at the emergency room at South Arkansas Regional Hospital in El Dorado by ambulance on the afternoon of Aug. 14, 2023, after she became dizzy and couldn't get up from a seated position at her home, even with her husband's help.

Her heart rate was high — in the 130s — and her oxygen level remained low even after external oxygen was administered.

**Nathan Gladden**, an APRN in the Emergency Department, knew the patient had recently undergone knee surgery and strongly suspected a pulmonary embolism, which the El Dorado hospital wasn't equipped to treat. A CT scan then confirmed the presence of a saddle pulmonary embolism — a large blood clot in both of the patient's lungs — and evidence that her heart was straining to pump blood to the lungs.

Gladden said he began calling larger hospitals that are equipped to perform a pulmonary thrombectomy, knowing that would likely be necessary to save the patient's life. But after an hour, while the patient was treated with oxygen and blood thinners, he found that "everywhere was full."

Remembering that UAMS had urged him to call back if he couldn't find another option, he called UAMS back and spoke with **Emily Kocurek, M.D.**, a pulmonologist in the UAMS Critical Care Unit. Kocurek was able to obtain special permission to accept the critically ill patient.

Meanwhile, **Mary "Mollie" Meek, M.D.**, an interventional radiologist at UAMS who would perform the thrombectomy, began a series of conversations with the

transport team while assembling a multidisciplinary team of UAMS doctors to be ready upon the patient's arrival by helicopter.

### Procedure

Among the team members ready and waiting upon the patient's arrival after midnight was **Daniel Bingham, M.D.**, a UAMS anesthesiologist.

Bingham said he placed the patient under deep sedation, using an arterial line to monitor beat-to-beat changes in her blood pressure.

Meek then started the minimally invasive thrombectomy procedure by using ultrasound-guided venous access to insert a catheter in the patient's groin. Using the Inari Trier 20 mechanical thrombectomy system, she positioned the catheter above the clot and then sucked it into a syringe, "just like using a big straw," removing it in pieces.

The Inari system is designed to rapidly extract large volumes of clot while limiting blood loss. Meek completed the procedure at 2:41 a.m., about an hour and a half after it began, and said the largest piece of clot removed was as long as a pen.

### Follow-up

After surgery, the patient remained in the UAMS ICU for 24 hours before being discharged. About a month after the life-saving procedure, she went back to work as a part-time accountant and began physical therapy sessions three days a week. She is scheduled to return to UAMS in November for bloodwork to see if she has a hereditary condition, since some of the clots that were removed appeared to have been "old."

**Mary E. "Mollie" Meek, M.D.**



#### Professor

**Division of Interventional Radiology**  
**Department of Radiology**  
**UAMS College of Medicine**

#### Education

Doctor of Medicine, UAMS

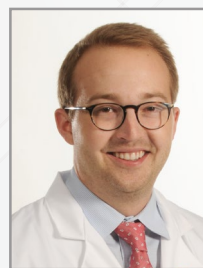
#### Residency

Neurosurgery & diagnostic radiology,  
UAMS

#### Fellowship

Vascular Interventional  
Radiology, UAMS

**Daniel M. Bingham, M.D.**



#### Assistant Professor

**Department of Anesthesiology**  
**UAMS College of Medicine**  
**Co-Director, Anesthesiology Clerkships**

#### Education

Doctor of Medicine, UAMS

#### Residency

Anesthesiology, UAMS

*(Continued on page 7)*



(Continued from page 6)

## Discussion

Meek said the massive blood clot was believed to be related to multiple knee surgeries that the patient underwent weeks earlier after twisting her knee and then tearing a tendon.

She said surgical patients have an increased risk of developing deep-vein thrombosis and embolism. This is especially true after orthopaedic hip and knee surgeries, as well as cancer surgeries. Patients are less mobile after surgery and their immune systems are activated, contributing to a higher risk.

"We've been doing this procedure many years," Meek said, referring to the UAMS Division of Interventional Radiology in the Department of Radiology, where she is a professor. UAMS was one of the first hospitals in the country to begin using the pulmonary thrombectomy system shortly after the FDA cleared it in 2018 for the treatment of pulmonary embolisms.

Meek said the interventional radiology team at UAMS is always prepared to quickly assemble a multidisciplinary team to perform life-saving procedures, and recently formed a Pulmonary Embolus Response Team (PERT) to aggressively treat pulmonary embolisms. She noted that interventional radiologists,

anesthesiologists and intensive care specialists regularly work together to provide state-of-the-art evidence-based care.

Meek praised Gladden and the rest of the health care team at South Arkansas Regional Hospital, with whom UAMS has a partnership, for their concerted efforts to transport the patient to UAMS while ensuring she had good medical support before and during the transport.

A month later, the patient said she felt fine and was grateful for the teamwork at both hospitals that saved her life. She had special praise for Cynthia Mitcham, an RN in South Arkansas Regional's emergency department who she said immediately "latched on to me like you wouldn't believe," which reassured her that she was in good hands and kept her calm.

Despite her precarious position, she said she wasn't scared and even enjoyed the 45-minute helicopter ride to UAMS.

**"It was a beautiful ride – a calming ride," she said. "It was right at sunset. The skies were gorgeous."**

**"She was walking a tightrope!" Mitcham said. "We were all very, very anxious for her situation. It was definitely a collaborative effort."**

# UAMS

## EpicCare Link

## Now Available Epic Care Link Site Administrators

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**If you would like to be the Epic Care administrator for your office,** please send an In-Basket message to "Help," email [helpdesk@UAMS.edu](mailto:helpdesk@UAMS.edu) or call our IT Help Desk at **501-686-8555**. Please provide your full name, the full name of your site and a phone number we can use to contact you.

*Thank you, UAMS Health EpicCare Link team*

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*\*Please allow 1-2 business days to receive your username and password.*

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To request speakers or topics or to learn more about how the UAMS Physician Relations & Strategic Development team can help you, visit [UAMShealth.com/MD](http://UAMShealth.com/MD)

#### **NOVEMBER 7**

##### **Cardiac Valvular Disorders**

Meredith Stogner, APRN  
*ICE-Cardiovascular Surgery Line*

#### **NOVEMBER 14**

##### **Proton Therapy**

Leslie Harrell, M.D.  
*Department of Radiation Oncology*

#### **NOVEMBER 21**

**No lecture/Holiday**

#### **NOVEMBER 28**

##### **Human Trafficking: Do You Know Who is in Your Waiting Room?**

Melony Hilton  
*SVMIC*

#### **DECEMBER 5**

##### **Proton Therapy for HPV Positive Oropharyngeal Cancer**

Santanu Samanta, M.D.  
*Department of Radiation Oncology*

#### **DECEMBER 12**

##### **Sickle Cell Update**

Sunny Singh, M.D.  
*Department of Internal Medicine*

#### **DECEMBER 19**

**No lecture/Holiday**

#### **DECEMBER 26**

**No lecture/Holiday**