PathFINDER
Welcome to the 2022 Winter edition of PathFINDER, our departmental newsletter bringing you updates and notable achievements in our department. This issue highlights several of our faculty, starting with newly retired Dr. Kendall Crookston telling of his long career in our department and the new directions in his life. Dr. Glynnis Ingall describes a meaningful role she played in her collaborative work in the Four Corners area, helping devise a methodology for distinguishing between Hantavirus Cardiopulmonary Syndrome and COVID-19 pneumonia in an area where both illnesses are prevalent. We are excited to showcase our newest research faculty, Dr. Tae-Hyung Kim, who began his UNM Pathology career in August 2020, amid the initial wave of the pandemic. In his short time at UNM, Dr. Kim has generated productive collaborations and expanded his “Mechano-oncology lab,” reflecting his focus on cellular mechanical properties, or mechanotypes, and their role in tumor invasion and metastasis. I call your attention to our section on News and Awards, and the impressive honors and awards our faculty have garnered in just the last few months.

We now are in our third year of the COVID-19 pandemic and our hospital still faces unprecedented challenges with an extraordinary high inpatient census. Pathology faculty and residents are again called to volunteer for redeployment on the UNMH COVID floors. We are very appreciative and grateful for our fellow faculty and residents working well outside of their comfort zone taking care of COVID inpatients and helping support the hospital during this crisis.

Please follow us on Facebook, Instagram and Twitter.

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Cover image: Window Rock (Navajo: Tségháhoodzání) is a census-designated place that serves as the seat of government and capital of the Navajo Nation.


FEATURE
ON LIFE AFTER RETIREMENT
BY THE DEPARTMENT OF PATHOLOGY AND KENDALL CROOKSTON, MD, PhD, FCAP, PROFESSOR EMERITUS

HOW IS UNM TRANSFUSION MEDICINE DIFFERENT FROM OTHER SUBSPECIALTIES IN PATHOLOGY?

1) While anatomical and clinical pathologists typically work with blood and other specimens that have been taken OUT of patients in order to be tested, transfusion medicine puts biological agents INTO patients (blood products, stem cells, coagulation factor concentrates, etc.). This makes an increased magnitude of quality assurance necessary because you can kill someone directly (rather than indirectly, via an incorrect lab result or tissue diagnosis). This exposes transfusion medicine to increased regulatory scrutiny from multiple agencies, including the FDA, and even Homeland Defense and the Nuclear Regulatory Commission.

2) Except perhaps for frozen sections, most of pathology is performed with at least a little time for introspection and investigation before a laboratory result or tissue diagnosis is needed. Much of the work of transfusion medicine happens in real time during emergencies. That means that the transfusion medicine physician on call must be immediately available at all times.

3) While some pathologists see patients for procedures such as fine needle aspirations and bone marrow biopsies, most pathologists don’t assume care for living patients directly. In therapeutic apheresis, we work closely with nurses and clinical colleagues to form a treatment plan and outpatients are often treated with a pathologist as the attending physician in charge.

4) While all pathologists are expected to understand at least a little about the clinical picture in our patients from which specimens are collected, transfusion medicine physicians are required to understand all of the patient’s other medical care in way where we can make medical decisions and recommendations. Over the years I have even treated outpatients for things like iron deficiency, line infections, and ruled out an MI or two.

CAN YOU HIGHLIGHT YOUR BIGGEST ACCOMPLISHMENTS AT THE UNIVERSITY OF NEW MEXICO DEPARTMENT OF PATHOLOGY?

1) Encouraging publishing: Early in my career, Kathy Foucar suggested that I should annotate my CV indicating which authors and coinvestigators were medical students, resident or fellow trainees, or other allied health personnel. Now that CV has about 100 annotations noting “authorships” that I have facilitated for students, trainees, nurses, and medical technologists.

2) Transfusion Medicine Fellowship: I was able to reestablish the Transfusion Medicine Fellowship program and successfully secure continued outside funding amounting to over 1.1 million dollars over a 15-year period. Even though it is a rather esoteric field, most of the graduating fellows stayed in New Mexico for a time or returned to New Mexico later.

3) UpToDate Article: 15 years ago, I was invited by an UpToDate editor to author an article on the approach to patients that decline blood transfusion. I update it regularly and it has been become popular worldwide—just this past year it had 30,000 hits—that’s over 80 people reading it every day and using it to inform their medical practice.

4) Resident Call rounds attending: Laboratory Medicine can only really be learned by doing consultation and decision-making. Thus, resident call rounds is a very important teaching opportunity. I have attended over 700 call rounds with UNM Pathology residents.

5) Saved a life: Most pathologists save lives through the work that we do. Typically, if we were not here then another colleague would step up to do the same work. It is only a few times in my career that I have known that if I had personally not done something, then someone could have died. One example is receiving investigational new drug (IND) approval from the FDA and UNM Human Research Review Committee (HRRC/IRB) approval for Hemopure bovine hemoglobin (a blood transfusion alternative) to be used at UNM. It was an extremely bureaucratic experience. However, all the effort became worth it when I was able to use it to save the life of a young mother who had just delivered a healthy baby at another hospital. She went on to deliver two more children at UNM.

WHAT WERE YOUR FAVORITE MOMENTS?

• Holiday parties at Dr. Lipscomb’s home and new resident/fellow welcome receptions at faculty homes that were well-attended.

• Hearing well-handled cases at resident call rounds.

• Seeing our fellows have success in their careers.

• Working as a Learning Community mentor for groups of medical students and seeing their remarkable professional development over four years.

• Seeing my patients respond to treatment and be able to continue their lives despite life-threatening diseases.

• Working closely with medical technologists and apheresis nurses to make great things happen.

HOW HAVE YOU BEEN FILLING YOUR TIME THIS PAST YEAR SINCE RETIREMENT?

I officially retired February 1, 2021. We are living in a canyon in the mountains of Utah less than an hour’s drive from
both sets of Grandparents and an hour’s drive the other direction to my family's ranch.

We have not regretted retiring early because it has been a blessing to be able to help all four of our parents with various medical issues this past year, including multiple hospitalizations, ED visits, and COVID infections.

I've also been able to help my parents with work on the “ranch” that has become too much for them. Mountain Dell Ranch has about 500 mountain acres containing a lake, a lodge, about 15 miles of 4-wheeler trails; it is leased out for cattle grazing.

My wife and I are now scheduled to start in February 2023 as Area Medical Advisors for about 1800 missionaries from our Church. This is a high-level, full-time volunteer position to help in coordination of medical care (we won’t be staffing a clinic or doing much sick call). We will serve for 19 months at our own expense.

Professionally, the vast majority of my current work is unpaid. I continue to interact with potential and current health sciences students and residents. Opportunities seem to come my way every couple of weeks. For instance, I was recently contacted by a PhD Candidate in Economics from the University of Georgia for advice regarding a project in blood transfusion. Occasionally I work with pathology residents at the University of Utah as an adjunct professor. I published a rather unique paper last year in a journal for physicians entitled, “Don’t Just Walk Past: Perspectives on Christian Service.” (PDF reprints are available if you send me a note at blood@unm.edu). I have done a limited amount of consulting in the area of plasma donation—we are just submitting a paper with over 1.3 million unique donors in the study group. Wow!

I am especially thankful that The University of New Mexico Department of Pathology chose to invest in my career. This included a Fulbright year at the University of Copenhagen, being medical director of United Blood Services, serving as head of the North House in the medical student Learning Community program, and working to serve the residents of New Mexico and the Four Corners region (for which I have developed a strong affection).
FEATURE
RESPONDING TO HANTAVIRUS DIAGNOSTIC CHALLENGES IN THE FOUR CORNERS REGION
BY GLYNNIS INGALL, MD, PHD, PROFESSOR EMERITA

Hantavirus Cardiopulmonary Syndrome (HCPS) is a severe, sometimes fatal, respiratory disease caused by hantavirus. Hantavirus patients may initially present with nonspecific symptoms that mimic other respiratory viral infections. Patients who are developing HCPS may have rapid clinical progression to respiratory failure and cardiogenic shock. This creates a need for a screening test for prompt recognition of HCPS and referral of severe cases to facilities with advanced intensive care services. Unfortunately, rapid serologic tests for detection of antibodies or rapid PCR (Polymerase Chain Reaction) tests for hantavirus are not available for use at community hospital laboratories. For rural hospitals in the Four Corners region, it takes 12-24 hours or more to obtain hantavirus antibody testing results, including transport time to a reference laboratory that can perform this test.

Early in my tenure as a consulting pathologist for healthcare facilities on the Navajo Nation, the need for a screening test for hantavirus became apparent. The Navajo Nation is disproportionately affected by hantavirus cardiopulmonary syndrome creating a concern among health care providers and hospital laboratory technologists in the region to find a means to recognize hantavirus patients when they first present locally. It is believed that identification of these patients at an earlier stage of the disease and transport of patients to facilities like University of New Mexico Hospital (UNMH) for advanced care will improve outcomes.

The challenge we faced was that a rapid screening test for HCPS in rural areas would require the following features:
1. Can be performed with routinely available laboratory equipment.
2. Results can be interpreted by nonspecialized laboratory technical staff.
3. Testing completed without adversely affecting workflow for other tests in the laboratory.
4. Provides timely and reliable information that supports clinical decision making.

A candidate for such a test, that met these criteria, was the 5-point hantavirus peripheral blood screening test developed by Dr. Kathy Foucar and her colleagues at UNMH. They compared peripheral blood findings of cases of HCPS to control subjects who were sero-negative for hantavirus but whose symptoms clinically mimicked HCPS in prodromal or cardiopulmonary phase.

They concluded that an aggregate of five CBC and peripheral blood smear morphologic blood findings were sensitive and specific enough to allow a presumptive diagnosis of HCPS.

For the past twenty years UNMH has been using the 5-point hantavirus peripheral blood scoring tool to triage patients with suspected HCPS.


At UNMH, the 5-point hantavirus peripheral blood screening test is performed by hemato-pathologists. The authors of the original paper posed a question as to whether this test could be performed by rural hospital laboratory technologists. This concern was dispelled after this screening test was successfully implemented at Tsehootsooi Medical Center (TMC) a Navajo Nation Hospital located in Ft. Defiance Arizona.

Hantavirus Peripheral Blood Screening at Tsehootsooi Medical Center (TMC)

Experience at TMC has shown that laboratory technologists (2 and 4 year degree) on all shifts and with varying years of work experience can perform these screens accurately and consistently after appropriate training.

However, implementation of the hantavirus peripheral blood laboratory test alone did not address all the issues related to triaging patients for hantavirus.

Problem:
Hantavirus peripheral blood screening may not be ordered if providers do not consider the possibility of hantavirus infection in patients presenting with flu-like febrile illness. This may be an issue with contract providers who were trained or primarily practice in non-endemic areas.
Thrombocytopenia is the earliest and most consistent finding in patients developing HCPS. To identify more patients with HCPS, a reflex hantavirus screen is performed by the TMC laboratory for ED or urgent care patients who present with thrombocytopenia and respiratory illness.

NOTE: At TMC, about half of the patients with HCPS were discovered first by the laboratory due to reflex hantavirus screening for patients with thrombocytopenia.

TMC lab has been performing the 5-point hantavirus peripheral blood screens for about five years. Technologists are trained on all shifts to perform this test either upon request by the providers or as a reflex test for ED patients presenting with respiratory symptoms and thrombocytopenia. The Centers for Disease Control (CDC) and Navajo Epidemiology Center recognized the value of this screening tool and helped TMC to develop workshops for laboratorians in the endemic region that provided training on how to perform the hantavirus 5-point screen. Pre-pandemic, we trained about sixty technologists from twelve healthcare facilities in the region to perform this test. Currently the CDC is helping us to develop a training manual to be used for future workshops which hopefully will resume when the pandemic is under control.

A paper describing this work, titled “Successful Implementation of a Rapid Screening Tool for Hantavirus Cardiopulmonary Syndrome, 5 Years of Experience from a Community Hospital in an Endemic Region” was recently published in the October 2021 issue of AJCP.

Hantavirus vs COVID-19

When the COVID 19 pandemic hit, we became concerned that patients with hantavirus cardiopulmonary syndrome would be mistaken as COVID-19 patients because such patients would initially present with similar respiratory symptoms. There was also the possibility that some patients in the hantavirus endemic regions would be co-infected with both viruses. The treatment and prognosis for the two types of viral diseases differ. We speculated as to whether the hantavirus 5-point peripheral blood screen would effectively distinguish hantavirus peripheral blood findings from the hematologic changes induced by COVID-19 infections. The CDC helped us to coordinate a study to answer this question. In the Spring of 2020, the hantavirus peripheral blood 5-point screen was performed on symptomatic COVID-19 patients at TMC and at Emory University Hospital in Atlanta. The study demonstrated that COVID-19 patients had low hantavirus 5-point screen scores. Therefore, this hantavirus peripheral blood screening tool could be used to differentiate between these two diseases in the endemic region.

A paper Titled “Hantavirus Disease and COVID-19, Evaluation of the Hantavirus Screen in 139 COVID-19 Patients” was recently published in the October 2021 issue of AJCP.

Conclusions

The hantavirus 5-point peripheral blood screen is an effective tool for rapid presumptive diagnosis of hantavirus cardiopulmonary syndrome in the rural hospital setting.

In the hantavirus endemic regions, the hantavirus 5-point peripheral blood screen may be helpful in distinguishing early HCPS from COVID-19 infections.

Non-specialized laboratory technologists (2 and 4 year degreeed) with varying years of work experience can perform the 5-point hantavirus peripheral blood screens accurately and consistently after appropriate training.

Acknowledgments

The Tsehootsooi Medical Center Laboratory leadership and staff deserve a special note of appreciation for their technical skills and for their enthusiasm for problem solving and process improvement which made these projects successful. Their willingness to share their experience and train other laboratorians in the region is laudable as well. I would also like to thank my collaborators at the CDC, Navajo Epidemiology Center and at Emory University who helped with the hantavirus 5-point peripheral blood screening workshops or were coauthors/researchers on the recent publications.

Training on the Hantavirus 5-point Peripheral Blood Screen

If you would like to receive training on the hantavirus peripheral blood screen for your laboratory, please contact Dr. Glynnis Ingall: Gingall@salud.unm.edu

We can possibly arrange for remote or on-site training options during the pandemic or let you know when the regional workshops resume.
WHAT ARE YOUR RESEARCH GOALS?

In my laboratory we are currently working on a project that aims to elucidate the effects of different glucose levels on regulating mechanotypes of breast cancer cells. Cancer cells experience different levels of glucose during cancer progression. In primary tumor tissue, glucose levels are lower than their normal counterpart tissues, mostly due to the high consumption of glucose by cancer cells. Whereas metastatic cancer cells will be exposed to higher glucose levels during their invasion in the tumor microenvironment as well as in circulation. We are trying to obtain convincing evidence that shows different glucose levels impact breast cancer cells' mechanotype and their behavior. These data will serve as critical preliminary data for my grant proposals.

WHAT ARE YOUR RESEARCH GOALS?

Metastasis accounts for most cancer deaths and therapeutic options to suppress cancer metastasis are urgently needed. Recently, the field of mechanobiology has gained more attention from cancer researchers as cancer progression is closely linked with cancer mechanotypes. Tumor tissues are stiffer than normal tissues and this increased stiffness originates from a dense extracellular matrix. Such a stiff matrix is known to serve as pro-
tumorigenic. In contrast, most cancer cells are softer than normal cells. Those softer cancer cells have an advantage invading a dense extracellular matrix and therefore are easier to metastasize.

Despite the importance of regulatory roles of cell mechanotypes on cancer cell behavior, our current understanding is very limited. To fill the knowledge gap, I first aim to identify soluble or biochemical cues from tumor microenvironment that regulate cell mechanotypes. I have already shown that stress hormone is one of them and now I am working with glucose which seems to increase cancer cell contractility and stiffness. Next, we will identify molecular mediators and signaling pathways that regulate cell mechanotypes. Based on my previous findings, secondary messengers such as calcium and cAMP appear to be the upstream mechanotype regulators and non-muscle myosin, actin, and myosin kinases are the downstream effectors. Lastly, we will investigate therapeutic options that manipulate cellular mechanotypes and ultimately regulate cell behaviors in vivo.

To achieve these goals it is essential to have tools to measure cell mechanotypes. For cell stiffness measurement, I will apply a unique cell deformability assay called parallel microfiltration (PMF), which I developed during my postdoc. Using PMF, we can measure relative cell deformability very quickly in a high-throughput manner (96 well plate format). In addition, we will apply Atomic Force Microscopy (AFM) technique, a gold standard for measuring nanoscale mechanics of biological materials and single cells, to measure stiffness of cancer cells and matrix as well as forces between cell-cell and cell-matrix. I am so excited as our application for the FY22 UNM HSC Research Support Equipment Funding with Drs. Michael Paffett and Diane Lidke was awarded and we anticipate to set up the AFM in the Fluorescence Microscopy Shared Resource at the UNM Comprehensive Cancer Center in February 2022.

WHAT ARE THE GOALS FOR YOUR LAB?

I named my laboratory the “Mechano-Oncology Lab” (https://thekimlab.net). During my master’s, doctoral, and post-doctoral research, I was trained in biochemistry, molecular and cellular biology, cancer metabolism, and mechanobiology. Using my expertise in these areas, I aim to gain a comprehensive understanding of how mechanical properties of cancer cells and tumor microenvironment contribute to cancer progression. As a basic cancer research lab, our goal is to identify novel therapeutic targets to reduce metastasis in various cancers and validate them in preclinical settings. Then we hope our research can be translated into the clinic.

I also aim to establish my lab as a nurturing environment for the trainees. In addition to research, mentoring is another important job and I hope all my mentees succeed in their careers. Thus I am trying to build a healthy, respectful, productive, and fun lab environment. I also value Diversity, Equity, and Inclusion (DEI) in my lab environment and I do my best to make my lab inclusive.

Last, but not least, I am very eager to collaborate with my colleagues here at UNM. During my postdoc training I collaborated with scientists from diverse backgrounds such as neuroscience, stem cells, mechanical engineering, bioinformatics, theoretical modeling, and bioengineering. I will be happy to share my mechanotyping methods with others and please reach out to me if you are interested in testing mechanotypes of your samples. Ultimately, as a long-term goal, I wish to establish a Mechanotyping Shared Resource Facility here at UNM to support the scientific community in New Mexico.
WHY DID YOU CHOOSE UNM PATHOLOGY?

I would say it was all about the people and the environment. During my job search, the UNM Pathology job posting caught my eye as it specifically said “…seeking a tenure-track Assistant Professor to build and sustain an active research program in cell biology with special emphasis on cancer biology, stem cells and niche biology, or immune responses and immunotherapy. Applicants with research programs in basic biomedical research, novel imaging approaches, systems biology, or mechanobiology are also encouraged to apply.” I felt like it was calling me.

Since I had no connection with UNM Pathology, the sole source for me to learn more about the department was the internet. I immediately began my research on the department and obtained lots of information about the department from its Twitter and recorded seminars of the Pathology Seminar Series. Then I learned more about the UNM HSC including its Comprehensive Cancer Center, AIM CoBRE, and many other Shared Resource Facilities. I thought the academic environment was perfect for my research program. Surprisingly, during the first phone interview session, I learned that all of the equipment that I need for my research already existed in the department and cancer center.

Prior to my visit to UNM campus for the interview, I attended to the Biophysical Society Annual Meeting held in San Diego, CA, in February 2020. At this meeting, I met Drs. Diane Lidke and Aaron Neumann and said hello. They kindly visited my poster presentation and we had a good discussion. Although we didn’t have a beer together as I imagined—perhaps not appropriate with an interview candidate anyway—I knew that they are nice people.

During my visit to campus I was impressed by the department faculty members whom I met because of their diverse and interesting research programs, outstanding publications, and kindness. I also thought the leadership and mentorship by senior faculty members were invaluable assets of the department. As anticipated, I am now receiving priceless mentoring from many of the faculty members and I cannot say enough about how much I appreciate their support. Additionally, the people in the administration office were very nice and made my visit comfortable. I would like to say thank you again to everyone, especially to Ruth and Burt.

It feels very weird nowadays, but before the pandemic, when I had my on-campus interview, I stayed in Hotel Chaco and it was one of the best hotels in which I have ever stayed. I still cannot forget the sunset and Sandia Mountains in red color that we saw during the dinner from the Level 5 restaurant. I wanted to show the same view to my kids, but I haven’t had a chance to do it due to the pandemic.

Speaking of family, my family was one of the important parts for my decision to come to UNM as well. My parents and sister’s family are living in Denver, CO, so Albuquerque is the best place for us to settle down. Needless to say, my parents were so happy when I accepted the offer and I was very happy to make them happy! I am grateful to be a part of UNM Pathology.

DESCRIBE YOUR FAMILY’S TRANSITION TO ALBUQUERQUE DURING THE PANDEMIC.

Right after my campus visit in February 2020, the COVID-19 pandemic and National Emergency were declared in March and that was the beginning of this long, never-ending pandemic. I received my offer letter in May and I was grateful to the UNM and Department leadership as they continued the hiring process. I had heard depressing news from others that their scheduled interviews and even job offers were cancelled during this early phase of the pandemic.

Fortunately, the moving business was listed as one of the “essential businesses” and we were able to pack and move from Los Angeles to Albuquerque by driving. My wife and I were worried about the kids, 6 and 3 years old at that time, as it was the longest drive that they had ever experienced. During this long drive the kids were very cooperative and helped make moving smooth and pleasant. Of course, YouTube helped us a lot too!

The most challenging part of the pandemic for me, while I was setting up the lab, was taking care of my two kids alone due to my wife’s delayed graduation. In 2020, my wife, Seeun Oh, was in the final year of her Ph.D. program at the Cedars-Sinai Medical Center in Los Angeles. However, she was not able to do any experiments as the lab was closed. Even after it opened again later in Fall 2020, she was only able to work for a very limited time to follow the social distance regulations. These circumstances caused a significant delay in her graduation and I had to continue sole parenting for 12 months, which was much longer than we originally expected. Despite the absence of their mom, Jaehee and Woojin did a great job with their transition. Whole-day care programs were available during the pandemic, so they went to “school” and made some good friends. Overall, I think we all did a good job and by the time the kids became sick of my food, the family was finally reunited in August 2021 and Seeun successfully defended her degree in October 2021. We are now enjoying our new life in Albuquerque and everyone is very satisfied and happy to be here!
FACULTY NEWS AND AWARDS

NEW FACULTY

Brittney Coffman, MD, Visiting Assistant Professor Clinician Educator, Hematopathology, October 15, 2021

NEW FACULTY

On November 23rd, Diane Lidke, PhD, Professor of Pathology, was awarded the 2021 HSC Faculty Research Excellence Award in Basic Science. Dr. Lidke, our department’s Vice Chair for Research, has had many significant research accomplishments, making a major impact on science in her area. This award is nominated and selected by her peers which makes it that much more impactful. Congratulations, Dr. Lidke, on receiving this well-deserved award!

Angela Wandinger-Ness, PhD, Professor of Pathology, was appointed to the role of Interim Director of the UNM Center for Molecular Discovery (CMD) in August 2021. Dr. Wandinger-Ness is overseeing the pilot programs, supporting both the CTSC opioid project and the CTSC pilot projects, and exploring new projects that help further develop the CMD portfolio.

Elaine Bearer, MD, PhD, Professor of Pathology, was awarded an Honorary Professorship from the Strömstad Akademie in Strömstad, Sweden. On September 1, 2021, Dr. Bearer was nominated by Dr. Ulf Berg, a Professor of Chemistry from Lund University, for the Honorary Professorship from the Strömstad Akademie in Sweden. Dr. Ulf Berg discovered Dr. Bearer when attending her talk at a meeting of the American Chemical Society. The Strömstad Academy is a Nordic Institute for Advanced Studies that includes as members professors from Swedish, Norwegian, Danish and other Universities worldwide, including four Nobel laureates. The Academy is mainly virtual - with offices in Strömstad and local chapters in Stockholm/Uppsala, Gothenburg, Malmö/Lund, Strömstad, and Falun - creating a solid knowledge bank of scientific competence and proven experience. Congratulations, Dr. Bearer, on receiving this honor!

Congratulations to Dr. Angela Wandinger-Ness, Professor of Pathology, and Dr. Martha Grimes, Research Assistant Professor, College of Pharmacy! Their competitive proposal was awarded this year’s pilot funding from the Department of Pathology. The project title is “Elevated Rac1 promotes tumor angiogenesis in ovarian cancer cells.”

Albuquerque Mayor Tim Keller proclaimed July 14, 2021, as Dr. Cheryl L. Willman Day. Thank you to the mayor and Economic Forum for recognizing the deep impact Dr. Willman, Professor of Pathology, has had on Albuquerque and New Mexico.

New Mexico Governor Michelle Lujan Grisham officially proclaimed July 20 as Dr. Michael Crossey Day. Dr. Crossey, CEO of TriCore Reference Laboratories, collaborative partner of UNM Pathology, received this honor in light of his expert service, partnered with the New Mexico Department of Health (NMDOH), to expand capacity for COVID-19 testing. The NMDOH says TriCore performed nearly 1 million COVID-19 test since the beginning of the pandemic, as a pave of over 60,000 per month. Congratulations, Dr. Crossey, and thank you for your efforts against COVID-19, as well as your many contributions to the UNM Department of Pathology.

Congratulations to the UNM Sandoval Regional Medical Center (SRMC) on obtaining a Level III Trauma Center designation from the Department of Health Trauma Surveyors who visited in January 2022. A special thank you to Joseph Griggs, DO, UNM Pathologist, for contributing his expertise and energy during this process. Dr. Griggs has directed the TriCore Pathology team at SRMC over the past 3 years to manage our Blood Bank and maintain cogent protocols within ACS guidelines. Getting the SRMC on the trauma center accreditation map is a very impressive achievement, but is even more outstanding when considering that it occurred during these unprecedented times. Thank you, and Congratulations, to the SRMC and to Dr. Griggs!

Congratulations to the Human Tissue Repository (HTR) for achieving accreditation from the College of American Pathologists. CAP accreditation attests to a laboratory’s excellence in tissue processing and storage, record-keeping and quality control and signifies the highest standards for all laboratory processes and procedures. It also attests to the skill and dedication of the HTR staff. The HTR, directed by Dennis McCance, PhD, and Edgar Fischer, MD, PhD is supported by the UNM Department of Pathology and the UNM Comprehensive Cancer Center.

Congratulations to our Medical Laboratory Sciences Program on achieving re-accreditation through October 2031, as per recommendation from the Review Committee for Accredited Programs (RCAP) to the National Accreditation Agency for Clinical Laboratory Sciences (NAACLS). NAACLS is committed to being the premier agency for international accreditation and approval of educational programs in the clinical laboratory sciences and related health care disciplines.
GRADUATE STUDENT NEWS

Congratulations to Erica Pascetti, 4th yr Biomedical Sciences Graduate Student in the Gillette Research Lab for receiving an American Society for Hematology Abstract Achievement Award for her abstract titled “Tetraspanin CD82 Regulates Hematopoietic Stem and Progenitor Cell Quiescence and Regeneration.” The ASH Abstract Achievement Award is a merit-based award for trainees who are the first author and presenter of a high-scoring annual meeting abstract. The ASH annual meeting took place both in person and virtually in December 2021. Congratulations, Erica on your achievement!

STAFF NEWS

The Department of Pathology’s Staff was well recognized by the School of Medicine (SOM) Dean’s Staff Awards in 2021, with three staff nominees and one recipient. The award ceremony took place virtually at noon. Congratulations to our winner, Nancy Risenhoover, and to nominees James Chavez, Rosalia De Leon, and Amalia Estanislao! The New Mexico Office of the Medical Examiner also had two award winners this year: Rebecca Romans and Aidan Martinez. Congratulations OMI staff for your recognition from the SOM Dean!

On Monday, November 1, 2021, Nancy Risenhoover retired from her long time role as Department Administrator. Nancy has been a leader in our department for over two decades. Thank you, Nancy, for your years of service to the department, and congratulations to Burt Martinez, who succeeded her in this key leadership role.

UPCOMING FACULTY TALKS

KATHRYN FOUCAR, MD
Invited Speaker, 43rd Annual Seminar Pathology Review: Gastrointestinal, Genitourinary, Hematopathology for the General Pathologist
February 13-18, 2022
Snowmass Village, CO
1. “Overview of Hematopoietic Disorders: Key Steps in Diagnosis”
2. “Myelodysplasia, CHIP, and Mimics”
3. “Acute Myeloid Leukemia: Strategies for 2022”
4. “Myeloproliferative Neoplasms: A Practical Approach”
5. “Approach to Lymphoid Disorders in Blood”
6. “Challenging Blood and Bone Marrow Cases”
   https://www.edusyme.com/product/details/1422

ANGELA WANDINGER-NESS, PHD
Invited Speaker, NIH Fostering Cohort Recruitment (FCR)
Host: Marie A. Bernard, MD, Chief Scientific Officer for Scientific Workforce Diversity
February 23-24, 2022
Virtual Format
https://web.event.com/event/3218ef9e-adb6-4392-9045-78de042e0161/summary

Invited Speaker, Illuminating the Druggable Genome Annual Meeting
“Illuminating the functions and translational potential of the CDC42BP/MRCK kinases in ovarian cancer.”
March 2-4, 2022
Virtual Format
https://commonfund.nih.gov/idg

DARIO MARCHETTI, PHD
Invited Speaker, 2022 Annual AACR meeting
“Deciphering primordial CTC signatures leading to immune escape and metastasis.”
Bowley, T. and Marchetti, D.
April 8-13, 2022
https://www.aacr.org/meeting/aacr-annual-meeting-2022/

DEVON CHABOT-RICHARDS, MD, AND KATHRYN FOUCAR, MD
CAP Pathology in the Park Educational Meeting
June 27-30, 2022
CAP Pathology in the Park Educational Meeting website
MAKE A GIFT

Your gift today impacts healthcare and research for tomorrow. Please consider making a recurring, one time, or legacy donation to one of the following funds:

THE FOUCAR ENDOWMENT
Invest in future Pathologists. Recruiting and training highly proficient Pathology residents and fellows is a top priority.

THE GEORGE D. MONTOYA RESEARCH SCHOLARSHIP FUND
Encourage UNM students to pursue a career in biomedical research.

THE THOMAS M. WILLIAMS & MARGARET G. WILLIAMS ENDOWMENT FOR EDUCATION AND TRAINING
Support the greatest educational and training needs within the Department of Pathology.

UNM SCHOOL OF MEDICINE STUDENT EMERGENCY FUND
Donate to the UNM School of Medicine Student Emergency Fund to support medical students and residents:

DONATE
Donate by credit card through the UNM Foundation website. Specific links to each Pathology fund are listed at

Donate by check, estate planning, bequest, charitable annuity, insurance gift, charitable trust and more. Thank you for thinking of The University of New Mexico Department of Pathology funds as you generously give!

ACKNOWLEDGEMENTS
The University of New Mexico Department of Pathology gratefully acknowledges Mr. William F. Collins for the design and layout.

Please share your news with: William F. Collins: wfcollins@salud.unm.edu

For more information on our department, please visit our website:
https://hsc.unm.edu/medicine/departments/pathology/