Dear Friends of WSU Spokane,

Last fall a front-page, above-the-fold Spokesman-Review headline exclaimed “Report Endorses Med School”; the cover of The Inlander read “Operation Med School”; and the Journal of Business front-page headline was “Doctors Plug Med School Here.” By comparison, this fall seems relatively quiet. Behind the scenes, however, things are indeed happening and moving quickly.

Our new College of Medicine dean and his team are preparing our application for medical school accreditation.

Our development directors are busy meeting with advocates and contributors inspired to make a difference.

Our students and staff are striving to be good partners through our Cougs in the Community program.

Our research scientists are earning national grants and contracts for their projects that will improve quality of life in our society.

Our College of Nursing is interviewing dean candidates to succeed our former dean who has returned to her important research in the “greening” of healthcare.

And construction is on schedule in building the new teaching health clinic on campus. Because of the nature of our campus, all of this progress is interconnected. For example, our new dean of medicine, Dr. John Tomkowiak, has a successful history of working with counterparts in other health professions like pharmacy and nursing, the other two WSU colleges based on our campus.

He is a veteran of community-based, inter-professional medical education, having been instrumental in establishing and sustaining community-based medical education in Florida, New York and Illinois, experience that will be critical to our success in developing that model in Washington.

Dr. Tomkowiak’s background as a psychiatrist complements the behavioral health and addiction research already occurring at WSU Spokane. In fact, it will align well with the new psychiatry residency program that will be in the soon-to-open Spokane Teaching Health Clinic. The clinic’s goal is to increase medical residency positions in Spokane and provide inter-professional experiences for our students.

Construction will be complete by the time our next issue of this magazine comes out. In the meantime, to see how things have changed and are changing on campus, take a drive east on Martin Luther King Way, then take a left on Sherman Avenue until you get to Spokane Falls Boulevard. Go straight briefly until you get to Riverpoint Boulevard. Turn left and stay on it until you come back to Spokane Falls Boulevard.

I think you’ll be pleased with what you see, as well as what is represented in this issue: a dynamic, beautiful campus community that is making things better for our students, Spokane and the world.

Sincerely,

Lisa Brown, Chancellor, Washington State University Health Sciences Spokane
New Dean of Medicine Looks for Innovation
Dr. John Tomkowiak is creating the agenda for WSU’s new medical school which will welcome the first class of students in August 2017.

Late President Took State’s Needs to Heart
Under Elson S. Floyd’s leadership, WSU consolidated the health sciences programs on its Spokane campus and expanded access to higher education across the state.

Interim President Moves Key Initiatives
Dan Bernardo’s extensive experience in higher education and at WSU will take the University to the next level in preparation for the next president.

Distinguished Researchers Move to WSU
A group of University of Washington researchers have made WSU Spokane their new home, bringing with them more than $20 million in existing grant and contract funding.

New Program Connects Cougs with the Community
WSU Spokane’s new community engagement initiative is building community partnerships to promote positive health outcomes.

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The pace has been brisk since the first public pronouncement in mid-2014 that WSU would be pursuing its own medical school. Now, with the first class anticipated to begin less than two years from now, the development process has accelerated. Part of that is driven by a December 1 deadline to submit the college’s materials for national accreditation. The college has paid its $25,000 application fee to the Liaison Committee on Medical Education and the American Association of Medical Colleges lists WSU among its membership. That means, even though the college isn’t yet teaching students, it is considered part of the medical school fraternity.

Another part of the accelerated process is due to the energy and involvement of the College of Medicine’s new founding dean.

That dean, John Tomkowiak, M.D., formerly of the Chicago Medical School, is officially on the job, part time—one week in Spokane, one week in Chicago—until the end of the year. As of this writing he has been dean for two weeks and has already held dozens of meetings with his new faculty and staff, as well as with community and health care leaders in each of the cities where the new college will have clinical campuses: Spokane, Tri-Cities, Vancouver and Everett. Tomkowiak has adopted one of President Floyd’s mantras, that WSU’s medical school will serve the entire state.

“Spokane will be the place where students spend most of their early training, but the other campuses also have a major stake in this,” Tomkowiak said. “We want our students who spend their clinical years on the other campuses to feel connected to those places.”

That message of statewide inclusion served the university well as Floyd and his team worked for months to build support among legislators for a WSU medical school. With votes from representatives and senators representing every region of the state, including Seattle, the WSU medical school bill passed by overwhelming margins in both chambers. Governor Jay Inslee signed it into law on April 1. Cameras captured photos of an ailing, but smiling President Floyd shaking the governor’s hand following the ceremony. It was one of the most significant days in the university’s 125-year history and marked the crowning achievement in Floyd’s eight-year tenure as president.

In September, the Board of Regents rewarded the president’s work by naming the new medical school the Elson S. Floyd College of Medicine. During the same meeting, Interim President Dan Bernardo announced Tomkowiak’s appointment as founding dean.
Establishing a new culture

Much of Tomkowiak’s agenda for the new college reinforces what Floyd had envisioned: training physicians, especially primary care, in rural and underserved areas; developing a pipeline of students from those underserved groups who are more likely to return as physicians to their home regions; and improving the health of people statewide.

But Tomkowiak, who is also a licensed psychiatrist, has brought some ideas of his own.

During his second week in Spokane, he stood onstage in an auditorium on the WSU Spokane campus to preside over his second meeting with College of Medicine faculty and staff. He talked about building a culture of innovation in his new workplace and then he introduced a guest speaker: Andrew Richards, founder and chief technology officer of Reel DX.

Richards talked about the myriad of companies, including his, that are developing new technologies that give patients more options for accessing health care. He says some patients are using smart phone apps for video appointments with their doctors; sometimes those doctors are in other cities—or other countries.

He showed a photo of Mercy Virtual Hospital, a new, first-of-its-kind hospital in suburban St. Louis that cost $54 million but has no beds. It is a telemedicine hub where doctors and nurses sit in call centers with video screens. They see and talk to their patients, have access to their medical records and can monitor vital signs. In many cases, the providers are able to diagnose problems and prescribe remedies. In others, they make referrals to other providers.

Richards’ presentation spawned an interesting discussion about how the new technologies are expanding and changing medicine. Physician faculty members expressed their concerns about the quality of care offered during virtual appointments and the legal and ethical questions raised by the new technologies.

After the presentation, a smiling Tomkowiak said he was pleased the discussion forced audience members to examine their biases about the current health care system. Then he reiterated his desire to develop a culture of discovery and entrepreneurship within the College of Medicine.

“I want all of us, students, staff, faculty, administration and our partners, to be thinking ‘How can we make things better? How can we innovate? How can we build? How can we invest not only in ourselves, but in the state of Washington,’” Tomkowiak said.
Why a Second Public Medical School?

The need for a second public medical school in the state has been well-documented in past WSU Spokane magazines. Here’s a recap:

Why we need more physicians:

Primary care physician shortage, aging physicians, aging population, expanded healthcare roles, and population growth.

Most states have multiple medical schools. Missouri, with a smaller population than Washington, has four and graduates 501 MDs a year. Washington graduates 120.

Why access to medical education should be increased:

While the population of Washington state has doubled in the last 40 years, the state’s medical education program at the University of Washington has only grown by a few seats. Less than 15 percent of our state’s applicants to the UW School of Medicine were admitted in 2012-13 to fill one of the 120 seats allotted for Washington residents.

Washington ranked 42nd out of the 45 states with accredited medical schools in allowing eligible in-state applicants to attend an in-state program. In the meantime, 220 new medical school students from Washington enrolled elsewhere in the country.

During his short time as dean, Tomkowiak has introduced new concepts he considers to be innovative for American medical schools. For example, he proposes WSU medical students take a series of courses in leadership to prepare them for those roles, whether it be in their hospitals, clinics or communities.

It’s a curriculum that he says is not done to this extent in any other allopathic American medical school. His suggestion has been greeted warmly by top administrators of the Everett Clinic, one of the college’s new clinical partners. They say their company spends a huge amount of money each year to teach leadership skills to their employees.

Tomkowiak has also floated the idea of allowing students more control over the pace and order in which they take their courses. He says the well-established medical education system has set artificial limits that dictate when students take their classes and how much time they spend on them. Those limits often have no real relevance to students, he said.

“I can’t show you whether a self-paced system will work because no medical school is doing it like we’ve envisioned it,” Tomkowiak told his faculty and staff. “This is our chance to lead and demonstrate that this is a better way to educate the physician of the future. I’m not saying we’ll do this, but I’d like you to consider it.

“If we don’t try some of these new things when we’re starting this medical school, we’ll never get to them,” Tomkowiak said. “I’ve talked to many deans across the country who have said they’re envious of where we are because we can do new things that would be next to impossible for them to do.”

Tomkowiak’s ambition and desire to establish a new culture fits right into the concept embodied by the term “Elson Time.”

“I never had the good fortune to meet Elson Floyd,” Tomkowiak said, “but he has set a high standard for us to meet and I’m excited about pushing us to the heights that he envisioned.”
He had this notion that Washington State University could start a medical school, and it wasn’t long before he persuaded others that WSU really was perfectly capable of doing such a thing, and furthermore, that it was WSU’s mission as the state’s land grant university to do so.

“Elson will not only be remembered as our most impactful president to date, but as the one who convinced us just how great we can be,” is how WSU Board of Regents member Mike Worthy explained it.

The WSU Elson S. Floyd College of Medicine is now well on its way to welcoming its first class of medical students. Faculty have been hired, a team is working on getting the medical school nationally accredited, and the first dean of the college was hired and began work in October. The goal is to begin classes in August 2017.

Floyd died at the age of 59 in Pullman on June 20 of complications from colon cancer, just 15 days after he took a leave of absence from his job as president of WSU. His weight loss was considerable between January and June, but he persevered and continued to work, which included making several trips to Olympia to persuade legislators to change an antiquated law in order to permit a second public medical school to operate in the state, and to allocate $2.5 million to WSU to create it.

He lived to see the law changed and was there in Olympia on April 1 when Gov. Jay Inslee signed the new law, but he missed the legislature’s decision to allocate the startup funds to WSU, which occurred 10 days after he died.

“In isn’t it amazing what one gifted Cougar has done for the whole state of Washington,” Gov. Inslee said at Floyd’s memorial service in Pullman on Aug. 26. Inslee said Floyd was “one of the greatest Washington leaders ever.”
Floyd was known for getting out and spending time with the students, whether it was sitting in the student section at sports events, or talking with them as he made his way across campus, or allowing them to use space in his home for meetings. They fondly referred to him as “E-Flo.”

His widow Carmento Floyd told the thousands of students, employees and leaders from all over the state of Washington who gathered for his memorial service in Pullman that Elson referred to the WSU students as his “28,000 children” and he had great expectations for all of them.

When Floyd became president of WSU in May 2007, he already was familiar with higher education in Washington state. He had spent five years in leadership positions in Washington in the 1990s, first at Eastern Washington University and then as executive director of the Higher Education Coordinating Board. He left the state and became president of Western Michigan University for five years, and then president of the University of Missouri for almost five years before he became president of WSU.

Under Floyd’s leadership, WSU consolidated the health sciences programs on its Spokane campus and expanded access to higher education by growing the WSU campuses in Spokane, Tri-Cities and Vancouver, and establishing WSU North Puget Sound at Everett.

“President Floyd embraced Spokane’s vision and led the development of WSU Spokane as a health science education and research campus,” said WSU Spokane Chancellor Lisa Brown. “He will be remembered as one of our city’s most transformative leaders.”

Floyd had many friends in Spokane, among them community leader Rich Hadley, the recently retired president of Greater Spokane Incorporated (GSI). Hadley and GSI played a large role in persuading the Washington Legislature to fund the construction of the newest building which houses medical education on the WSU Spokane campus. It opened in 2013. Hadley retired from GSI last spring but continued to actively support Floyd’s push for a WSU medical school until the school was approved.

“Elson’s legacy, the Elson S. Floyd College of Medicine, was made possible by his clear vision, his audacious presence, his constant tenacity, and his exceptional leadership,” Hadley said. “Elson was a champion and he made us feel the same.”

Celebrating the groundbreaking of the future Pharmaceutical and Biomedical Sciences building in 2011 were state Senator Michael Baumgartner, former Governor Christine Gregoire, then state Senator Lisa Brown, the late President Elson S. Floyd, and former WSU Regent Betsy Cowles.
WSU hasn’t hit the “pause” button as it awaits a new leader, Interim President Dan Bernardo has said multiple times since former President Elson Floyd died in June. Initiatives sparked by Floyd are moving forward—including the medical school, says Bernardo, who was WSU’s provost—the chief academic officer—and executive vice president when Floyd died.

After a search for the next president is completed and the new president appointed, Bernardo said he expects to return to his prior position as provost, a position now shared by Vice Provost Erica Austin and Ron Mittelhammer, dean of the College of Agricultural, Human, and Natural Resource Sciences (CAHNRS).

In his last meeting with Floyd, the president told him, “Move forward without me,” Bernardo said. So, with the help of the entire leadership team, he has done just that.

Among the initiatives:

**Funding:** WSU has launched a private support campaign for the accreditation, implementation and operation of the new medical school. Phase 1 of the campaign is support for the Dr. Elson S. Floyd Medical Education Founders Fund.

**Student Success:** The University is focused on enhancing undergraduate student success, with particular focus on its first-year retention rate.

**Research:** Departments have been more strategic in research by reorganizing and focusing on five key research areas known as the “Grand Challenges.”

**Meeting needs:** WSU is developing the University Center at Everett to serve the advanced manufacturing and aerospace industries in the region.

Bernardo has extensive experience in higher education—including teaching, research, administration and policy development—at the university, college and department levels.

“I am a Coug through and through,” Bernardo said. “I hope that my experience at WSU will move the university forward at the speed and with the quality that will allow an easy transition for our next president.”

Previously, Bernardo served as vice president for Agriculture and Extension and dean of CAHNRS, the largest college in the University. In that position, he was responsible for administering teaching, research and outreach programs in food, agriculture, natural resources and human sciences.

Together, CAHNRS and WSU Extension have more than 2,200 employees and an annual operating budget of more than $180 million. As dean of CAHNRS, he led efforts to reinvigorate WSU’s food and agricultural programs, including raising more than $220 million in private contributions to fund endowed chairs, facility improvements and programmatic activities.
A distinguished physician researcher has been named director of a new program at WSU Spokane to improve community health in underserved populations and geographic regions.

Former University of Washington professor of epidemiology and medicine Dedra Buchwald, M.D., will head the Initiative for Research and Education to Advance Community Health (IREACH). Buchwald and the group of researchers who are joining her bring more than $20 million in existing grant and contract funding to WSU Spokane, including over $6 million for the first year alone.

Native health history

Buchwald’s National Institutes of Health-funded research over the last 30 years has focused on American Indian and Alaska Native health, twins, and chronic fatigue/chronic pain. She founded the Partnerships for Native Health, one of the largest research centers on Native health in the U.S., as well as the country’s largest twin registry, a community-based registry of about 10,000 children and adults residing primarily in Washington state.

“Our research is unique in that after we’ve finished, we come back and act on it in some way with the community.”

Joining Buchwald in IREACH from the UW are associate director Michael McDonell, Kai’mi Sinclair and Lonnie Nelson, all Ph.D. faculty members in Partnerships for Native Health; Glen Duncan, Ph.D., chair of WSU Spokane’s Nutrition and Exercise Physiology program and director of the Washington State Twin Registry; and Abigail Echo-Hawk, co-director of Partnerships for Native Health.

Since arriving this summer, the group has already submitted another $6.7 million in grants and contracts. According to Senior Vice Chancellor of Academic Affairs and Research John Roll, who is credited with bringing the group here due to past partnerships with them, WSU Spokane campus research has grown the last three years from around $14 million to nearly $20 million per year.

“Combined with IREACH, our totals will be catapulted to a much higher level.”
Research on addiction, intervention

McDonell’s primary research interests are on how interventions, such as behavioral therapy, can be used to treat alcoholism in populations that suffer from high rates of addiction. He is nationally known for his work on using new alcohol biomarkers to improve the assessment and treatment of alcoholism.

McDonell recently received funding to evaluate a new state program to prevent severe mental illness. He is also part of a WSU team that has received funding to develop a marijuana breathalyzer.

Sinclair’s research focuses on community-based interventions to prevent diabetes and promote health in Native populations. She is key investigator on three large federal grants focused on either adapting evidence-based diabetes prevention strategies for Native communities or testing the impact of culturally based interventions on health.

Nelson’s research focuses on using patient-centered and harm-reduction behavioral strategies to improve health in Native communities. His particular interest is on cultural adaptation of interventions to address lifestyle issues such as smoking, weight loss and substance abuse. He leads several federally funded studies focused on smoking cessation and stroke prevention in American Indian populations.

Work complements existing research and focus

Duncan was a faculty member in epidemiology and the graduate program coordinator for the interdisciplinary graduate program in nutritional sciences at the UW before joining WSU. His twin research examines how genes, behavior and environment affect health and wellbeing. Duncan also studies built environments (our surroundings and how we use them).

Echo-Hawk works with American Indian and Alaska Native tribes to engage them in health disparities research and with health researchers to ensure research is done in a manner that respects tribal sovereignty and is culturally appropriate. She has been an integral part of establishing health research projects and public health initiatives with rural and urban tribal communities across the United States.

IREACH will work in partnership with WSU Spokane’s Program of Excellence in Addictions Research (PEAR), a long-standing multidisciplinary group of researchers that has made significant contributions to the field of alcohol and drug addiction. It was established by Roll and is directed by Sterling McPherson.

The addition of IREACH complements other work as well, said Roll.

“This group of scholars strengthens our already strong commitment to conducting cutting-edge research to improve the lives of all patients, their families and their communities,” he said. “They fit well with research being conducted in multiple WSU colleges and will complement the community-based approach to medicine that is embodied in the new Elson S. Floyd College of Medicine.”
Students in the health sciences programs at WSU Spokane will enter into professions that serve the community.

But instead of waiting until graduation, they can go into the community during the school year and serve through Cougs in the Community, an initiative that began in August.

Cougs in the Community offers ways for students, as well as faculty and staff, to engage in community service volunteer opportunities.

With similar models already in place at WSU Tri-Cities and WSU Vancouver, and as WSU Spokane grows into a leading health educator in the region, it was time to get on board.

“The idea is for our health sciences students to get opportunities that go beyond their clinical experience and get exposed to different nonprofit community collaborations,” said Elysia Spencer,
community engagement coordinator at WSU Spokane. “They can use their skills and knowledge to make a difference, whether it’s through mentoring high school students interested in STEM fields or collaborating with a neighborhood community center to provide educational opportunities around health.”

The initiative is still young but volunteers have already participated in a handful of events.

In September, Cougs in the Community joined other organizations as part of the United Way of Spokane County’s “Day of Action.” WSU Spokane staff members assisted an elderly woman in the East Central neighborhood with yard work.

Also in September, students, staff and some family members joined with The Lands Council for its annual river cleanup project.

And coming next April, Cougs in the Community plans to be involved with the city’s “Spokane Gives” initiative.

“The short-term goals are all about building relationships and providing the students the chance to go beyond the traditional academic experience,” Spencer said, adding that many students aren’t yet aware of all the opportunities to volunteer and work with nonprofit organizations in the area.

WSU Spokane educates our future health care workforce. Rather than training students to simply treat symptoms of diseases in their patients, Cougs in the Community aims to expand upon the classroom lessons of patient-centered care, empathy and diversity awareness to help them understand and experience social and environmental factors that can lead to poor health.

“Treating a patient for something after the fact without addressing social determinants of health is just putting a Band-Aid on a bigger problem,” Spencer said. “If we can continue to expose our students to different areas that may not necessarily be addressed through a textbook we can widen their eyes to the opportunities to collaborate with other community programs.”

This school year, Cougs in the Community will focus on the East Central neighborhood as part of The Smith-Barbieri Progressive Fund’s University-Community Partnership grant to reduce children’s health disparities. The neighborhood is located immediately southeast of the WSU Spokane campus.

“WSU Spokane has a student population of future health care professionals already oriented toward helping others and engaging in outreach activities,” said Sharon Smith, co-trustee of the fund. “The fund is excited to help them grow their excellent track record of commitment to the community.”

Bringing health sciences students to the East Central neighborhood will give them a glimpse at the causes of many of the medical issues they will soon be treating. Students who are part of Cougs in the Community will also be creating a healthier Spokane.

“Our students are really passionate about making a difference and helping people,” Spencer said. “Nobody comes to our campus because they like all the homework. They do it because they want to make a difference in the world.”
Gateway Bridge

The state legislature’s June passage of a transportation budget that completed funding of an important gateway to campus was applauded for its foresight in adding to the revitalization and prosperity of downtown Spokane and the south portion of the University District. The University District gateway bridge will provide bikers and walkers access over the railroad tracks that separate the campus from the lower south hill and the medical community.

Once that barrier between Division Street and Hamilton Street is removed, students and researchers who live south of that area will be able to walk or bike from home to campus and to the hospitals for clinical rotations and research trials.

“This monumental project would not have happened without the continued belief in the project and dedication to its success,” said Mark Mansfield, executive director of the University District. “Over the last 10 years, the bridge project has garnered the support of the Spokane City Council, the University District Public Development Authority and the Washington State Legislature as well as our federal delegation because of its promise as a linchpin for economic revitalization, its ability to increase active transportation by decreasing automobile dependency, and the strong sense of place it provides to the University District and downtown Spokane.”

Mansfield said the project is a bridge to opportunities of Spokane’s future and will stand as a landmark, calling attention to the commitments and visions of growth and opportunity of the region while making new connections in the city possible.

With designs already in place, the city anticipates the project will start in 2017. Of key importance is the phasing of it with surrounding developments so that completion of the landings corresponds with and further enhances the people-first agenda of the University District, Mansfield said.

Jensen Byrd Building

This fall WSU accepted proposals from developers for lease of the Jensen Byrd building and nearby property.

Jim Kolva, a member of Chancellor Lisa Brown’s Advisory Council, said the proposals represent an exciting time for the Spokane community. “The University is reviewing ideas that acknowledge the historic nature of the Jensen Byrd building, are compatible with the mission of a health sciences campus, and will add to the revitalization and prosperity of downtown Spokane and the U District,” he said.

The property is located east of Pine Street between Main Avenue and East Spokane Falls Boulevard and consists of three parcels totaling approximately 4.1 acres.

Negotiations are to be completed by August.

With plans to develop the Jensen Byrd property on the southwest end of campus, construct the Spokane Teaching Health Clinic on the southeast end, and host the north landing of the gateway bridge that will cross over the railroad tracks on the south side of campus, expansion at WSU Spokane continues.
Spokane Teaching Health Clinic

The project closest to completion is the Spokane Teaching Health Clinic (STHC), which will be finished by summer 2016.

While construction is being funded by WSU, the clinic will provide a place for medical residents to provide health care while working with medical, nursing, pharmacy and other health sciences students on the WSU Spokane campus.

This project came together as a result of collaboration among WSU, Providence Health Care and Empire Health Foundation, whose goal is to increase the number of medical residencies in Eastern Washington.

Where physicians do their residency often determines where they will live. The shortage of internal and family medicine physicians, also known as primary care physicians, will decrease with this effort, as well as with the new medical school.

Recently the consortium was awarded $800,000 over three years for an SBIRT (Screening, Brief Intervention and Referral to Treatment) grant, allowing graduate-level health professions education for students in Doctor of Nursing Practice, Pharmacy and Medicine programs and for participants in Family Medicine, Internal Medicine and Psychiatry residency programs, currently being transitioned from Providence Health Care sponsorship to the STHC.

The grant is from the Substance Abuse and Mental Health Services Administration. Participants will interact through an inter-professional training program at the STHC, receiving clinical experience in primary care settings, safety net clinics and behavioral health centers in eastern Washington and northern Idaho. The emphasis is on enrolling students who want to stay in primary care, including those who want to practice in rural settings. Because of this, the patient population served both during and after the training program includes low income, rural, elderly and others who have difficulty accessing health care.

Currently substance abuse disorders treatment training is limited across all the education programs that are included in this proposal, so the addition of SBIRT training will have substantial impact.

“Through training of faculty and preceptors and integration of the grant learnings into the curricula of all programs participating in the STHC, we will develop inter-professional teams that are better able to meet the needs of patients who may be dealing with substance use disorders,” said Traci Couture, operations director of the STHC.

Solar Panels

WSU is a participant in the Avista Community Solar Project that is located on Barker Road just south of Trent Avenue in the City of Spokane Valley. WSU purchased 12 panels in the 423kW array that is made up of 1,512 panels.

“This project is a great fit for WSU as we have been interested in solar and the renewable clean energy it provides,” said Jon Schad, director of WSU Spokane’s Facilities Operations.

“We are pleased that Avista took on this project and offered up the incentives and credits to their customers who participated.”

WSU’s participation in this project allows Avista to see how solar integrates in to the overall system as well as monitor how well it performs in the area, giving them and others insight into how to move forward with this renewable resource.
The average age of students is 28 and there is no on-campus housing. The majority of students are at the graduate or professional level.

But that won’t stop the Associated Students of Washington State University Spokane (ASWSUS) from connecting with fellow students and enhancing their experience.

With students living and working in places all over Spokane, communicating with the student body can be a challenge.

“Our campus is definitely an urban campus without dorms where students come for their classes, stay a little bit and then go home,” said Pierce Robledo, this year’s ASWSUS president. “So we need to reach out to them in ways other than just having fliers and posting them everywhere.”

Robledo said his team has relied on social media to reach students and is working to connect with student clubs on campus.

“We see (student clubs) as the most involved students and we’ve been working with their leaders to help plan events together so one person isn’t planning events here and another there,” he said. “We all kind of work together with the communication that we have. If somebody is planning something, we all share it as one.”

Embracing an Inter-Professional Culture

By Kevin Dudley

The student leaders at WSU Spokane understand the unique nature of the campus.
ASWSUS has formed a Student Entertainment Board, a new branch of ASWSUS, to facilitate entertainment options on campus. It hosted an outdoor movie night during the first week of classes in addition to traditional bingo nights and more.

Working with other clubs and other student leaders on campus meshes nicely with the inter-professional culture of WSU Spokane. Robledo and ASWSUS Vice President Karl Nacalaban have each embraced that culture.

“The way I have explained it to others is that we’re going to have to work together in a hospital or somewhere for a patient, so why wait until we are in that setting?” Nacalaban asked rhetorically. “Why not foster that kind of attitude now?”

Both Robledo and Nacalaban are pharmacy students and came to ASWSUS after being involved in previous leadership groups. Robledo, from Las Vegas, Nev., was involved with student leadership as an undergraduate at the University of Nevada-Reno. He also served as ASWSUS Vice President during the 2014-15 school year.

Nacalaban spent his undergraduate years at the University of Washington and was one of the leaders of his pharmacy class during his first year on the WSU Spokane campus. That experience and a desire to lead students of a different health sciences field led him to become involved with ASWSUS.

“I saw myself having a greater impact on the (campus) community than just my college,” Nacalaban said. “Not that the little things in a college aren’t important, but that’s just a small part of what the health profession actually encompasses.”

The needs of students at WSU Spokane are different than those of students at other universities. The students at WSU Spokane are older, and some already have a family of their own.

Currently, there is no on-campus daycare, adding to the items many students have to juggle.

“It’s definitely tough for them and I don’t have a child myself but at the same time I can see where the struggle might be balancing being a student and being a parent,” Robledo said.

Robledo said another goal is to start the discussion of having some sort of student fitness center on campus. He knows it isn’t something that will be resolved before his term is up, but he wants to lay the foundation for that issue.

“Students really want that and I feel like it is something that we deserve, especially being a health sciences campus,” he said.

Robledo and Nacalaban are eager students who have a sincere appreciation for WSU Spokane. Robledo is visible and works to understand how the issues on campus impact students personally.

“Because we have such a small campus, everyone kind of gets to know each other on a personal basis,” he said. “If people asked me to describe WSU Spokane, I’d say think of it as a small city where you see each other all the time and you sort of build that personal connection with them.”
Ashley Ormsby, RN, BSN, ’13, a Spokane native, was eager to begin her first job at Harborview Medical Center, a level one trauma facility serving Washington, Idaho, Montana, Alaska and Wyoming.

“I was prepared to face some difficult traumas and patients in the operating room; poly traumas, brain bleeds, full body burns,” she said. After completing a six-month nursing residency, she was ready to join her colleagues on the floor.

It was a Friday evening and Ormsby was finishing up her final shift for the week. An elderly male patient she was caring for was brought in for a wound VAC (vacuum-assisted closure). This routine surgical procedure paled in context to his injuries he had sustained: an orthopedic trauma, a collapsed lung, and a crushed pelvis. Though he was a stable patient, he had issues with his blood coagulating days earlier.

The procedure was uneventful and physicians began signing off for the night.

Ormsby finished her shift as the patient began quickly regaining consciousness from anesthesia.

“When he woke, he was active and then became increasingly distressed. He thrashed violently in his bed and then became completely unresponsive. I checked for a pulse and found none. I immediately called a code and began chest compressions,” Ormsby recalled.

The patient was experiencing a pulmonary embolism (PE), and she was the first to recognize it. “It was the perfect storm. He had stagnant blood in his lower body for more than 14 hours. He also lacked sequential compression devices, which help prevent blood clotting and deep vein thrombosis. Additional information—including his history, demographics, plus how he was responding when waking—all pointed toward a PE.”

Ormsby became the lead in the situation, identifying roles for colleagues who were still on shift. “In those instances when you are having a crisis, you have to identify someone to give orders, otherwise it’s complete chaos.”

And in those moments she was giving orders, she remembered.

“I had an identical simulation at WSU where the patient had a PE. I was very surprised by my ability to remain calm and level-headed, but I could in part because I had done it before,” she said.

For nearly 30 minutes, Ormsby and another nurse rotated performing active CPR, giving the patient chest compressions. The attending physicians and anesthesiologists returned and began managing the code. After dozens of rounds rotating compressions, the patient finally had a pulse. He was going to live, fighting until he could breathe on his own.
The study:

Between 2011 and 2013, WSU was one of 10 nursing schools to participate in the National Simulation Study by the National Council of State Boards of Nursing (NCSBN) to investigate the effectiveness of substituting clinical hours with simulated patient scenarios. Ashley Ormsby, featured in this story, participated in the group that substituted 50 percent of her six clinical courses with simulation—the most of any group. The study is extremely relevant as nursing educators face challenges with placing student nurses at clinical sites.

Debriefing

In the hours that followed, Ormsby connected with her fellow nurse colleagues who recognized her for her quick thinking.

“They were blown away; I went from new nurse to nurse running the code,” she said. “When they asked me how I knew what was happening, I shared my experience with the similar simulation. I thought during my first code I would be really uncomfortable. But in that instance I had never been more calm and collected.”

Ormsby added that fellow nursing students who had participated in the 50 percent simulation group agreed the simulations helped in complex, high stress situations. They had already gone through the experience and it allowed them to remain calm. “We were trained for it,” she said.

Kevin Stevens, director of the Clinical Performance in Simulation Lab at WSU College of Nursing, said that Ormsby’s experience indicates why simulation is an exceptional teaching and learning model.

“What students experience in the sim lab is very real, yet it allows them to practice complex cases in a safe environment, with instructors and peers providing feedback along the way,” Stevens said.

Hearing from Ormsby, who reached out to Kevin following the incident, was personally and professionally validating.

“We know that simulation is an effective teaching and learning tool,” Stevens said. We are just beginning to collect data that captures the effectiveness of it in nursing education and how well that knowledge transfers to the real world clinical setting. A case like Ormsby’s is just one example illustrating simulation as a valuable learning tool.”
Screening for hepatitis C could someday be available in pharmacies

thanks in part to a research study under way by the WSU College of Pharmacy and funded by the national Community Pharmacy Foundation.

According to the Centers for Disease Control and Prevention (CDC), hepatitis C is a blood-borne virus that infects the liver and becomes a long-term chronic illness for 70-85 percent of people who become infected. The CDC recommends that anyone born between 1945-1965 be screened for hepatitis C, even if they do not meet any of the other risk factors. According to CDC data, people born during this time are five times more likely to be infected.

But many within this age group in Washington state have not been tested, said Julie Akers, a clinical assistant professor at WSU Spokane, a pharmacist, and the principal investigator heading up the study.

“We are not sure why people are not getting screened,” said Akers. According to the CDC more than 3 million people in the U.S. are infected with the hepatitis C virus with less than two thirds being diagnosed, she said.

The pharmacy hepatitis C service uses a simple finger-prick test, similar to the tests used to measure blood sugar, and detects hepatitis C antibodies, which will tell if a person has ever had hepatitis C. There are a certain percentage of people who contract hepatitis C and their immune system is able to overcome it, so even though they do not have the active virus in their system they will have the antibodies for it.

The patients who test positive for the antibodies will be referred to either their primary care provider or be connected with a list of providers who have expertise in hepatitis C, in order to confirm the virus with the full RNA test.

“This study will give patients a link to care where they may not have had one previously, and give us the opportunity to write a pharmacy protocol that others can take and replicate,” Akers said.

Beginning early in 2016, the research team will be looking for a minimum of 1,000 patients to get screened for hepatitis C antibodies over a 12-month study period at five Bartell Drugs locations in Seattle and surrounding areas.

“The goal is by the time the patient leaves the pharmacy, he or she will have a follow-up appointment scheduled. We want a model that will keep costs down, but more importantly have an actual impact on the person’s individual outcome,” said Akers. “Each patient will participate in the study for approximately 30 days, including the initial in-person screening and a 30-day post-screening follow up call.”

The CDC fact sheet on hepatitis C lists it as a leading cause of liver cancer and the leading cause of liver transplants in the U.S.

“The medications available now have extremely high cure rates,” said Akers. “With early detection, we could prevent liver damage and substantial long-term health costs.”

Robert Gish, a physician and internationally published hepatology expert, is another collaborator on the study. Gish previously published research on the pharmacy hepatitis C screening tool and several studies related to hepatitis C treatment. As part of the study, Gish will also assist with the development of a continuing education course for pharmacists on hepatitis C, disease progression and available therapies.
“My education at WSU laid the foundation for everything else I have pursued in my career,” she says. “I vividly recall sitting in Biology 101 in Bryan Auditorium with Dr. Skip Paznokas discussing the cell. The basic science courses as well as liberal arts classes were all taught by professors who truly loved to share their knowledge. Their excitement and enthusiasm really helped students find something to be passionate about. Dr. John Crane, who taught a parasitology class, had such an animated personality that it was impossible to not love what I was learning – even gross worms that infected every crevice of the human body.

“Our academic advisors wanted us to succeed. I probably would not have gone to medical school had it not been for the guidance and support of Dr. David Moffett in the pre-medical advising office. I am forever grateful to people like him who give their time and advice freely. Everyone was approachable, and there was a sense of community in anything pertaining to WSU.”

Some of her fondest WSU memories have to do with football games, and in particular, the 1994 and 1997 Apple Cup games. “I loved going to the Cougs’ home games, and while the 1997 game was not in Pullman, it made it that much more special to celebrate in Seattle on the way to the Rose Bowl!”

After receiving her M.D. from Temple University, she did her residency at New York University, and then completed subspecialty training in Female Pelvic Medicine and Reconstructive Surgery at the University of Pennsylvania. Her faculty position at Weill Cornell Medical College is in obstetrics and gynecology.

Asfaw is an assistant professor at Weill Cornell Medical College in New York City and has a practice as a urogynecologist, specializing in the care of women with pelvic floor weakness resulting in conditions such as pelvic organ prolapse and bladder dysfunction. Her husband, Fasika Tedla, is also a physician and he specializes in nephrology.

The couple are parents of two daughters ages 5 and 3. Being a mother is what she considers her biggest accomplishment to date.

“They are more demanding than medical school, residency and surgical subspecialty training combined but I would not want things any other way,” she says.

Tirsit Asfaw was born in Ethiopia and as a child, moved with her family to Seattle. She attended WSU after high school, graduating in 1997 in microbiology.
Abrom is enthusiastic about corn. “I had so much fun shucking it,” said the Orchard Center elementary student in the West Valley School District, “and it was so good that my taste buds did backflips!”

Abrom is one of hundreds of local school children who are the recipients of obesity prevention and nutrition education, among the largest community projects worked on by the faculty and staff of the Youth and Family division of WSU Extension, which is headquartered on the WSU Spokane campus.

Those projects provide great opportunities for WSU Spokane’s Nutrition and Exercise Physiology (NEP) students who are required to spend 400 hours on community projects.

NEP student Mikaela Carrillo worked on the “farm-to-school” project in September.

“In this project, they teach small children how to shuck and prepare corn from these local farmers,” Carrillo said. “Not only was it a great professional experience, but it was a great way to be more involved in the community and see its needs. I hope that all NEP students get an experience like this one.”

Farm-to-school is one of the more fun projects the NEP students get to work on, said Terry Perry, registered dietician in charge of the obesity prevention and nutrition education programs—known as Food Sense (or Supplemental Nutrition Assistance Program Education) and the Expanded Food and Nutrition Education Program (EFNEP). Both programs are funded by the USDA.

“The NEP students help load and unload the corn from local farmers, and the children will husk the corn and it will be cooked in the school cafeteria the next day,” Perry said. “We put up pictures of the local farmers who grew the corn, educate the children about the nutritional value of it and use the experience as a way to emphasize eating fresh fruits and vegetables. Some of them have never had fresh corn.”

Extension opportunities for the NEP students include working with children in schools and with adults through food banks and Second Harvest, the
food distribution center that provides government commodities and food from farmers to about 250 food banks in Washington.

Spokane County has the largest of the Food $ense and EFNEP programs in the state with 18 full-time and 10 part-time staff. Many of the schools in the county meet the requirements to qualify for the programs, which are that at least 50 percent of the children qualify for a free or reduced price lunch, Perry said. But Extension does not have the staff to be in all those schools. Extension does reach 50 schools in eight school districts in the county, she said.

For adults, Extension works with nine local food banks. It offers an eight-week class to help with healthy food choices, budgeting, nutrition information and related life skills, and also presents information through other methods such as cooking demonstrations, bulletin boards, informational handouts and conversation.

“It’s been educational for the NEP students to see families who are out of food for the remainder of the month,” Perry said. But Extension does have the staff to be in all those schools. Extension does reach 50 schools in eight school districts in the county, she said.

April Davis is now an instructor in the WSU Spokane NEP program, but she did a rotation with Extension’s Food $ense program back in 2008 when she was an NEP student.

She created several educational handouts designed to motivate parents to find quick, easy and healthy ways to give their children a good start to the day with a healthy breakfast. She also created a four-week curriculum for middle-school aged children to teach them the importance of making healthy lifestyle choices.

“The objectives for this project,” Davis said, “were to provide an understanding of basic nutrition and how it affects health, performance, and appearance, and provide an understanding of the basic anatomy of the human body, and to teach students the importance of managing personal health habits.”

Davis also participated in a research study involving nearly 5,000 students at six middle schools in Spokane collecting data for a USDA-sponsored obesity study.

“Many of our faculty in addition to Terry serve as preceptors for NEP students,” said Doreen Hauser-Lindstrom, director of Extension’s Youth and Family division. “We deliver a high quality product. I want to reach out to the other programs on the Spokane campus—nursing, pharmacy, public health—and work more with them as well.”

Youth and Family are Priorities for WSU Extension Leader

Doreen Hauser-Lindstrom speaks fondly of the eight years she worked on the Horizons project to develop leadership in 40 Washington communities, with the goal of reducing poverty.

“That was the best project I’ve worked on, partially because we had the money and staff to truly make a difference,” she says. “These were 18-month, focused coaching and educational training programs where people gathered together and talked about what poverty looked like in their community and then made plans to help raise people out of poverty. People didn’t realize their communities had kids who were sofa surfing or hungry or living without heat.”

The grant project ended—although the work is still going strong in many communities—right about the same time WSU Extension was in need of a director for the Youth and Family division, based in Spokane. So in 2011 Hauser-Lindstrom went from field work to administration.

What does she like about her work? “Making a difference,” she said. “It’s providing opportunities for youth and adults for lifelong learning. It’s teaching families to be able to stretch their food dollar. We help develop people’s skills to be successful in life. It’s very satisfying.”
Researchers Collaborate on $985K Project to Build Child and Family Audio Database

WSU researcher Mark VanDam has joined forces with two colleagues at the University of California Merced and Carnegie Mellon University to create a critical piece of infrastructure for scientists interested in speech and language development and language behavior. With $985,000 in grant funding from the National Science Foundation, the team is building a database of free-to-access, daylong child and family audio recordings, along with a library of open source audio analysis software.

VanDam—an assistant professor in the Elson S. Floyd College of Medicine’s Department of Speech and Hearing Sciences—estimates that the database will initially include 10,000 daylong recordings. More recordings will be added as they are contributed by the research community. By outfitting kids with high-tech, wearable audio recorders, VanDam himself has accumulated an estimated 3,000 recordings of children from birth to preschool age, totaling 35,000 hours of audio. He has used these to answer questions on family communication dynamics, including a well-publicized study that showed that moms and dads communicate differently with small children.

VanDam said that the database—named HomeBank—will contain carefully annotated recordings of both typically developing children and those with speech, hearing, and developmental disorders. “A data set like this has never existed before,” said VanDam, who said that although the cost of capturing daylong recordings has decreased in recent years, it is still an expensive undertaking. “This will allow us to ask questions that no one has yet been able to ask.”

Pharmacy Research Paves Way for Genetic Tests to Predict Progression of Cancers

Physicians may soon have another diagnostic tool to help treat cancer patients, thanks to a new partnership between WSU and a genetic testing company based in India. Under a recently signed licensing agreement, Datar Genetics Ltd. will use a set of genes identified by College of Pharmacy researchers to develop tests to predict prostate cancer recurrence and breast cancer survival. The partnership was facilitated by the WSU Office of Commercialization, which is looking for additional licensing partners in other countries.

The research that led to the identification of the 20 genes was conducted in the lab of Grant Trobridge, an associate professor of pharmaceutical sciences. In work funded by the National Cancer Institute, postdoctoral research associate Arun Nalla used a virus to create genetic mutations in human prostate cancer cells to understand how tumors become androgen independent. Androgen-independent tumors don’t need testosterone to grow and thus no longer respond to hormone therapy, making them much harder to treat. The virus Nalla used can insert its DNA into the genome of a human cell, which made it possible to pinpoint which genes got altered and led to androgen independence. Using a similar approach, Ph.D. student Victor Bii looked for genes that caused breast cancer to spread to other parts of the body.

Trobridge said their work is a small but critical step on the way to their long-term goal of developing targeted cancer therapies. “Ultimately, we’d like to be able to predict which treatments are more likely to work based on patients’ genetic profiles.”
A recent study of the role of rapid eye movement (REM) sleep in the development of young brains suggests that it makes experiences “stick” in the brain. The discovery was published in Science Advances by Professor of Medicine Marcos Frank and his former graduate student Michelle Dumoulin Bridi.

Frank said their findings emphasize the importance of REM sleep in early life and point to a need for caution in using REM-suppressing medications—such as antidepressants and stimulants for ADHD—in young children.

During their study, the researchers had young animals wear a patch over one eye and monitored their brain activity while awake and asleep. Animals in one group were allowed to sleep normally. Others were consistently woken up—some during REM sleep and others during non-REM sleep. The researchers found that those that went without REM sleep didn’t show normal brain development, suggesting that REM sleep is required to solidify changes in the visual cortex, the part of the brain that processes visual information. Furthermore, they found that a brain protein named ERK, which is involved in these types of changes, did not activate in animals that had been deprived of REM sleep.

Frank and Dumoulin Bridi also looked at brain activity patterns during REM sleep and found them to be very similar to those seen during wakefulness.

“It appeared as though animals’ waking experiences were being reactivated while they slept,” said Frank. He said further studies are needed to fully uncover the biochemical process by which REM sleep fixes brain changes, which may eventually lead to new therapies to treat brain injury and neurodegenerative diseases.

Collaborative to Study Health Reform Impact on Disabled

Professor of Health Policy and Administration Jae Kennedy is heading up a new initiative to establish the Collaborative on Health Reform and Independent Living, a multi-institutional effort to evaluate the impact of the Affordable Care Act (ACA) on the well-being of working-age adults with disabilities. Funded through a five-year, $2.5 million grant from the National Institute on Disability, Independent Living, and Rehabilitation Research, the collaborative brings together disability advocates and researchers from WSU, the University of Kansas, George Mason University, and the Independent Living Research Utilization program at TIRR Memorial Hermann Hospital.

Until recently, many adults with disabilities did not have access to private health insurance coverage and had to rely on public programs, such as Medicare and Medicaid. With the implementation of the ACA, that has changed.

“The ACA has endured many legal and legislative challenges, and many of its reforms are now a feature of the U.S. health care system,” said Kennedy. “We need to know the magnitude of these changes, and whether they are addressing the pervasive disparities in access and cost that people with disabilities face.”

In partnership with several national disability advocacy organizations, the collaborative’s researchers will conduct five research projects to study health insurance coverage and enrollment rates. Kennedy said the collaborative’s findings may be used to advocate for policy changes to address any remaining health disparities in this vulnerable population.

New Study to Examine Genetic Cancer Risk in Smokers

A College of Pharmacy researcher has received a five-year, $2.6 million grant from the National Institutes of Health to study how genetic differences affect people’s risk of contracting tobacco-related cancers.

Boeing Distinguished Professor Philip Lazarus will study a group of metabolizing enzymes called UGTs, which help the body excrete carcinogens found in tobacco and tobacco smoke. He and Ana Vergara, a PhD in Pharmaceutical Sciences student, will look to see whether genetic differences in two families of UGTs make smokers more or less susceptible to contracting lung cancer and head and neck cancer. They will also study how differential splicing—variations in the process that helps DNA create enzymes and other proteins—affects the activity of UGTs. Research collaborators at Harvard University and Duke University will validate the team’s findings in tissue samples from a large number of lung and head and neck cancer patients and healthy control subjects.

Lazarus suggested that their study could help step up cancer prevention efforts.

“If we could identify people at highest risk, then we could target these individuals for tobacco cessation,” he said.

In addition, their work could lead to improvements in the treatment of cancer and a host of other conditions.

“A large percentage of drugs are metabolized by UGTs to get excreted,” said Lazarus. “Understanding how UGTs work could help us identify which drugs to give to whom. If a quick genetic test could determine what drugs will or won’t work well for a given individual, that would be a big step forward.”
whose vision, courage and perseverance led to efforts to develop a medical school at WSU, which has been named the Elson S. Floyd College of Medicine.

Early fundraising for WSU’s new College of Medicine received a welcome shot in the arm recently as Portland area businessman, philanthropist, and WSU alumnus Dan Harmon (’80 Const. Mgmt.) and his wife, Kathy, pledged a challenge gift of $1 million to the project.

“Elson was a great man and friend,” said Harmon. “He was also a visionary who knew the potential in Washington State University to not only be among the best land grant universities in the nation, but to do so by proactively addressing the needs of the people and communities it serves. “This sentiment is perhaps best personified in the creation of WSU’s College of Medicine, which Elson championed tirelessly to help improve access to healthcare across eastern Washington and throughout the state,” he added.

John Gardner, vice president of Advancement and WSU Foundation CEO, called the gift extraordinary. “Dan and Kathy’s generous investment represents a lead gift on which to inspire more investment in the creation of the state’s second public medical school.”

Donors who give more than $25,000 will be listed on the Dr. Elson S. Floyd Medical Education Founders Wall on the WSU Spokane campus. All others who give will be members of The ‘E-Flo Club’ and receive special recognition.

Floyd considered pursuit of the state’s second public medical school a central part of WSU’s land-grant responsibility to serve the needs of the citizens, industries and communities across the state, and he fought tirelessly to establish it on WSU’s Spokane campus.

As of early November, $1,844,636 had been contributed to the fund by 895 individuals and corporate partners. All contributions to the fund support the accreditation, implementation and operation of WSU’s new College of Medicine. For more information, please contact Nancy Fike at nancy.fike@wsu.edu or 509-358-7616.
“Our goal is to establish a legacy in Tom’s name with an endowment of at least $25,000,” said Nancy Fike, director of Development for WSU Spokane. Tom Fritz was a member of the WSU Spokane Advisory Council at the time of the fishing accident that resulted in his death on July 13, 2015. He was passionate about the medical school, as he was with many things in life. Fritz was very active in the community and served on many boards, including chairing Greater Spokane Incorporated, the Spokane Area Economic Development Council and the Spokane Workforce Development Council. He also was the incoming board chair for the Association of Washington Business at the time of his death.

Fritz also served others in his career, starting as a licensed family and marriage therapist, then becoming superintendent of Eastern State Hospital. For 16 years, he was CEO of INHS (Inland Northwest Health Services), which he successfully grew to more than 1,000 employees and gross revenues of more than $200 million. The nonprofit INHS runs Northwest Medstar air ambulance service, St. Luke’s Rehabilitation Institute and an electronic medical records business with clinic and hospital clients around the country.

If you have any questions about the Tom Fritz Endowed Fund or want to contribute, please contact Nancy Fike at nancy.fike@wsu.edu or (509) 358-7616.
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