



THE NONTYPICAL STUDENT IS PRETTY TYPICAL
AROUND HERE | BY ELAINE VITONE

SECOND LIVES

Zoya Voronovich's (MD '14, shown left) family is "kind of obsessed with the brain and the mind," she says with a hint of a Russian accent—they immigrated to Colorado when she was 11. Her grandmother was a psychiatric nurse and served with Russia's military in World War II. Her uncle and aunt both trained in Russia as neurologists. "It runs in our blood."

But, much as the family stories intrigued her, once she got to college, she still couldn't see herself pursuing an MD. She was an indie rock DJ at her campus radio station—not one of those Type A premeds. "The U.S. conception is that medicine is very competitive, and I always thought you have to be perfect to do this ... It seemed overwhelming." She started out declaring biochem, but then added two more majors—quantitative economics and finance. After graduation, she worked for a business consulting firm, then moved on to work primarily in the retail sector.

"But then, once I became more confident in my career in the corporate world, I thought, *Maybe I could do [med school]. Maybe I have the support to explore this. Maybe I have a little more guts to see what it takes.*"

Voronovich, 31, is one of 19 students in the University of Pittsburgh School of Medicine Class of 2014 alone who are "nontraditional"—generally, the 25-and-up set who enter medicine as a second career (two from this class enrolled with PhDs). Voronovich came to Pitt after hearing through word of mouth that it was a nontrad-friendly school—a rep the School of Medicine has lived up to, in her experience.

Yeah, Pitt med students are super smart, of course. And they have a lot more to offer. Officials at Pitt's School of Medicine believe that training creative, thoughtful people to become doctors—people who bring a range of life experiences to the table—will result in better doctoring, better medical science, and a better health care system. As a result, Pitt has become the alma mater for many "nontraditional" students.

PHOTOGRAPHY | CAMI MESA

“Dr. Pettigrew is a great example,” she says. Each year, right after the White Coat Ceremony, Chenits Pettigrew, an EdD assistant dean for student affairs and faculty diversity, and director of diversity programs at Pitt med (and just named a Man of Excellence by the *New Pittsburgh Courier*), hosts an annual dinner for nontrads.

“He touched base with me several times,” says Voronovich. “I saw him first day of Anatomy, when I was feeling very overwhelmed.” She saw him recently, on Match Day, too, when she learned she’ll be starting her neurosurgery residency at the University of New Mexico.

Pettigrew has learned to tune in to the particular concerns of this crowd—whether or not their study strategies (which might be a little rusty) are working effectively; whether or not their career plans (which have less time for detours) are on track; whether their partners and family members (who might include gestating babes, elderly dependents, and anyone in between) are faring well amid the rigors of med school.

Pettigrew’s own family has been there—twice. His wife, Margaret Larkins-Pettigrew (MD ’94, Res ’98), came to Pitt med at age 34 after starting out as a nurse. Their son, Gaetan Pettigrew (MD ’12), was a dancer in New York before he enrolled at age 27.

“My job is to get to know who they are and what they are interested in,” says Pettigrew. “How is this affecting their lives?”

For Voronovich and her husband, med school has been uniquely challenging. He is a tenured professor in the University of Colorado’s

Leeds School of Business and couldn’t relocate, so he stayed behind with this blended family’s four children, ages 6, 13, 16, and 18.

“It’s always cheaper for me to travel [to Colorado]. I feel like I’ve been on the run for the last four years,” says Voronovich. But, some 36 months of phoning, Skype-ing, and frequent-flier-mile-ing later—she’s moving to Albuquerque, just a seven-hour drive from home, making the family’s final phase of bimodal living somewhat easier.

And she’s realizing a dream, graduating from a top institution for all-things-brain—Pitt’s Department of Psychiatry is among the highest-funded by the National Institutes of Health. Aided by her background in statistics and analysis, at Pitt med she researched deep brain stimulation in Parkinson’s disease patients, as well as treatments for traumatic brain injury in elderly patients. She also contributed to two review papers. Now, she has in the works a project on the potentially fatal infection within the brain known as ventriculitis; that effort arose from her work on a pediatric neurosurgery team in Kijabe, Kenya, last summer and this spring.

Voronovich hopes to continue both her research and her global health work. She’ll add a few new stories to the family lore—like that of a middle-school-aged boy she met in Kenya who was hospitalized for a brain abscess for nearly two months. “He was a heartbreaker. As he got better and was able to be more active, he got friendlier and started hanging out with us.

“When I think of kids like him, it really inspires me to keep going and help children like him for the rest of my life.” ■

In **Dan Van Roekel’s** (MD ’14) previous career, he started out as a “best boy”—a second-in-command grip on a film lighting crew. Having completed a combined BA in drama and a BFA in studio art from Tufts University and the School of the Museum of Fine Arts, he cut his teeth in the Boston area film industry doing electrical and grip work, then made the move to editing. Van Roekel was a sound editor and assistant editor for *NOVA* for three years and a technical arts instructor at MIT’s visual arts program for seven, before he applied and was accepted at Pitt med (after spending two years catching up on science requirements at the University of Massachusetts Boston).

As it turns out, the sensibilities and skills he used in his former life have plenty of applications for Van Roekel, now 42, who recently matched in the very visual and technical field of radiology (at MedStar Georgetown University Hospital, Washington, D.C.).

And his teaching experience lends itself well to the fine art of bedside manner. “You kind of see them struggle and need more help. You can’t judge them. You need to be compassionate,” he says.

Through his documentary film work, he encountered the more difficult emotional aspects of the human story with the focused gaze of an editor’s eye. Van Roekel did a service trip in rural Haiti the summer after his first year of med school.

After residency, Van Roekel hopes to return to work along these lines—perhaps through telemedicine. He is researching ways to combine radiology with global health—for him, that would be an ideal complement to the hours he’ll spend in the radiology reading room.

He doesn’t want to be disconnected from the people he’s there to help. “That goes with the documentary, the storytelling, the human part of it. ...

“Every time you look at [an imaging study], you have to have an image of a patient in your head. That drives you to make sure you find out what’s wrong.” ■



Jamil Alhassan (BS '11 who is in the Class of 2017), has dreamed of getting an MD since he was a kid. He grew up in Southwest Philadelphia, in a single-parent household, and worked two jobs in high school to help support his family. He came to Pitt for his bachelor's and, with guidance from fraternity brothers, learned the standards to hold himself to if he wanted to be med school material. By spring of his senior year, he was an RA, a biology TA, a student representative for the University's Board of Trustees, and a homecoming king—all while pulling a 3.94.

"College changed my life," he says.

Then, that spring, he contracted meningitis.

Since, apparently, four years of very little sleep and five cups of coffee a day (plus extra espresso shots) had pushed his body too far, he decided to put off med school, as much as it pained him.

Instead, Alhassan worked in Camden, N.J., as a corps member of Teach For America. In this life as a science teacher, he would create elaborate study guides that used humor to liven up the lesson plans (the characteristics of life, featuring Lil Wayne, was a favorite). He also implemented a class culture he called Students Will Achieve Greatness, or SWAG—a rebranding of the kids' word for coolness and swagger.

Each time students did something to help the efficiency of the class as a whole, they earned SWAG points, which Alhassan painstakingly tabulated along with their grades and posted on the classroom wall. Scores of 80 to 90 percent were dubbed BAs, 90 to 94 MAs, and 95 on up PhDs. And along with these awards Alhassan displayed his own "wall of achievement"—homecoming king photos, newspaper clippings from his college step shows, his Pitt degree. Proof that yes, even for someone who grew up in a neighborhood much like this, success can, and does, happen.

The students' grades improved. Attendance

went up. Kids rolled into his classroom during lunch just to hang out. Between his first and second year at Teach For America, Alhassan wrote a book chapter on educating Black men at the invitation of a professor at Howard University.

When Alhassan, now 24 and a Schweitzer

Fellow, talks about doctoring, it sounds a lot like his teaching philosophy: Building relationships. Treating the whole person—even the whole family. (Family medicine is one specialty he's considering.) Health, like education, stems from deep and complex roots. "It takes a village." ■





Kaarin Michaelsen (MD '14), 42, who double-majored in biology and history at Stanford University, chose the latter as her path the first time around, earning her history PhD from Berkeley and starting a tenure-track position at the University of North Carolina, Greensboro in 2003. As an historian, Michaelsen examined how 19th-century Britain's medical education system for women affected the professional identities of those doctors (among other topics). These schools, she learned, were interested in producing a very specific kind of woman physician—"public spirited," they called it. The idea was: Go out, found clinics for women, children, and other underserved populations. "And what's interesting is that those clinics had longevity. ... They became the founding institutions of the NHS [Britain's publicly funded health care system]."

But in all that sifting through old charts and physicals, she realized she didn't just want to teach about medicine—she wanted to do it. When it came time to apply for tenure, she realized it was time to move on. And at that point, Michaelsen had been flying to Pittsburgh every weekend for six years. Her husband was on the faculty at Carnegie Mellon University, and their two kids had gotten into campus daycare

there and not in Greensboro. "Coming to med school in Pittsburgh was probably going to be the best way to keep everyone together."

Happily, at Pitt, she's found ways to keep her two professional passions—history and medicine—together, as well. Throughout the last four years, she's established medical history discussion groups and given a talk on Britain's rabies epidemic in the late 19th century. And next winter, she'll be teaching a history of medicine course through the Department of Surgery.

For her scholarly research project, Michaelsen studied *Scope* and *Scalpel*-like productions dating all the way back to the 1880s. (She herself was one of the head writers for Pitt's production.) She found generations of MDs-in-training poking fun at the faculty, and themselves, and commenting on larger issues in the profession. "One thing that particularly struck me as a scriptwriter was that virtually nothing had changed in the intervening decades. I was just being more overt about it than they were."

Michaelsen matched for an anesthesiology residency at Pitt. The teacher in her is alive and well in the physician she's become. "You have to educate the family about the disease, the prognosis. You get to know them really well, which was something I did a lot with my students. And then you have to manage all these different competing interests at once, which reminded me of trying to manage different classes."

"It felt familiar and comfortable and fun. And I remember thinking, *Yeah. This is home. This is where I want to be.*" ■

In his life before his MD, **Tom Miller** (MD '14), 33, was a paramedic-slash-writer (an EMT/MFA). For a year, the Harvard and Notre Dame-educated Wisconsin native worked full-time for an ambulance service that answered 911 calls in Pittsburgh's East End. ("If nothing else, I figured good stories would come of it.")

He then switched to part-time when he landed an adjunct teaching gig at Duquesne University.

"I eventually came to the conclusion that I was having more fun on the ambulance than I was teaching comma placement," Miller says, so he used his tuition discount to complete the last of his premed requirements. (Organic Chemistry, he adds, is kinda weird when your former student—the one who was so upset about that B he got in English last year, naturally—is suddenly your classmate. "We'd sort of wave awkwardly to each other.")

With the start of med school just a few months away, Miller got the itch to revisit his MFA manuscript, a collection of overlapping folkloric tales spanning several centuries that was aimed primarily at a scholarly audience. He realized what he really wanted to write now were the kinds of stories he enjoys reading for fun—fantasy à la J.K. Rowling and George R.R. Martin.

And—long story short—Miller is now a newly minted MD-slash-author.

The novel, which is tentatively titled *The Philosopher's War* and will be printed by Simon & Schuster in July 2015, takes place during World War I. In this alternate version of history, a poorly understood branch of science (basically, magic) was discovered around 1800.

In addition to birthing this metaphorical baby—this novel he gestated through four years of late-night writing, rewriting, and pitching to literary agents (he sent the manu-



script to 30 in all)—Miller and his wife, Abby, also welcomed a baby boy, Owen, in March.

Needless to say, the last four years, which culminated in Miller's match with the University of Wisconsin's emergency medi-

cine residency, have been a constant exercise in triage. And when asked what made this magic act doable for his family, Miller's answer is simple:

"You find a way. You make the time for things that are important." ■

OH, THE PLACES YOU'VE BEEN

Pitt med students have taken all sorts of scenic routes along the way to this medical school: previous careers, parenthood, pilot training. There are too many interesting “nontrads” to mention them all, but we couldn’t resist introducing you to a few more here. —Zach Nichols



CHRISTOPHER BARNES, 27
MOLECULAR PHARMACOLOGY PHD PROGRAM (3RD YEAR)
FROM: HUNTERVILLE, N.C.
NAIMA SHARAF, 28
STRUCTURAL BIOLOGY PHD PROGRAM (5TH YEAR)

FROM: QUITO, ECUADOR

Barnes was a high school football standout who also played for UNC Chapel Hill. Sharaf lived in Ecuador and Australia before coming to the United States. The two met while working in the same lab, where, Sharaf says, Barnes would come work on weekends when she was there. With other colleagues, the couple was just awarded a patent on a nuclear magnetic resonance (NMR) device that allows users to observe the inner structure of living cells. Now at Pitt together, Barnes and Sharaf have two sons, ages 4 and 1.

Barnes on this “ideal situation”: “Graduate school is actually a pretty good time to have a family, especially in the PhD program, because that’s when your schedule is the most flexible. And especially here at Pitt; our medical insurance is great.”



KIMBERLY BELL, 27
MD CLASS OF 2017
FROM: PITTSBURGH, PA.
LEANING TOWARD: OB/GYN

Bell, a mother of two, attended Pitt as an undergrad, earning a BS in ecology and evolution while enlisted as a medic in the Army National Guard. Motherhood has taught her compassion, she says, and military service, discipline.

On treading the nontrad path: “If somebody tells you that you can’t do it because of your background, don’t listen to them and try anyway.”



BRIAN NOLEN, 34
MD CLASS OF 2015
FROM: PITTSBURGH, PA.
LEANING TOWARD: INTERNAL MEDICINE & ONCOLOGY

Nolen started out working for a biotech company,

where he quickly grew bored of the nine-to-five and started volunteering as an EMT. Then, in 2008 and 2011, respectively, Nolen received his MPH and PhD in human genetics from Pitt, focusing his research on the treatment of gynecological cancers. It was working alongside clinicians at the University of Pittsburgh Cancer Institute, he says, that made him realize the grass was greener.

The long view: “I think I have a little perspective in knowing that each test is not the end of the world and probably not the most important thing I’ll ever do in my life.”

PATRICK POLSUNAS, 33
MD CLASS OF 2017
FROM: NEW YORK CITY, N.Y.
LEANING TOWARD: ORTHOPAEDIC SURGERY & PHYSICAL MEDICINE & REHABILITATION

Polsunas has worn many hats and—as a longtime triathlete—run, biked, and swum many races. He’s worked as a carpenter, yoga instructor, and children’s mental health coordinator. He sees medicine as “a natural progression” from his time teaching yoga and helping kids.

His advice for would-be nontrads: “Don’t be afraid, going into it, that you won’t have anyone to interact with. And when you do get there, embrace those interactions.”



JANELLE WHITNEY, 28
MD CLASS OF 2017
FROM: MIDDLEBURG, PA.
LEANING TOWARD: OB/GYN

Whitney had her first child, now 8 years old, while pursuing a bio major at MIT. After graduation she stayed for another year at MIT to teach. Since then, Whitney and her husband have had two more children (4 and 2 years old).

On seeing it both ways: “Being a mother, I really got exposed to health care from the patient’s perspective a lot more than my classmates.”



MEGAN WRIGHT, 33
MD CLASS OF 2017
FROM: CALIFORNIA (ALL OVER THE STATE)
LEANING TOWARD: ONCOLOGY (THIS WEEK!)

In her many former lives, Wright has taught art at Evergreen State College in Olympia, Wash.;

flipped houses as a carpenter in Olympia and Albuquerque, N. Mex.; and co-owned and managed a microbrewery in Ventura, Calif. Then she realized that, as someone who’s always loved seeking out new challenges to conquer, she’d feel right at home in an ever-evolving field like medicine.

On how her old skills serve her now: “I see waitressing as gangbusters useful. How do you go and approach somebody and—in less than 5 minutes—put them at ease, take care of them, make suggestions? ... Your face time is actually very short, but [the customer or patient] leaves with a very positive experience.”



TOLANI OLONISAKIN, 22
MD CLASS OF 2017
FROM: LAGOS, NIGERIA
LEANING TOWARD: UNDECIDED

Olonisakin began college at 16, majoring in biology, but spent her undergrad years researching black holes in an astrophysics lab. She then felt the pull of another powerful force, the desire to “benefit mankind.” She says that though physics is “science in its purest form,” particles swerving around distant black holes have little to do with helping people. So she spent the year before enrolling at Pitt doing research on sickle cell disease. Now, as a second-year in Pitt’s Physician Scientist Training Program, she’s studying innate immunity in the lungs.

On being heard: “There’s a lot of great work being done here at Pitt. [The people I interviewed with] just seemed very interested in what I was doing and what I talked about. They made me feel heard. It was really refreshing.” ■

Elaine Vitone contributed to this report.