Teach

UCSF Fostering Diverse, Equitable and Inclusive Environment Through Unique Training

Class Privilege

- sure that my social class will be an advantage when medical or legal help.
- reasonably sure that I or my family will not have to skip meals because we cannot afford to eat.
- savings account with at least a month’s rent and bills in it in the case of emergency.
- taken a vacation outside of the country, where I reside.
- have the means to take a sick day from work without losing pay.
- never been homeless or COPY: experienced a change in place of living.

By Barbara Anderson

Two years ago, the UCSF School of Medicine began a Diversity, Equity and Inclusion (DEI) Champion Training program to increase awareness of implicit biases, microaggressions and discrimination and provide skills for faculty and staff who interact with trainees and learners to make a more supportive, equitable and inclusive environment for all.
As of Nov. 5, DEI Champion Training, designed uniquely for UCSF, had been completed by 2,149 faculty and staff. The free, two-day DEI Champion Training is a part of the UCSF Differences Matter Initiative, a School of Medicine initiative to make UCSF the most diverse, equitable and inclusive academic medical system in the country.

Last year, UCSF Fresno surgeon Andrea Long, MD, and Aimee Abu-Shamsieh, MD, a pediatrician, became the first two DEI Champion Ambassadors to be trained to coach faculty and staff onsite at the UCSF Fresno regional campus. “We needed someone in Fresno to champion the efforts, and it is helpful to have someone who knows the Fresno culture and the Fresno environment,” said Dr. Long.

“We are so grateful at UCSF Fresno to have Dr. Long and Dr. Abu-Shamsieh as our local DEI Champion Ambassadors. It is great for our faculty and staff who take the training to see familiar faces who understand our unique clinical learning and working environment,” said Lori Weichenthal, MD, assistant dean of Graduate Medical Education and Designated Institutional Officer at UCSF Fresno.

Trainers devote about a day a month to DEI Champion Training and have to have a passion for the work, said Michelle Guy, MD, who serves as Director for Graduate Medical Education and is a Dean’s Diversity Leader for Differences Matter group 2. In these roles she works to improve diversity, promote equity and inclusion across UCSF.

Dr. Abu-Shamsieh attended DEI Champion Training as a participant in 2018.
She also has personal experiences that early on directed her interest in diversity and inclusion training. She met her husband, who is Palestinian, in the Middle East and the two married while she was attending medical school in Detroit, Michigan. In medical school, a faculty member compared Arab men to “Tarzan,” insinuating they were very uncivilized and not even human, she said. Her children have had to navigate different social identities – “Muslim, part Arab – and some feel more white than the others,” she said. And her children have faced Islamophobic bullying too, she said.

“This is just so important. It impacts my family on a personal level and I feel as a faculty member, I need to create an environment for learners that is equitable and fair, where everyone feels comfortable and included,” she said.

At the end of her DEI Champion Training session, she left with “a lot of new things to think about,” she said. “I thought it would have all the answers, but it raised new questions too. It gave me answers, but more than that, it inspired me to go out and look for more answers.”

The goal of the training is for participants to be able to recognize bias and microaggressions in the learning environment; use a shared language to talk about bias and discrimination with learners; implement skills to address bias and microaggressions as an ally and apply practical tools for addressing bias and discrimination in day-to-day teaching encounters.

The training provides a DEI foundation of understanding for faculty and staff to build on, Dr. Long said. “Overall, it’s an introduction to these topics and kind of spurs you on. I still have so much to learn and this has just taught me how much more I need to learn.”

“The amount of skill any one individual takes out of the training can be variable, depending on where they come in to the training, Dr. Guy said. “It’s really meant to meet people at all the different levels they might be.”

Response to the training, which includes discussions in small groups, has been overwhelmingly positive, Dr. Guy said. “They very much enjoy getting to meet and connect with other people they otherwise wouldn’t get to meet from other departments. And they like the interactive component of it. Getting to act out some microaggressions with allies, role playing, is kind of the fun part. It is not something we do in our every day.”

No other school is doing the level of DEI training as is offered at UCSF, Dr. Guy said. “I get calls on a regular basis from people from other UCs, as well as from people across the country who hear about our program.” Dr. Guy credits the development and success of the program to the commitment to diversity, equity and inclusion training by Catherine Lucey, MD, MACP, Vice Dean for Education and Executive Vice Dean for the UCSF School of Medicine; and J. Renee Navarro, PharmD, MD, Vice Chancellor of Diversity and Outreach at UC San Francisco.

UCSF’s commitment to DEI Champion Training extended to revamping the program this year to a virtual format to maintain the need for physical distance learning while allowing faculty and staff to personally connect during the training.
Drs. Abu-Shamsieh and Long were nervous about participant reaction to the new online format but need not have worried. “Some people actually say the breakout rooms were easier for them to be open because they were not physically at a table with other people and felt they were in a safer place to be open,” Dr. Long said.

Dr. Guy was stunned by how quickly people responded once UCSF put the available dates for virtual training online. “Within 24 hours, the first 20 dates we put up were filled and we had a waiting list,” she said. “I’d say it was a hotter-selling ticket than “Hamilton” on opening night.”

Virtual training has given more people access to the training, and there has been more interest by faculty and staff in this turbulent year and since the senseless murder of George Floyd, Dr. Guy said. “Faculty and staff are hungry for this type of teaching,” she said. “The program helps to raise awareness of what they can do in their work environment or their communities; how they can leverage the privilege that they have and be an ally.”

An awareness of diversity, equity and inclusion “is 100 percent essential for any type of interpersonal interaction that you have, whether it’s with co-workers, research, engaging with your students or forming relationships with your patients,” Dr. Long said. Dr. Abu-Shamsieh said her hope is “it helps us all to create a more inclusive environment where everyone can work and feel they belong and that all the learners feel comfortable and all the patients feel welcomed.”

UCSF Fresno Gynecologic Oncologist Provides State-of-the Art Surgery

*Denise DeSimone, MD*
When Kristi Blackwell of Hanford needed surgery for endometrial cancer this past spring, she felt confident in the referral to Dennis DeSimone, DO, a UCSF Fresno gynecologic oncologist. She knew that UCSF Fresno had easy access to studies and clinical trials, stayed up to date on the latest technology and would have plans for care for patients like herself.

Blackwell, 52, felt even better after her first meeting with Dr. DeSimone, where the two talked for 45 minutes as he reviewed her case. “He is one of the most amazing doctors I have ever met,” Blackwell said.

Dr. DeSimone is one of only three full-time gynecologic oncologists in the Central Valley, this year joining UCSF Fresno’s Trung “Tim” Nguyen, DO, director of gynecologic oncology, in the UCSF Fresno Department of Obstetrics and Gynecology. Drs. Nguyen and DeSimone are board certified and fellowship trained in gynecologic oncology. Alexandra “Jana” Freeman, MD, who is fellowship trained and board eligible, joined the UCSF Fresno team in September.

“We are trained in advanced oncologic surgeries for the treatment of complex disease, such as endometrial cancer,” Dr. DeSimone said.

In the United States, endometrial cancer is the most common cancer of the female reproductive organs, according to the American Cancer Society. Worldwide, it is the sixth most common cancer in women, according to the World Cancer Research Fund International. Most malignancies are diagnosed in an early stage – vaginal bleeding in post-menopausal women is the most common sign of cancer. However, in some patients the disease is not detected early.

In Blackwell’s case, the cancer was at a more advanced stage. In June, Blackwell went to a hospital with heavy vaginal bleeding, and emergency physicians suspected uterine fibroids. A biopsy ordered by her gynecologist, however, showed cancer in the endometrium (the lining of the uterus). “It was a blessing in disguise that I went to the ER or I would be in worse shape than I am now,” She said.

Dr. DeSimone, who has expertise in robotic surgery, performed Blackwell’s hysterectomy and removal of both ovaries and fallopian tubes. Robotic surgery allows for more accuracy, patients generally have faster recoveries and there is less morbidity, he said. “If this (robotic) surgery was not available in Fresno, patients would have to be sent three or more hours away to Sacramento or San Francisco,” Dr. DeSimone said.

Because Blackwell had a diagnosis of endometrial cancer, Dr. DeSimone had ordered sentinel lymph node mapping, where a dye is injected into the cervix to map out lymph nodes that are stained with a dye. “In her case in particular, she had a CT scan that showed she had some concerning lymph nodes,” Dr. DeSimone said. The identified lymph nodes were removed during surgery, as well as other lymph nodes that appeared abnormal at the time of surgery, he said. Post-surgery, laboratory results showed the cancer had spread to the lymph nodes. The recommendation was for Blackwell to have chemotherapy and radiation oncology therapy. Dr. DeSimone coordinated care for both therapies at Community Cancer Institute in Clovis (CCI),
home to Hematology/Oncology faculty at UCSF Fresno and its Hematology/Oncology Fellowship program.

“He was very thorough in explaining everything to me,” Blackwell said of the time Dr. DeSimone spent with her to explain her diagnosis. “He’s very understanding.”

UCSF Fresno physicians provide cancer care, including at CCI, that otherwise patients would have to leave the region to receive, Dr. DeSimone said. “It’s a pleasure to serve the people in the Central Valley and there’s just a tremendous need – it’s an underserved area – and I am just glad to provide this service to them.”

Research

UCSF Fresno Physicians Advance Patient Care, Treatment Therapies with COVID-19 Clinical Trials

By Barbara Anderson

Throughout the pandemic, faculty, fellows and residents at UCSF Fresno have been participating in national and international clinical trials, investigating effective therapies and novel treatments for COVID-19 to improve patient outcomes.

As a regional campus of UCSF, an institution that is world-renowned for its research, the faculty at UCSF Fresno lead research projects across a number of medical disciplines, including Emergency Medicine, Internal Medicine and Surgery and Obstetrics/Gynecology.
Research at UCSF Fresno is a team effort, said Eyad Almasri, MD, a pulmonary and critical care faculty, who organized a COVID-19 research group at UCSF Fresno that meets regularly to discuss COVID-19 clinical trials. “I’m very proud of every member of the team. It’s a huge effort and a big team,” he said. Several of the studies “are driven or conducted by trainees – residents of fellows,” Dr. Almasri said. “We have a lot of studies that I am really proud of.”

Dr. Almasri also is grateful for the Central Valley patients who volunteered to be in clinical trials. “For every patient we recruited, for any one of these studies, you have a consent. You have a family or patient who consented to participate in the study.”

UCSF Fresno has shown a collaborative effort in research since the beginning of the pandemic, said Marina Roytman, MD, a hepatologist who participated in a 20 academic-center consortium research study of COVID-19 and chronic liver disease that recently published.

Here is a look at COVID-19 studies in various stages of progress at UCSF Fresno:

**Dr. Almasri is participating in several studies.** Early in the pandemic, he participated in a study of the anti-viral drug, remdesivir, for COVID-19 patients with severe respiratory failure and who require mechanical ventilation support. Remdesivir was shown to reduce the length of illness of hospitalized patients, and later, the federal Food and Drug Administration gave approval for hospitalized COVID patients to receive the drug.

This fall, Dr. Almasri is participating in a new National Institutes of Health and Allergy study to evaluate the combination of remdesivir with interferon beta1a, a known treatment for other indications such as multiple sclerosis. Early pilot studies have shown some benefits of the combination of remdesivir with interferon for COVID-19, Dr. Almasri said. This is a Phase 3 trial to prove the benefit and safety of the therapy.

Dr. Almasri continues to follow two patients who were enrolled in a double-blinded placebo-controlled trial of a LyCOV555, a synthetic monoclonal antibody that is a version of the antibodies that are normally isolated from people who are recovering from COVID-19. There were 326 patients enrolled worldwide when the Data Safety Monitoring Board paused new enrollment in October. The pause in the study followed data protocols. There were no serious adverse patient events.
Dr. Almasri is participating in a Phase 2 trial of Apellis Pharmaceuticals, Inc., sponsored study of APL-9 in adults with mild to moderate ARDS (acute respiratory distress syndrome) caused by COVID-19 and who are hospitalized and require oxygen therapy with or without ventilation. The study will evaluate the safety and effectiveness of APL-9, which is designed to inhibit or block a pathway of the immune system that increases inflammation in the lungs. This is a Phase 2 trial and is double-blind and randomized. This is a gentler way to modify the body’s inflammation response than a steroid, Dr. Almasri said. Steroids have been added as a treatment for COVID-19, but it is feared that steroids can block the healthy immune response to clear the virus, he said.

He is leading UCSF Fresno participation in a Phase 1 trial of a novel therapy to evaluate if early-matured stem cells can be directed to mature where the body needs them to fight COVID-19. The stem cells are not embryonic stem cells. “Let me make it very clear. These are stem cells donated by someone who is undergoing liposuction,” he said. The study is in an early stage and patients will be enrolling soon.

Dr. Almasri is overseeing Internal Medicine residents and a Pulmonary Critical Care fellow who are participating in a database study of patients to determine if higher hemoglobin A1C levels in patients with COVID-19 are associated with worse outcomes. “We know that diabetes is a major risk for COVID-19 and is a risk for worse outcomes. We’re looking at the level itself to see if there is a dose effect – to see if a higher level of hemoglobin A1C, which predicts the diabetes control, is associated with worse outcome.”

Brian Chinnock, MD, Emergency Medicine research director at UCSF Fresno, participated in a UCSF-initiated study, “An Assessment of Emergency Medicine Physicians’ Anxiety Levels and Potential Stress Mitigation Measures during the COVID-19 Pandemic Acceleration Phase.” The study assessed anxiety and burnout levels, home life changes and measures to relieve stress. A cross-sectional e-mail survey was sent to all EM physicians at seven academic emergency departments, including Community Regional Medical Center in Fresno. The study, published in the Society for Academic Emergency Medicine, found the acceleration phase of COVID-19 pandemic induced substantial stress and anxiety and that the best measures of decreasing stress were enhanced availability of personal protection equipment, rapid turnaround testing at provider discretion and clear communication about COVID-19 protocol changes. “Those kind of stress mitigators got twice as many points as having easily available mental health care or Zoom meetings to discuss changes in COVID-19,” Dr. Chinnock said.

Dr. Chinnock also is enrolling patients in a multi-center study named “RAMIC” in which Ramipril, a medication for hypertension, heart failure and diabetic kidney disease, is being compared to placebo in non-ICU COVID-19 patients. “Observational data from China suggested survival benefit in patients taking ACE-inhibitors compared to those not taking them,” Dr. Chinnock said. “The thought is that the renin-angiotension system may have a role in the lung injury that occurs in COVID-19.”

Mohamed Fayed, MD, a UCSF Fresno pulmonary and critical care disease specialist, participated in a study of the effect of extracorporeal membrane oxygenation (ECMO) with COVID-19 patients. The prospective/retrospective multi-center short period incidence observational study was of intensive care unit patients. ECMO is a technique of providing extra
respiratory support for patients who are failing conventional respiratory support. UCSF Fresno has a dedicated team for ECMO to address the need for respiratory and/or cardiac ECMO support.

Dr. Fayed also is participating in multiple clinical trials:

A sponsored trial by Sage Therapeutics to evaluate the efficacy and safety of brexanolone, a neurosteroid, in COVID-19 patients with ARDS who are on ventilators. Brexanolone is a drug that is used for sedating patients who are intubated with neurological problems. The drug appears to have some anti-inflammatory effect and the study will evaluate if it is beneficial treatment for COVID-19.

COVID-19 Host Immune Response Pathogenesis (CHIRP) Study. The overall objective of this study is to establish a longitudinal cohort of COVID-19 patients and to study clinical, demographic, behavioral, genetic, and immunologic factors associated with COVID-19 susceptibility and severity of disease. The infrastructure established with this cohort will then serve as a platform for future interventional trials aimed at preventing and/or treating COVID-19 disease.

EB05 is a novel humanized Anti-Toll Like Receptor 4 (TLR4) Monoclonal Antibody. It will be conducted as a randomized, double-blind, placebo-controlled study to evaluate the safety and efficacy of EB05 in adult hospitalized patients with moderate to severe COVID-19 pneumonia. TLR4 is a key component of the innate immune system which functions to detect molecules generated by pathogens and host cell damage. EB05 has demonstrated safety in two clinical studies and was able to block cytokine release in humans. EBO5, which is a TLR4 blockade, rescues mice from lethal influenza-induced acute respiratory distress syndrome (ARDS). Given, this compelling body of evidence we believe EB05 could ameliorate ARDS due to COVID-19, significantly reducing ventilation rates and mortality. Subjects will be administered a single EB05 IV infusion of 15 mg/kg up to a maximum of 1440 mg (8 vials) vs placebo.

Anna Kazaryan, MD, a UCSF Fresno rheumatologist, is leading a COViDD (COVID-19 Patients with vitamin D Deficiency) study. In the first phase of the study, she looked at the prevalence, incidence and disease outcome of vitamin D deficiency to COVID-19 to study if there is a correlation between lower levels of the vitamin and a higher risk of getting the coronavirus; and if patients with low vitamin D levels who are diagnosed with COVID-19 have worse outcomes than COVID-19 patients with higher levels of vitamin D. “Vitamin D plays such an integral part in our immune system. It regulates your immune system, reduces inflammation and boosts your immune system, basically,” Dr. Kazaryan said. “And so far, all the COVID-19 patients we have seen have had vitamin D deficiency; and the ones with the lowest vitamin D are in the ICU (Intensive Care Unit),” she said.

Subhashini Ladella, MD, FACOG, UCSF associate professor, director of Maternal-Fetal Medicine at UCSF Fresno, is the UCSF Fresno lead researcher as part of a multinational, multicenter collaborative effort and study group of COVID-19 in pregnancy. The data from this retrospective study aims to assess COVID-19 infection on maternal morbidity and mortality. The World Association of Perinatal Medicine invited Dr. Ladella to participate in the study. The non-
profit association brings together groups and individuals throughout the world to promote the science of perinatal medicine. Early reports out of China have shown mother-to-child transmission of the coronavirus is less likely although the data is limited and anecdotal for COVID-19 pregnant women and newborns with respect to the severity and anticipated prognosis. “The multinational study should provide better information and guidelines for perinatal providers for the diagnosis, clinical care and treatment of COVID-19 during pregnancy,” Dr. Ladella said.

Leigh Ann O’Banion, MD, a UCSF Fresno vascular surgeon, is participating in a worldwide project called COVIDSurg. The international, cohort study, aims to assess the outcomes of surgery in patients diagnosed with COVID-19. “We have been collecting data since March and enrollment just closed so we should be having outcome data here pretty soon,” Dr. O’Banion said. Dr. O’Banion is participating in a second international Vascular Surgery COVID-19 Collaborative (VASCC) to evaluate the effect of the systematic, widespread, and immediate postponement of vascular surgery on patient outcomes around the world. “Our research could impact lives of vascular patients affected by the COVID-19 pandemic, and understanding the consequences of surgical postponement of vascular diseases will help us moving forward as COVID-19 is here to stay for the foreseeable future,” she said.

Elham Rahmati, MD, a UCSF Fresno infectious diseases specialist, is leading a study on convalescent plasma therapy for treatment of COVID-19 patients with severe to life-threatening disease. The treatment involves infusion of plasma rich antibodies from COVID-19 recovered patients to patients who are sick from the disease. It usually takes time for COVID-19 patients to develop their own antibodies to fight the virus and as a result infection can progress rapidly at times. The study is to investigate whether the transfused antibodies can neutralize the invading virus and change the course of the disease. Dr. Rahmati’s research is in conjunction with the Mayo Clinic’s Convalescent Plasma Expanded Access Program.

Marina Roytman, MD, FACP, a hepatologist and director of the UCSF Fresno Liver Program, is among researchers from 20 academic centers nationwide who participated in a COLD (COVID-19 in Liver Disease) consortium to study COVID-19 patients who had been diagnosed with underlying chronic liver disease. The study published in “Clinical Gastroenterology and Hepatology.” The study found the risk factors which predict higher overall mortality among patients with chronic liver disease (CLD) and COVID-19 are alcoholic liver disease (ALD), decompensated cirrhosis and hepatocellular carcinoma (HCC). Hispanic ethnicity and decompensated cirrhosis were also associated with severe COVID-19. UCSF Fresno looked primarily at patients with fatty liver disease, a condition where fat cells build up in the liver. UCSF Fresno continues to collect data on the local population for further study.
In June, the Fresno City Council approved a grant agreement with UCSF Fresno to significantly expand testing for COVID-19, especially in underserved communities and communities of color. Proposed by Mayor Lee Brand and City Manager Wilma Quan and championed by Council President Miguel Arias and Councilmembers Esmeralda Soria and Luis Chavez, the agreement appropriated nearly $5 million from the City’s CARES Act funding from the federal government to support the project and enhance Fresno’s response to the pandemic. The initiative, named the Fresno COVID-19 Equity Project (CEP), linked UCSF Fresno with about 20 community-based organizations (CBOs) to provide free and equitable access to testing and contact tracing. A
partnership between the County of Fresno and CBOs expanded services to include community education and social support.

Fresno CEP builds upon UCSF Fresno’s Mobile Health and Learning or Mobile HeaL. Emergency medicine physician and assistant dean at UCSF Fresno Kenny Banh, MD, started Mobile HeaL in 2018. Mobile HeaL provides mobile health services to vulnerable populations. In addition to providing remote, accessible health care, Mobile HeaL offers learning opportunities for medical students and pre-health students (pre-COVID-19) under the guidance of experienced medical residents and faculty physicians at UCSF Fresno.

“CARES funding from the City allowed Mobile HeaL to hire additional personnel, purchase equipment, update mobile units and establish a static location on the Fresno Interdenominational Refugee Ministries campus to provide services and testing for the COVID-19 Equity Project,” said Dr. Banh. “Our partnering community-based organizations help us make the necessary connections and establish the trust needed to provide services where they are needed most.”

Community connections and goals were developed over the summer to facilitate services and testing in neighborhoods, at schools, faith-based locations and other locations throughout central, southwest, and southeast Fresno. Partnering community-based organizations include: African American Clergy Taskforce, Black Wellness & Prosperity Center, Central Valley Health Policy Institute, Centro Binacional Para El Desarrollo Indígena Oaxaqueño, Centro La Familia, Cultiva La Salud, Cultural Brokers Inc., Fresno Building Healthy Communities, The Fresno Center, Fresno Economic Opportunities Commission, Fresno Interdenominational Refugee Ministries, Fresno Metro Black Chamber of Commerce, Go Public Schools Fresno, Jakara Movement, Reading and Beyond, Take a Stand Committee, and West Fresno Family Resource Center.

“The Fresno COVID-19 Equity Project is a model and ideal community-university partnership,” said Shantay R. Davies-Baleh, MBA, CLE, Doula. “UCSF Fresno brings the expertise and prestige of a world-class institution while the community-based organizations bring the trust and experience of working with ethnically and culturally diverse communities to stop the spread of COVID-19.”
As of press time, CEP conducted 7,606 tests with an average COVID-19 positivity rate of 15.2%. The average number of tests conducted per day was 194 with more than 300 tests performed some days. CEP officially launched in September 2020 and is set to run through December 2020. For more details: [www.fresno.ucsf.edu/cep](http://www.fresno.ucsf.edu/cep)

UCSF Fresno’s success and growth are a direct result of the dedication and inspiration of faculty, staff, residents, fellows, students, alumni, partners, donors and friends. In each issue of Focus, we introduce you to the people who contribute to the greatness of UCSF Fresno through informal interviews.

**This issue features Bruce Bronzan, who died Sept. 28. Mr. Bronzan served as associate dean of administration and development at UCSF Fresno from 1993 to 1997.**

Mr. Bronzan led efforts to help build a model health care delivery system to address the shortage of primary care doctors in the San Joaquin Valley and contributed significantly to UCSF Fresno’s foundation and the institution it has grown to today. “His intelligence, wit and energy will be missed greatly,” said UCSF Fresno Associate Dean Michael W. Peterson, MD, FCCP, MACP. “We offer deepest sympathies and condolences to his family and many friends.”

Mr. Bronzan, appointed by then UCSF Chancellor Joseph B. Martin, MD, served alongside Associate Dean H. John Blossom, MD, who oversaw UCSF Fresno’s academic arm.
Prior to his Associate Deanship at UCSF Fresno, Mr. Bronzan served in the California State Assembly from 1982-92, and had been a former member of the Fresno County Board of Supervisors. During his years in the Assembly he became one of California’s principal health care advocates, including serving as chairman of the Assembly’s Health Committee.

For insights about Mr. Bronzan and his role in the development of UCSF Fresno, Focus turned to Dr. Blossom, professor emeritus of Family and Community Medicine, and two others with long-time connections to UCSF Fresno and with Mr. Bronzan: Hilary Ross, Esq., risk manager and privacy officer at UCSF Fresno; and Gene W. Kallsen, MD, professor emeritus of Emergency Medicine and endowed chair in Emergency Medicine. Ms. Ross served as Mr. Bronzan’s chief of staff during his time at the Assembly and as lead staff at UCSF Fresno and Dr. Kallsen had interactions as an emergency medicine physician while working at Valley Medical Center, which at the time was the county hospital in Mr. Bronzan’s supervisorial district.

Mr. Bronzan was the “the right person at the right time” to bring health care and community leaders together for the improvement of health in the San Joaquin Valley, Ms. Ross and Drs. Blossom and Kallsen agreed.

During his years in the Legislature, Mr. Bronzan was largely focused on health and mental health, Ross said. “His legislative office was considered the best office in which to work. It was magical, largely because of him.” While Bronzan was a Democrat, whether hiring for the office or appointing committee staff, he didn’t ask anyone what their party was, Democrat or Republican, she said. “What he wanted were people who agreed with the focus of improving health resources.”

He left the Legislature after 10 years when term limits were implemented, and was undecided about what to pursue next, when Chancellor Martin offered him the UCSF Fresno Associate Dean position, Ross said. “Joe Martin knew Bruce’s ability and he thought Bruce could help work on expanding UCSF Fresno, broadening and expanding primary care.”

Mr. Bronzan understood the need to train physicians in the Valley to address the severe doctor shortage, and supported the development of what is now the Department of Family and Community Medicine at UCSF Fresno, Dr. Blossom said. “His suggestions were transformative as we moved UCSF Fresno forward.”

He had a vision of a campus that would serve first Fresno County and then the Valley, and it would meet the needs of residents by putting together education, service and research, Dr. Blossom said.

“What he was doing was good for our program and good for us and good for the long-term management of the programs,” Dr. Kallsen said.

During his tenure at UCSF Fresno, Mr. Bronzan helped in the creation of a public-private partnership between Fresno County and Community Medical Centers for the care of the indigent population. “You needed someone who had the capacity to view the region through a health care lens and then use insight and vision to pull the elements together,” Dr. Blossom said.
In a March 31, 1993 piece, he wrote soon after accepting the Associate Dean position, Mr. Bronzan wrote of his first charge being to bring together several separate health care providers into an integrated delivery system. “Both public and private entities are involved, making this a particularly difficult challenge,” he said. “It’s a vision though, that enjoys a broad spectrum of support within our community.”

Mr. Bronzan had an exceptional ability for absorbing complicated information and then synthesizing it to make it understandable for people, Ross said. “And he was good at getting people to see what he was trying to do, which was for the greater good of people.”

Mr. Bronzan was diagnosed late in 2019 with a rare type of T-cell lymphoma, Ms. Ross said. He died on his 73rd birthday surrounded by family.

Supporting UCSF Fresno

Support Improved Health with an End-of-Year Gift

Emergency Medicine resident and UCSF School of Medicine graduate Walid Hamud-Ahmed, MD, and UCSF SJV PRIME student Limuel Rivera at a Mobile HeaL clinic

By Kathleen Smith and Brandy Ramos Nikaido
UCSF Fresno quietly turned 45 this year. As we look back at 2020 and ahead to 2021, we are incredibly proud of our accomplishments to date and we are enthusiastic about the future. Roughly half of our graduates stay in the Central Valley to care for patients, teach future physicians, or continue their medical education. That is a tremendous benefit to the region, which has a well-documented shortage of physicians. This year, we admitted the second cohort of medical students in the UCSF San Joaquin Valley Program in Medical Education, a program specifically for future physicians who want to provide equitable, accessible care in the Valley.

Yet, more than ever before, the COVID-19 pandemic highlighted the value of and need for UCSF Fresno. Thanks to UCSF Fresno, faculty and residents provide care for intensive care unit (ICU) patients and ensure sufficient physicians are available to care for all patients at Community Regional Medical Center (CRMC). In addition, faculty and fellows at UCSF Fresno provide patients with specialty pulmonary care. Faculty at UCSF Fresno provide patients access to COVID-19 related clinical trials, including remdesivir, ECMO, vitamin D, international study of COVID and pregnancy, convalescent plasma, liver disease and others. UCSF provided personal protective equipment (PPE) and testing supplies and we partnered with the City of Fresno and community-based organizations to expand COVID-19 testing in underserved communities. A partnership with the County broadens services to include educational outreach and other support.

Community support for UCSF Fresno is vital. Ongoing partnerships and financial investment are essential to ensuring excellent medical education and a constant pipeline of physicians for the region. Please consider making a year-end gift today so we can continue to maintain and expand our outreach, research and training programs.

Here are just some of the ways in which you can make a difference:

Scholarships for medical students are essential to help provide the necessary financial aid so smart, talented, social justice-minded future physicians can pursue their passions and graduate without crippling debt. Your gift today to the SJV PRIME scholarship fund helps ensure these students get the resources and support they need to be successful here in the Valley where they are desperately needed. Make a gift now to the SJV PRIME Scholarship Fund.
We are committed to enhancing our Clinical Simulation Lab. Simulation provides a safe environment for our trainees to learn and fine-tune procedural skills, complex decision-making processes and leadership abilities. Additional funding will allow us to upgrade existing equipment to remain competitive with peer institutions as we train the next generation of outstanding physicians. Make a Gift now to Make a Gift now to Support Cutting-Edge Training.

Our Clinical Research Program helps translate scientific discoveries and laboratory breakthroughs into improved patient therapies. During this unprecedented time, faculty physicians at UCSF Fresno quickly engaged in COVID-19-related research to better understand its impact on Valley populations and provide new treatments. Your support helps ensure this vital research continues, and also supports research and clinical trials related to other illnesses that affect Valley patients – including diabetes, valley fever, and several types of cancers. Make a Gift Now to Support Research at UCSF Fresno.

Every gift made to UCSF Fresno has a profound ripple effect that helps shape a healthy future for the Valley. Together, we can strengthen the investment to improve health in the region through high-quality medical education, outstanding patient care and clinical research.

For more information about how you can help advance our mission to improve health in the Valley, please contact Kathleen Smith in Development at UCSF Fresno at (559) 499-6426 or give@fresno.ucsf.edu.