



NORTH DAKOTA MEDICINE

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ON THE COVER: Recent UND M.D. grads Chloe Bakkum (left) and Philip Hoffarth (right) celebrate Match Day 2026 in Minot, N.D.



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University of North Dakota School of Medicine & Health Sciences

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UND SCHOOL OF MEDICINE
& HEALTH SCIENCES
UNIVERSITY OF NORTH DAKOTA

Many colleges and universities slow down a bit as seasonal temperatures rise. But the opposite is true at North Dakota's only interprofessional school of medicine and health sciences.

For example, our newest physician assistant (PA) cohort began classes in May and our medical students start in July.

Furthermore, we're hard at work this summer building up several programs and initiatives designed to help our School meet its purpose of serving North Dakota and improving the quality of life in the state.

Foremost among these efforts is the founding of the UND Department of Dermatology. Thanks to a very generous gift from the Mohiba and Basir Tareen Family Endowment, this new department, led by the Tareen Family Chair of Dermatology Dr. Erin Barrett, will expand dermatologic training opportunities in North Dakota, introduce students to the specialty earlier in their education, and better prepare students for residency and careers in this critically important field.

This gift will help address significant workforce needs. Today, there are fewer than 30 practicing dermatologists in North Dakota, limiting access to specialized care, particularly in our state's rural and underserved communities. Over time, this new department will help strengthen the state's dermatology workforce and expand access to care for patients across North Dakota.

To the Tareen family: Thank you for your vision, generosity, and commitment to improving dermatologic care for the people of this state. Your impact will be felt for generations to come.

And fresh off our MD and Graduate Program Commencement ceremonies, I should also note that we just sent more than 300 physicians, therapists, PAs, and other health providers off to a variety of residency and fellowship programs, hospitals and clinics, and other healthcare sites. Our 100% match rate for medical students reflects the exceptional caliber of our cohorts as they continue into the next stage of their education and join competitive residency programs in North Dakota and throughout the U.S. Amazingly, nearly half of our graduating MD students matched into the primary care specialties of family medicine, internal medicine, obstetrics and gynecology, and pediatrics.

We are also working hard to reimagine medical education with the creation of a new Department of Medical Education and revamping our Office of Learning Innovation (OLI). This new organization will ensure that SMHS is on the forefront of innovation in teaching and help shape our School's integration of, and decision-making around, A.I. in the clinic and classroom.



Innovation is critical to prepare our future healthcare providers to serve the state. Such initiatives include our Primary Care Accelerated Track (PCAT), which will get more family and internal medicine physicians into North Dakota clinics and hospitals sooner, and our "ND85" program, which seeks to recruit and retain more North Dakota students for healthcare training and eventual practice in North Dakota.

On that note, I am happy to report that ND85 is already increasing the number of North Dakota residents matriculating into our MD and PA programs. As of June 1, our incoming M.D. Class of 2030 consists of more than 80% North Dakota students. The PA data are similar. Given that the North Dakota Legislative Assembly gave us until 2030 to reach 85% North Dakotans in our program cohorts, it looks like we're well on our way to helping address the state's continuing health provider shortage.



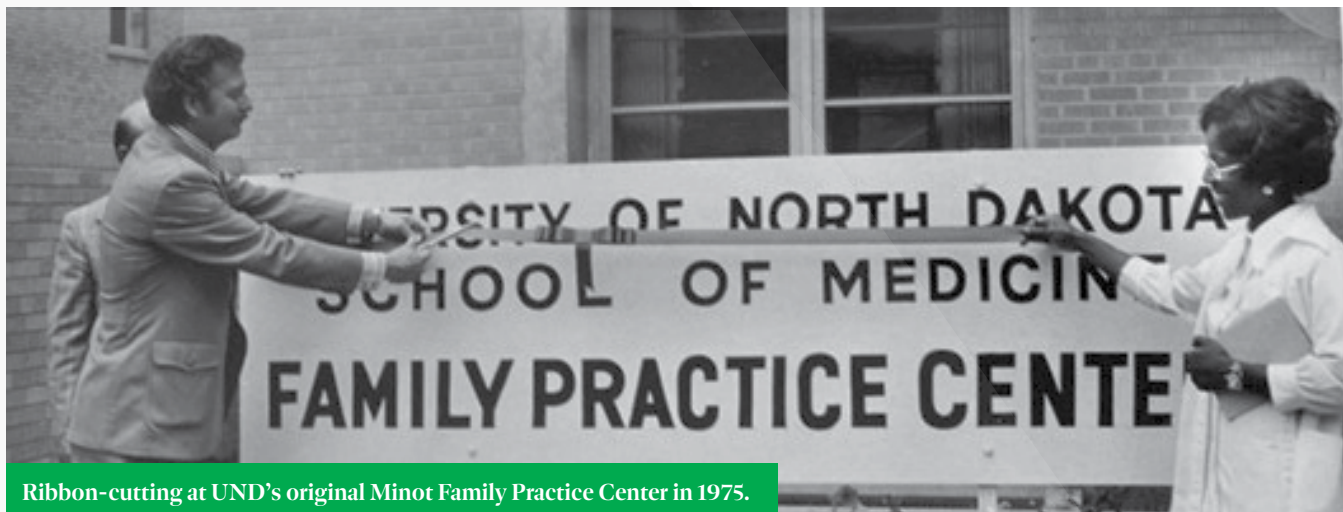
Dr. Jenkins (third from left) with each of the 2026 Dean's Special Recognition Award winners at the School's M.D. Awards Banquet on May 1. From left-to-right are: Drs. Benjamin Axtman, John Bassett, Stacy Longnecker, Heidi Philpot, Brett MacLeod, Rachel Marohl, Michelle Placke, and Amna Masood (not pictured: Drs. Supha Arthurs and Dustin Evans).

Finally, in the research world, UND's School of Medicine & Health Sciences is likewise on a roll. Drs. Gary Schwartz and Mark Williamson, researchers in our Department of Population Health, recently published an important paper linking high levels of exposure to radon gas with increased risk for ovarian cancer. Likewise, Dr. Keith Henry, in our Department of Biomedical Sciences, found that taurine supplementation holds the potential to halt retinal degeneration in persons with certain types of early onset retinal dystrophy.

These are just a few examples of how UND's community-based School of Medicine & Health Sciences is improving health and healthcare not only in North Dakota but the nation. Every day.

Marjorie R. Jenkins, M.D., M.Ed.H.P., FACP
Vice President for Health Affairs, UND
Dean, School of Medicine & Health Sciences





Ribbon-cutting at UND's original Minot Family Practice Center in 1975.

THE CORNERSTONE OF CARE

UND's Family Medicine Residency programs in Minot and Bismarck celebrate 50 years of community service

From his office in the UND School of Medicine & Health Sciences (SMHS) in Grand Forks, Dr. David Schmitz considered the question: Where would healthcare in North Dakota be without UND's Family Medicine (FM) Residency Programs?

"My office is in one of the corners of the medical school building," the Chair of the SMHS Department of Family & Community Medicine explained on a video call that included his Minot- and Bismarck-based colleagues, "and I know that's by coincidence, but I really see family medicine as a 'cornerstone' of medical education and healthcare workforce in the state."

Two-hundred miles away in the state capitol, Dr. Jeff Hostetter smiled at Schmitz's metaphor.

"Around 80% of the family physicians in the Bismarck and Mandan area went to residency here," Hostetter quipped. "Minot's statistics are even higher than Bismarck's, and it's really impressive to see all of the physicians in North Dakota who have left this program and have dotted the landscape of the state."

Along with their fellow FM administrators, Dr. Peter Sandroni and Dr. Shannon Sauter, the physicians were ruminating on the 50- and 51-year anniversaries, respectively, of UND's FM residency programs in Bismarck and Minot.

"In 1975 these guys all said, 'If we don't have our own family practice residencies, we're never going to attract enough people to take care of the population.' And that has pretty much turned out to be true," continued Hostetter, who



The original UND Family Practice Center in Bismarck (left) and the newest iteration of Minot's UND Center for Family Medicine (right).

directed Bismarck's FM residency program for nearly 20 years. "We've turned out a lot of physicians, and a huge number of them have stayed in North Dakota."

The more things change...

The outcome is well worth celebrating. After all, were it not for the FM residencies, plus the Bismarck and Minot Centers for Family Medicine (CFM) they produced, healthcare in North Dakota would look very different in 2026 – likely much worse.

According to the School's most recent *Biennial Report*, North Dakota faces a shortage of more than 200 physicians overall today, mostly in the primary care specialties of family medicine, internal medicine, pediatrics, and obstetrics/gynecology. But this figure is a significant improvement upon the need for nearly 400 family physicians alone half a century ago.

In an effort to expand UND's two-year Bachelor of Science in Medicine (BS Med) degree into a four-year MD program for the state, then-School of Medicine & Health Sciences (SMHS) Dean John Vennes proposed using the federal Area Health Education Center (AHEC) program to expand the School's reach across North Dakota. When the MD program came officially online in 1975, so did the branch campuses in Fargo, Bismarck, and Minot – and with them, three-year family medicine residencies in the cities.

As the July 1975 edition of the *North Dakota School of Medicine News Review* fretted at the time of the residencies' creation in 1975, although North Dakota at the time "need[ed] 380 family doctors," it had been making-do with fewer than 160 to serve the entire state. That's why the CFMs were such a welcome addition to the state's only medical training program. Enter North Dakota's first residency programs in family medicine, the Minot and Bismarck versions of which take up to six new residents each year.

Minot went live first, becoming the first accredited medical residency in North Dakota, although family medicine residencies in Bismarck, Fargo, and Grand Forks soon followed.

The significance of this "training-and-retaining" model cannot be overestimated, said Schmitz, referencing recent American Medical Association data that identifies more than 550 licensed family physicians in North Dakota today, at least 350 of whom are practicing direct patient care.

Producing leaders

Since their founding, the CFMs have generated nearly 400 family physicians combined, the majority of whom have stayed North Dakota to practice. And not just health providers but leaders. Taking turns rattling off the names of former residents, Hostetter and Sandroni ran out of fingers counting the CFM grads who today serve in leadership roles at health systems large and small across the state.

"Dr. Scott Knutson trained here, and Dr. Paul Olson trained in Bismarck," said Sandroni, who directs the Minot FM residency, referencing the former and current Assistant Deans of the SMHS Northwest Campus (the first of whom is currently Chief of Staff at Trinity Health). "Plus Dr. Dawn Mattern, who serves as Deputy Health Officer for the Ward County First District Health Unit and Chairs the state high schools' Sports Medicine Advisory Committee, Dr. Paula Bercier, clinic director at the Quentin Burdick Memorial Healthcare Facility at Turtle Mountain, and Dr. Candelaria Martin at Spirit Lake."

"And the Chief Medical Officer at CHI St. Alexius in Williston [Wayne Anderson, M.D.] is one of our residency graduates as well," added Hostetter, not to be outdone. "The Chief Medical Officer at Sanford Health in Bismarck was one of my medical students. The heads of many of the departments here, at least on this campus, were my medical students at some point."

It's this commitment to leadership, said Schmitz, that characterizes UND residency grads.

"Yes, we're producing physicians who see and take care of patients across the life spectrum, from cradle to grave, from the most rural areas to our urban hospital environments," Schmitz summarized. "But we're also producing leaders who help shape community and the future of medical education."

'Subsequent service in North Dakota'

They're also serving the communities in which they live. Recalling how the Department of Family & Community Medicine not long ago won the UND Award for Departmental



Excellence in Service, Schmitz explained that the faculty, staff, and residents who constitute not only the two CFMs but family medicine as a profession in North Dakota take seriously their charge to provide “service in North Dakota and to enhance the quality of life of its people,” as the North Dakota Century Code mandates of the state’s only medical school.

“Dr. [Jackie] Quisno has a special project with the state and Dr. Sauter is out at the women’s prison and teaches residents how to do prison healthcare,” said Schmitz as Sauter too jumped on the video call. “It goes on and on. These are niches of care that are not always easy to fill.”

“One of the grants that we had at the Bismarck CFM was a well-child grant for patients on Native American reservations,” added Program Director Sauter, recalling also how one of her colleagues serves a local traumatic brain injury (TBI) group home in Bismarck. “We’re meeting people where they’re at.”

Because where people are at isn’t always where health providers are.

“I often joke about how the things that nobody else wants to do is what we end up doing,” laughed Hostetter, explaining how CFM physicians serve as North Dakota Medicaid consulting physicians, provide care to New Americans, and have served as county coroners. “Some providers don’t want to do X, so we provide that service. For example, I’m the Medical Director for the North Dakota Department of Corrections, and the Burleigh County Public Health Officer. UND residency grad [and CFM faculty] Dr. Dave Field is Public Health Officer for at least two North Dakota counties.”

The more they stay the same

Fifty years in, the CFMs and their attached family medicine residencies show no sign of slowing down. They’re still here for North Dakota, doing what they were tasked with doing in 1975: providing primary care to the communities they serve.

Relative to the massive changes certain medical specialties and the American health system have seen over the past several decades, family medicine “hasn’t changed at all” said Schmitz.

Or at least not much.

“If you look at what a family doctor did here in 1976 or 1980 – what their training looked like – the core training is about the same, honestly,” acknowledged Hostetter. “The community’s

**“We’ve
turned
out a lot
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in North Dakota.”**



DR. JEFF HOSTETTER

Former Director,
Bismarck Center for Family Medicine

needs have changed, and so we’ve adapted with that. But the same underlying values and same essential commitment to providing for the community remains.”

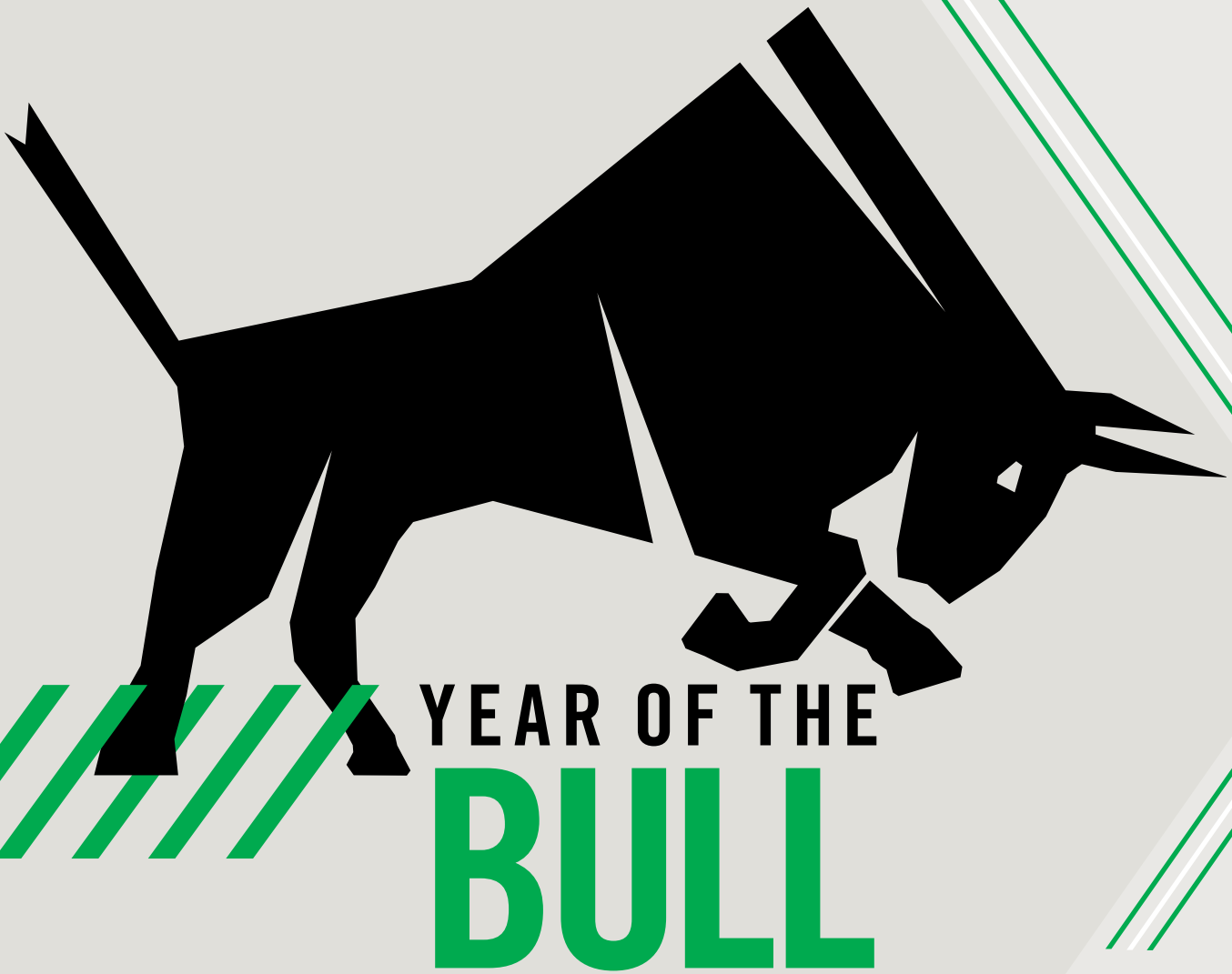
This commitment, said Schmitz is what keeps UND’s CFMs, and family medicine as a specialty, relevant in a changing world.

“If there’s an airplane emergency, or somebody’s having a baby in a setting unexpectedly, or if you have a palliative care situation, a family physician can help you in a primary way. The relationship of family medicine meeting patient, family, and community needs hasn’t changed for me,” he said.

“That’s the message: We’re here for you today, and have been so from the beginning, from the urban centers to the smallest communities that have medical care here in North Dakota. Family medicine is part of that foundation.”

As it will be for the next 50 years.

By Brian James Schill



YEAR OF THE BULL

UND researchers team up with their international colleagues to find an astonishing link between taurine and inherited retinal dystrophies

"This is the thing many scientists wish for but rarely find," smiles Keith Henry, Ph.D., from his office in the UND School of Medicine & Health Sciences (SMHS). "That direct link to treatment and making a difference immediately in the lives of others."

With genuine excitement at the thought that his team may have made a life-changing discovery for children suffering from any number of congenital retinal neuropathies, Henry shook his head in disbelief at the suggestion that researchers at UND may have just figured out how to prevent, and maybe even stop, some progressive eye diseases.

That, at least, is the conclusion that Henry and a team of researchers – including UND graduate student Michael Allen and research specialist Madhur Shetty, M.S., and the lab of Professor Carlo Rivolta, Ph.D., head of the Ophthalmic Genetics Group at the University of Basel – reached in the

paper they published recently in the American Medical Association-affiliated medical journal *JAMA Ophthalmology*.

"That's one of the reasons this is so exciting," says Henry, associate professor of biomedical sciences at North Dakota's only interprofessional medical and health sciences school.

"The possibility of impacting a person's vision and their quality of life because of what we do in the lab — it puts a fire under you like few things do."

How the eye works

Most of us learned in high school that eyes work by translating light into electrical signals for the brain to interpret. These signals communicate color, depth, shape, and movement, telling us what is "happening" immediately in front of us at any given time.



Dr. Keith Henry (right) and student in his lab at the UND School of Medicine & Health Sciences in Grand Forks.

Here's how it works: As light passes through an eye's cornea, pupil, and lens to the back of the eye, it eventually hits the retina, a light-sensitive multilayered "film" opposite the lens that contains nerves called photoreceptors. These photoreceptors are categorized as either "rods" or "cones," both of which help transform light and movement into information – the electrical signals the brain decodes and then acts upon in real time to give us sight.

Of course, light is also a constant insult to the eye. "We have these light-sensing discs in the rods and cones, and they're getting bombarded all the time," Henry says.

This bombardment by radiation creates free radicals that can damage the retina. To combat this damage, the discs are constantly being shed and absorbed by an adjacent layer of cells called the retinal pigment epithelium (RPE). This "dark" layer of RPE cells lies between the eyes' photoreceptors and the vasculature, which extracts nutrients and amino acids from the blood and shuttles them to the rods and cones to ensure proper function.

With progressive retinopathies, though, this microscopic clean-up process misfires, resulting in a build-up of damaged discs and a harmful lack of raw materials the eye needs for both repair and function. The consequences of this misfire, over time, include hypersensitivity to light, cataracts, and total blindness when photoreceptors cease functioning.

Along these lines, inherited retinal dystrophies, including Leber congenital amaurosis (LCA) and early-onset retinal dystrophy (EORD), are genetic conditions that usually lead to progressive vision loss, particularly in children. Typically diagnosed before age five, these specific conditions are caused by mutations in more than 500 genes, making the development of broadly effective treatments extraordinarily difficult.

El toro

So it is that Henry and his international team of researchers are hoping that their work may open the door for treating some of these catastrophic outcomes.

Enter taurine. First identified in the bile of an ox bull, taurine is a naturally occurring sulfur-containing amino acid and a strong antioxidant that while not contributing to the building of proteins is abundant in human tissues and cells. Because humans can synthesize taurine at low levels, and because taurine is widely available in meats and seafood, the amino acid is generally classified as "conditionally" essential rather than strictly essential, meaning it has no recommended daily intake level.

Henry's research suggests health providers may want to pay closer attention to taurine levels in individuals who may harbor gene variants that lower their taurine.

"We've clearly shown the relationship between dysfunction of the taurine transporter and retinal dystrophy," he says, "and shown at least in a limited study that we can raise plasma levels of taurine in some affected individuals through dietary taurine supplementation. This [supplementation] helps shunt taurine into the retina and was able to halt retinal degeneration."

The line bears repeating: Henry's team was able to *halt retinal degeneration*.

As he explains, plasma in the eye's vasculature contains taurine, which floats around in a substance called the choroid and is adjacent to the retina attached to the RPE. To get into the photoreceptor cells and perform its job, though, taurine requires a transporter known as TauT.

"TauT is what we call a secondary active transporter, because it harnesses the energy stored in sodium gradients to energetically extract taurine out of the bloodstream and concentrate it inside the RPE cells at the back of the eye, where it can then be distributed into the other layers of the retina," explains Henry. "From there, taurine moves into the rods and cones, where its antioxidant activity keeps the photoreceptor membranes healthy and supports the health of the other cells in the retina that ultimately feed into the optic nerve."

But persons with a genetic variant that disrupts the ability of TauT to deliver taurine to the rods and cones risk damage to these vital cells. In time, these genetic changes appear to cause significant or complete loss of taurine transport into the RPE, resulting in cell death and eventual vision loss.

So how do these genetic variants cause TauT dysfunction? Is it because TauT can no longer recognize taurine and/or the transporter can no longer pull taurine into the cell? Is a variant causing TauT to fold incorrectly such that it gets moved into the cell's own trash can by accident? Is it a mix of these things where some TauT gets to the surface, but it's not very functional and some of it is getting shuttled to the trash?

Yes, yes, and yes, answers Henry, pausing to add that taurine transport and the severity of the retinal dystrophy in question all depend on the affected person's genes – the SLC6A6 gene in particular.

"That's why this shuttling is so important, and you have to get taurine out of the plasma and into the retinal layers that need it," he says. "But it's not only the retina. Our published studies found that TauT dysfunction usually coincided with

heart problems – virtually all the patients affected by these variants exhibited one or more cardiomyopathies. Excitingly, the two individuals treated with taurine supplementation saw a complete reversal of their cardiomyopathies. But more research is needed to identify the mechanistic connection."

Over the counter

Cautioning that his research team and its affiliates around the globe have a lot of work ahead of them, Henry says that next steps include "looking for the intermediaries – the things that regulate, control, and sort" not only taurine but other nutrients, amino acids, and genes involved in eyesight.

Still, he's proud that his team was able to demonstrate that a treatment – if not cure – for some forms of EORD or LCA might be down the street at your local grocery or health food store. Taurine can already be purchased over-the-counter as a nutritional supplement and is commonly paired with caffeine and a variety of B vitamins in many so-called "energy" drinks.

"If taurine supplementation turns out to be effective, as our preliminary data suggests it can be," Henry continues, adding that maybe EORD will be something health providers can screen for in children at birth, "maybe retinal degeneration never comes into play, maybe the cardiomyopathies and other physiological abnormalities never develop."

All because a simple amino acid supplement prevents them.

Citing recent studies on taurine's impact on other degenerative conditions like arthritis and aging, Henry confesses to at least considering visiting his health food store on the way home from the lab these days. "I've seriously thought about [supplementing]," he laughs, adding that he does not advocate consuming any supplements without physician oversight. "Who knows, maybe its use could actually help aging and vision long term by enhancing the ability of the eye to get rid of these radicals that are created by light."

But he's careful not to react too quickly – much more research is needed, he says, including clinical trials.

"Still, knowing that there's something so simple that could profoundly change someone's entire life. . ." he trails off. "We are so lucky all of this came together and I'm hoping we can carry this luck to those affected by these disorders."

By Brian James Schill

AB OVO, OR, STOPPING OVARIAN CANCER BEFORE IT STARTS

UND researchers explore the link between radon exposure and ovarian cancer

A first-of-its-kind study published by University of North Dakota researchers recently in *JAMA Network Open* reveals a significant association between residential radon gas—a common, modifiable environmental hazard—and an increased risk of ovarian cancer incidence and mortality among postmenopausal women.

The prospective cohort study, led by researchers at the UND School of Medicine & Health Sciences (SMHS) and the University of North Carolina at Chapel Hill, analyzed data from over 127,000 women participating in the Women's Health Initiative (WHI) over a 31-year period. The findings suggest that women living in “high” radon zones, as defined by the U.S. Environmental Protection Agency (EPA), face a significantly higher risk of developing ovarian cancer compared to those in low-exposure areas.

A novel approach

According to the Ovarian Cancer Research Alliance, ovarian cancer remains the fifth leading cause of cancer deaths among women in the United States. While genetic factors and reproductive history are well-known risk factors, environmental causes have remained elusive.

“We have known for decades that radon is a leading cause of lung cancer, but its impact on other organs has been a subject of intense debate,” said Mark R. Williamson, research assistant professor in the SMHS Department of Population Health, and lead author of the study. “This research provides the first individual-level evidence that the ionizing radiation from



radon gas may be a target for mitigating ovarian cancer risk.”

The research team linked geocoded home addresses of 127,547 postmenopausal women to US Geological Survey (USGS) radon zones. Over an average follow-up of nearly 18 years, the study observed 1,645 ovarian cancer cases and 1,048 ovarian cancer deaths.

The study found that women in high radon zones (levels exceeding 4 picocuries per liter [pCi/L]) had a significantly higher “hazard ratio” for ovarian cancer compared to those in low radon zones (<2 pCi/L). The association was particularly strong for serous ovarian cancer, the most lethal and common type, with a 38% increased risk in high radon areas. Even more, the risk of dying from ovarian cancer was also 31% higher for women residing in high radon zones.

Colorless, odorless

Radon is a naturally occurring radioactive gas produced by the decay of uranium in soil. It enters homes through foundation cracks and can accumulate to dangerous levels. While primarily inhaled, radon gas is soluble in blood and can reach internal organs.

For this reason, the study posits two biological mechanisms for the association between radon and ovarian cancer. First, as radon decays, its “progeny” (solid waste products) may be carried to ovarian tissues via particulate air pollution, acting as a “Trojan horse” to deliver alpha-particle radiation directly to the cells. At the same time, previous research has indicated that radon inhalation can significantly increase levels of estradiol and other hormones in the blood, making radon a hormone “disruptor,” the consequences of which can include cancer.



Dr. Gary Schwartz (left) and Dr. Mark Williamson in UND's Experimental Radon Chamber in Grand Forks.

Unlike many genetic risk factors for cancer, though, radon exposure can be mitigated through radon testing and removal. Unfortunately, noted Gary Schwartz, professor and chair of the SMHS Department of Population Health, only about 18% of U.S. homes have ever been tested for radon, despite approximately 25% of the population living in high-radon areas.

“Residential radon is a ubiquitous exposure, but it is one we can control,” said Schwartz, who was senior author on the study. “If these findings are replicated, radon testing and mitigation could become a vital component of ovarian cancer prevention strategies.”

Next steps

The researchers cautioned that while the study is robust, it focused exclusively on postmenopausal women. Additionally, because the radon data was based on regional estimates rather than individual

home tests, the results may not reflect personal exposure levels for every participant. Even so, Williamson and Schwartz said that the next step is further research, which is already underway at UND. The pair is hard at work finalizing a radon test chamber at UND – one of only a few in the country – that will enable area researchers to test the effects of radon on cells directly.

The team is pursuing all of this because, as this new research demonstrates, lives are at stake.

“If we can change a common exposure and do things like make sure new homes have radon resistant construction and make sure women at high risk for ovarian cancer check their radon levels and change them,” Schwartz concludes, “we’d be saving lives.”

By Brian James Schill

MORE SIGNAL, LESS NOISE

UND researcher Motoki Takaku improves cancer detection and treatment by strengthening a cell's signal-to-noise ratio

Talking epigenetics, Dr. Motoki Takaku mused from his office at the UND School of Medicine & Health Sciences (SMHS) that studying what's happening inside a cell is a bit like tuning a radio: there's signal, and there's noise.

Sometimes a lot of noise.

And all too often, he said, this noise interferes with researchers' ability to see cellular functions clearly – at least at the genetic level.

"We're trying to improve our ability to identify these signals so that our precision will be much higher," explained

Takaku of his efforts to develop better DNA-based biomarkers and treatments for cancer. "If we can make these signals much cleaner, that will eventually lead to more confident diagnoses."

Cell-free DNA

Fortunately, for both providers and patients, that work is finally getting at least a bit easier, Takaku said, not only due to evolving technologies in the science of epigenetics, but through the study of something called cell-free DNA (cfDNA).

Cancer is the result of genetic changes within cells and tissues, of course. When the altered cells that produce cancer are released by a tumor and enter the bloodstream, though, cancer can metastasize or spread. But even when cancer doesn't metastasize – in fact, when the cancer itself dies – it can leave fragments of altered DNA,

separate from any cancer cell, in the patient's blood or urine.

It's this cell free (or circulating free) DNA that, Takaku said, can now be isolated and analyzed in serum samples, aiding in the early detection and more effective treatment of cancer.

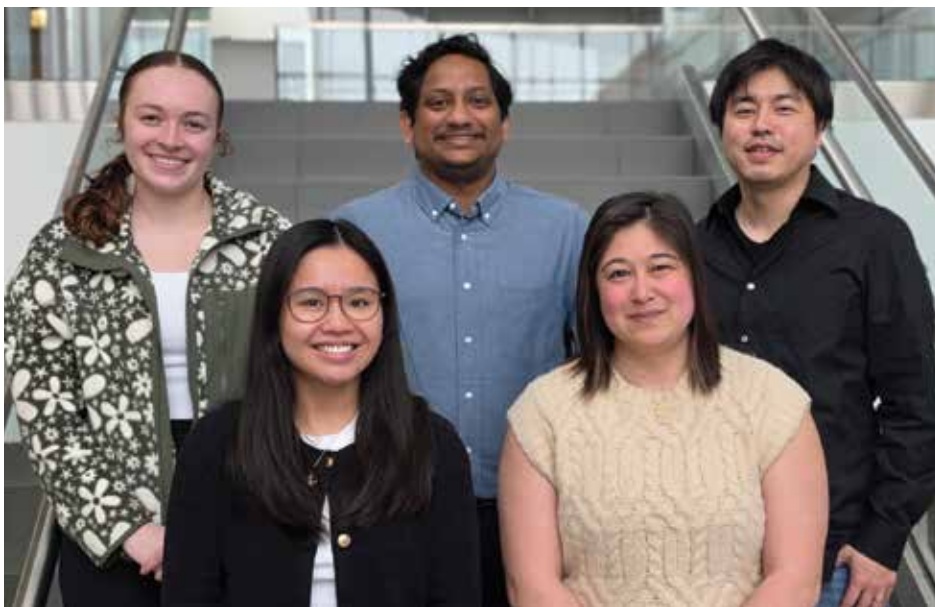
According to the results of a study recently conducted by Takaku's team, in collaboration with Dr. Mamoru Takada at Chiba University in Japan, the pre- and post-treatment analysis of the cfDNA in cancer patients' blood can tell health professionals more accurately how various chemotherapies are working among patients with different genetic profiles.

"We profiled cell-free DNA from more than 70 breast cancer patient samples and identified clear differences between breast cancer patients and healthy donors, as well as between patients before and after treatment," Takaku said of the paper his team published in the *Nature*-affiliated journal *Communications Medicine*. "We also observed patterns that may help distinguish between drug-resistant and drug-sensitive cases. These findings obviously have potential clinical implications."

Such implications include providers improving the likelihood of stopping cancer by getting patients the right treatment sooner by knowing if a certain therapy is or isn't working.

Assessing chemotherapy

Put differently, because cfDNA patterns change after treatment and differ between patients undergoing the same treatment, cfDNA appears to serve as a simple biomarker that can help providers



Members of the Takaku lab at UND: Left-to-right are Paige Bonnet, Regina Nguyen, Sakuntha Gunarathna, Aerica Nagornyuk, and Motoki Takaku.

monitor treatment efficacy, predict patient response, and support personalized cancer care.

In this case, said Takaku, the research team explored how the chemotherapy drug abemaciclib affected the cfDNA of breast cancer patients.

Known as a cyclin-dependent kinase (CDK) inhibitor, abemaciclib works by dampening the function of the kinases (CDK4/6) in the cancer cells that affect the cell division process, slowing cancer growth.

“We tried to analyze the difference between the DNA sequencing patterns before and after the treatment of this particular drug, and we saw some important changes,” Takaku smiled. “This suggests that we can use this DNA-based technique to monitor the changes happening in the cancer cells. This will affect each patient’s treatment, allowing us to see who responds well to this drug versus who doesn’t.”

Meaning, Takaku said, cfDNA could serve as the basis for a new blood test that more effectively monitors the effects and

efficacy of not only abemaciclib but any number of chemotherapies.

“Researchers are desperate to have a better way to predict tumor origin and also better detection for when tumors are small,” the researcher continued. “Because when you surgically remove tumors, we want to have a way to detect the added signs of metastases or recurrence. That’s why we’re trying to develop the new method.”

From noise to signal

All of which gets us back to the notion that the body itself is a type of radio full of both noise and signal. Calling DNA a “very noisy” environment, Takaku offered that the next step in improving cancer treatment is improving the signal: clearing away the noise to truly see how cancer or the medications that kill it affect cellular function.

“Because each person has different reasons for their own genetic ‘noise,’ right?” Takaku said. “It could be a sign of infection, or maybe someone has ongoing inflammation because of their exposure to a certain viruses. Or maybe it’s just pain.”

The key is understanding the reason for cellular noise, which often affects the “signals” in question.

“Once we start isolating these individuals’ noise, it might start making more sense for us.”

To that end, Takaku concluded, his team is exploring the process of the commercialization of a host of potential products, including the use of nanotechnology in the body.

“We are actively developing a nano device to purify the DNA,” he said. Such a device, if approved, would allow the user to “wash” the DNA in a given blood sample, clearing out the noise and allowing the researcher to see cellular processes with a minimum of static.

All with a minimum of resources, which can only benefit smaller, resource-strapped health systems.

“I feel this will be very useful for rural health because if smaller hospitals don’t have fancy machines or a big laboratory, we can provide this nano device, or they just need to send a couple of drops of blood to us and we can purify the DNA [for analysis],” Takaku said. “Our initial study used very local blood samples – patient samples coming from North and South Dakota. Establishing a strong collaboration with our local hospitals is very important for me, so that we will have access to patients. I want to help all the patients in our state and advance a way to detect cancer better.”

By Brian James Schill



“I’ve had so much support from the larger community and the people here at the School. You can see it in the room. Everyone is so excited for each other and this class is super close. UND has that [camaraderie] in ways that a lot of other places just don’t.”

MIRIAH FORNESS

M.D. Class of 2026
West Fargo, N.D.



Graduating UND medical students recently learned where they're going for residency, courtesy of the National Resident Matching Program

Each year, graduating medical students looking to enter a medical residency, a three- to seven-year period of advanced intensive training in their chosen specialty, apply to the programs of their choice via the National Resident Matching Program (NRMP).

The NRMP then uses a mathematical algorithm “to match applicants and programs to their most preferred ranked choices to make the best possible match for all participants,” as the NRMP website puts it.

In March, students at medical schools across the United States learned where they will complete their post-graduate residency in order to begin independent practice as a physician-specialist. At noon (EST) on Friday, March 20, 2026, residency matches were given out to more than 44,000 medical students in the United States out of a total of more than 53,000 applicants – the largest Match Day cohort in history.

Match Day 2026 By the Numbers

100%

Match rate for M.D.
Class of 2026

16

Different specialties
represented in this year's
residency match

46%

M.D. Class of 2026
entering Primary Care
specialties

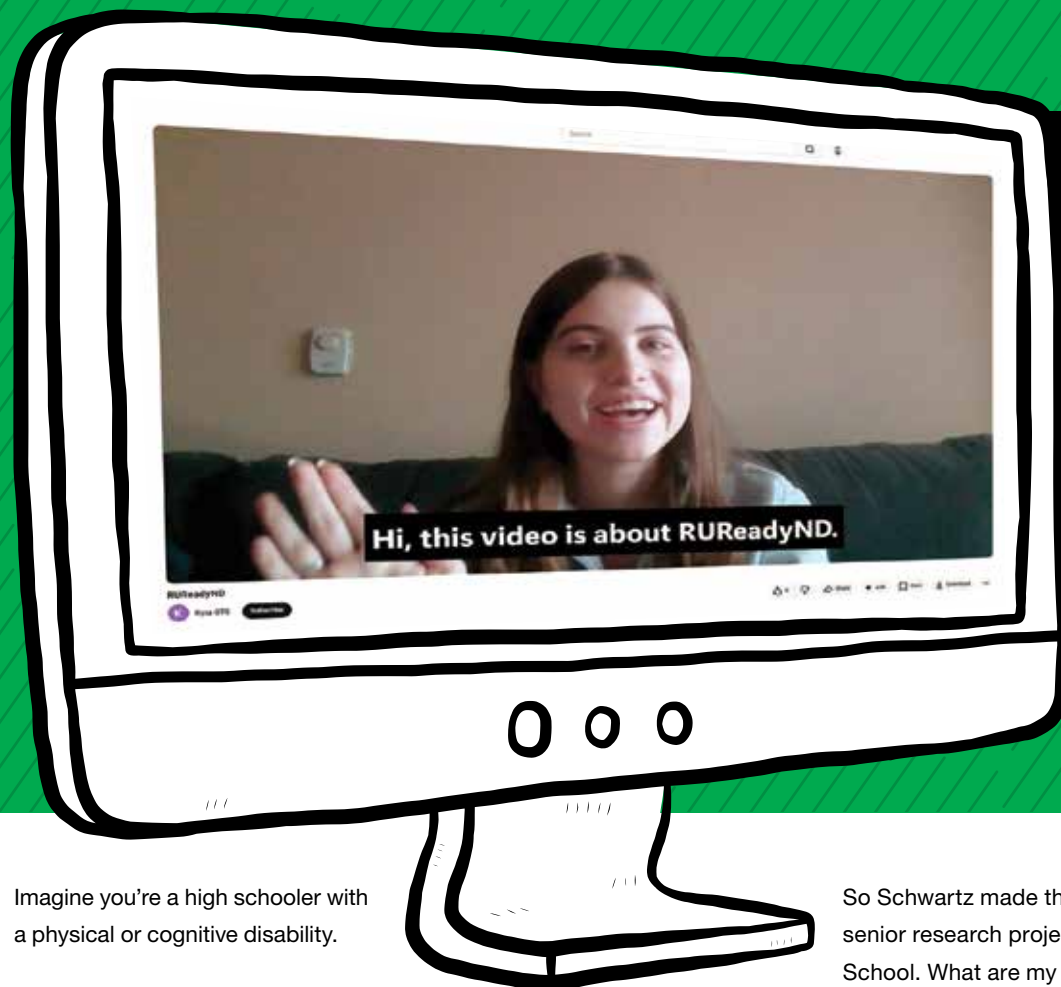
24

Total Family Medicine
and Internal Medicine
matches combined

Scan the QR code
to see more
Match Day 2026
pictures from
across North Dakota!



SERVICE / LEARNING



UND
occupational
therapy grad
Kyra Schwartz
puts theory
into practice for
persons with
disabilities in
North Dakota

Imagine you're a high schooler with a physical or cognitive disability.

While support services are, by law, available in the school setting, what do you do once you graduate, particularly if you're not inclined to attend college as you build an independent life as an adult?

The question had nagged at Foxholm, N.D., native Kyra Schwartz – who has a family member on the autism spectrum – since her first year in the UND School of Medicine & Health Sciences Occupational Therapy Doctorate (OTD) program.

“Six years after high school and my family member is still awaiting ‘next steps’ while in limbo at home,” Schwartz said. “This topic came about because I don’t want other students to fall through the cracks.”

So Schwartz made the question the focus of her senior research project. “‘Okay, I’m leaving High School. What are my options?’” Schwartz asked rhetorically, assuming the voice of a soon-to-be

high school graduate. “We found that there’s a gap between the resources out there for students versus non-students, and the resources don’t align from in high school to out of high school. So we developed materials that can help get some of these resources to either parents or young adults, to give them a starting place for moving forward after they graduate.”

Post-graduate disability resources

Those materials are now available both online and in schools not only in Ward County but across North Dakota.

Collecting such resources was necessary, explained Nicole Strand, director of Special Education for Minot Public Schools, because even if the Individuals with Disabilities Education

Act (IDEA) and the Americans with Disabilities Act (ADA) mandated disability support for youth in certain settings, much of that support vanishes once people hit age 18.

“What Kyra has done is put together a really nice collection that has everything right there,” said Strand, who served as Schwartz’s community partner in Minot. “If a parent, a teacher, or even a student or an outside agency were to pick it up, they would be able to look at this document and say, ‘Oh, here’s a section on employment.’ It’s got all the contact information people need.”

Strand is referring to the brochure Schwartz developed that utilizes QR codes directing users to a variety of papers, websites, and videos (recorded by Schwartz), all of which help current and former students understand what resources are available for them as they transition out of the school setting and into the “real world.”

One QR code, for example, sends viewers to a video of Schwartz explaining career and technical education options in North Dakota. Another links the Minot Public School District. A different video discusses mental health resources available in the Minot area specifically.

“It’s pretty much one stop shopping,” smiled Strand.

Service and experiential learning

In the teaching world, such projects are known as “service” or “experiential” learning. Like medical students engaged in clinical rotations, such programs get students of all disciplines out of the classroom and into the community to acquire on-the-ground training with the populations or problems they’re likely to face as professionals. In so doing, they also often help meet community needs.

In the case of OT, service and experiential learning are embedded in UND’s OT curriculum from day-one. This is not only because the literature suggests that students learn better with hands-on and more “purposeful” training, said UND Department of Occupational Therapy Graduate Director Anne Haskins, but because the communities that house public institutions like UND benefit as much – if not more – from such partnerships than students.

“It’s a win-win-win, where all of the good work that students and the people who are already working in the field are doing moves forward,” said Haskins. “That way it’s not a question of: will this thing work? Instead, it’s actually built for the communities where it’s intended to work, which is amazing.”

Nodding in agreement, Julie Grabanski, the doctoral experience capstone coordinator for UND’s OT team, added that her profession consistently emphasizes context, whether the OT in question is developing treatment strategies with clients facing an uphill climb after an injury or seeking authentic and collaborative experiences with students and community partners like Strand.

“Not everybody knows what OTs do or understands the role of occupational therapy,” said Grabanski. “Every time we partner with an organization, whether it’s a community organization or a hospital or clinic, our colleagues learn more about OT. It’s our chance to give back to the profession and also advance it in all the different areas that OT could be a part of in any community, advocating for the role of OT on the interprofessional health team.”

Finding the gaps in policy

And because such projects often touch upon state or federal policy, Grabanski said that it’s common for students to end up working with local lawmakers.

That’s where North Dakota State Senator Jose Castaneda comes in.

“We have really good services across the board, but it can be difficult to navigate all this, especially as a parent,” said Castaneda, a policymaker representing Ward County who has been a mentor of sorts to Schwartz as she explored the legislative side of her project. “[Kyra’s] vision of matching up the right people with the right services so they know where to go to get what they need is important. The services for those under 18 versus over 18 don’t always match up. Kyra being able to make that connection to have a continuity of services is going to be an amazing help to the community.”

How did a legislator in Minot get involved in a UND occupational therapy project? “Crazy story,” Castaneda said. “Her mother cuts my hair. She’s been doing it for years, and we got talking one time, and Kyra’s project really piqued my attention. I said, ‘If she needs any help as she starts moving towards completing her thesis, have her get ahold of me.’”

So Schwartz did and today the new OT and the legislator are strategizing how they might go about updating North Dakota Century Code to better serve young people with disabilities.

“We just had a special session to discuss the federal money we’re getting,” added Castaneda, referencing the nearly \$200 million North Dakota received from the federal government

to address rural healthcare transformation. “She was able to come to one of those session days and was able to sit in a few of the committee meetings I was in to look through all this with legislators and help us understand it better.”

Because, the lawmaker said, if a fix to the law is simple and won’t cost taxpayers any extra money as it makes North Dakotans’ lives easier, there’s no reason not to do it.

To that end, the pair has their eyes on the next North Dakota Legislative Assembly session in 2027. “She’s found places where the Century Code could really be a lot better,” Castaneda said. “Things have changed, and oftentimes law doesn’t keep up. It needs to be fixed, especially if it’s something that is fairly common-sense. We just need to align with the times.”

Effecting change

Effecting change in the real world. This is exactly what Schwartz hoped to do with a degree from UND – and what her OT faculty designed UND’s program to enable.

“We have a few things in mind for this project once it ‘leaves’ UND,” said Schwartz, thinking of Castaneda. “The plan is to write a policy brief or a grant proposal that can be used long

term and bring forward to the legislators come January of next year. Nothing is set in stone as to the bandwidth of this grant; however, we’ve been discussing a grant in terms of maintaining the longevity of this project and keeping it up to date long term.”

On the phone from Washington, D.C., Castaneda agreed.

“Sometimes, change just means approaching people in different departments and saying, ‘Hey, we found this issue,’” the lawmaker concluded. “And I’ll tell you what: 99% of people are going to be open to a fix. They’ll say, ‘What can we do to fix it?’”

Greasing the wheels, says Castaneda, is the community-oriented character of occupational therapy.

“I like the fact that it’s so community-oriented. That’s something I haven’t seen before [from an academic project]. It’s unique and it’s going to be amazingly helpful to the average North Dakotan looking to find these services.”

Exactly what Schwartz and her faculty mentors had in mind.

By Brian James Schill

LEADERS IN ACTION: OT

Service learning is only part of the occupational therapy curriculum at UND. Our OT faculty also emphasize leadership training for all cohorts, starting with the course OT 541: “Developing Leadership Skills in OT.” After guiding students through the course’s leadership curriculum, faculty help students connect with and interview area leaders and ask students to design and present their work at the program’s annual Leadership Poster Session.

“Our students, as well as all healthcare providers, will be leaders for their clients and patients one day and will work as part of a healthcare team,” said Jane Loscheider, assistant professor of occupational therapy at UND who has coordinated the project since 2021. “By exploring their natural leadership talents and recognizing the talents of those around them, our students learn to lead and support others as they work towards a common goal.”



OTD students at the 2026 UND Department of Occupational Therapy Leadership Poster Session in Grand Forks

PATHWAY TO PRACTICE

How North Dakota health systems, educators, and legislators provide physicians to the state's rural areas

The success of rural healthcare starts with a critical factor: having the healthcare workforce in place to provide it. In their “outsized” roles, these trusted rural teams provide care at home and, when needed, get patients to additional services in urban centers.

But how does rural North Dakota find its healthcare providers — its doctors in particular? Perhaps the bigger question is how does it keep them?

The state's workforce experts know that finding and keeping physicians — referred to as “recruitment and retention” — is a process that must begin long before a practice contract is signed. The current collaborative efforts of the state's only medical school, several state government agencies, and the rural communities themselves involve several key elements: reaching students early to inspire healthcare careers, providing meaningful rural training experiences during medical school, and offering financial or service-based incentives that make practicing in rural communities more attractive.

Healthcare career beginnings

During the 2025 legislative session, state lawmakers tasked the UND School of Medicine & Health Sciences (UNDSMHS) leadership with a specific goal: 85% of students in the MD and Physician Assistant (PA) programs should be North Dakotans.

ND85, as the enrollment goal is now known, launched with a clear focus of reaching students in middle school, high



Left-to-right: Erik Christenson, CEO of Heart of America Health Center in Rugby, N.D., with Dr. Josalynne Hoff Rue

school, and early postsecondary years to build awareness, confidence, and readiness for a future medical career, preferably in North Dakota.

Emily Evers, UNDSMHS assistant director of admissions and recruiting and the public face of the ND85 outreach, is already at work.

“When I go speak to high schoolers, the message I want to convey is simple: you can do it,” Evers said. “Students are very focused on the present, and maybe not so much on what happens after high school, so communicating that their choices can have a massive impact on their future is important. My hope is that they recognize that UND has the only

medical school in the state, and getting there is possible.”

In addition to Evers’ work, a key part of ND85 is connecting with existing programs that already work to introduce students to healthcare careers. These include “scrubs” camps and academies offered to middle and high school students through the UND Center for Rural Health, as well as the student-led organization, HOSA Future Health Professionals, that now includes more than 1,000 North Dakota high school and college students exploring health career pathways.

Dr. Marjorie Jenkins, UNDSMHS dean, said ND85 is a reflection of her philosophy that North Dakota’s youth should

have early and sustained exposure to healthcare careers, allowing them to realize that a healthcare career is realistic and attainable, and the state's only medical school is the institution that can offer them a premier education.

"This initiative will serve North Dakota by strengthening the pathway of students who are motivated to practice in rural communities and meet the healthcare needs in our state," Jenkins said. "Improved rural recruitment and retention serves the entire state and keeps North Dakotans at the center of our work every day."

Train in rural, remain in rural

As several UNDSMHS officials noted, the literature demonstrates that keeping providers in rural settings begins with training them there. To that end, the School houses not only several medical student training programs focused on rural, but three residency programs that provide training designed to encourage physicians to stay in rural North Dakota.

The first two post-graduate programs, known as Rural Training Programs (RTPs), are offered through the Minot and Bismarck family medicine residencies. Partnering with the communities of Williston and Hettinger, residents in Minot and Bismarck begin their training on these two urban campuses before transitioning to the rural hospitals for their second and third years.

The third program is the UND Rural Surgery Track, the designation for rural-specific training within the UND General Surgery Residency program. Dr. Stefan Johnson, program director, emphasizes the essential rural skills of the specialty.

"Rural general surgeons have been described as the lynchpin in the delivery of comprehensive rural healthcare," he said. In addition to general surgical procedures like removing an appendix or taking out a

gallbladder, surgeons also provide other procedures like colonoscopies for colon cancer screenings and trauma care for injuries caused by sports, vehicle, farm, or ranch activities.

Leaders in these programs shared their positive results: the Rural Opportunities in Medical Education program has kept nearly 60 of its former participants in North Dakota for practice while 70% of UND rural surgery track graduates practice in rural areas — a higher percentage than other similar U.S. programs. To date, 15 rural surgery track graduates practice in North Dakota.

Financial investments

While UNDSMHS ranks as a top U.S. program for affordability, total in-state resident medical school tuition still hovers around \$235,000. However, several options are available for physicians interested in managing those expenses by practicing in rural North Dakota.

One option is through loan repayment programs, administered by the North Dakota Primary Care Office (PCO), which is part of the state's health department, Health and Human Services North Dakota. These programs offer anywhere from \$50,000 to \$100,000 of loan payment in exchange for two to five years of service in a rural North Dakota community. Another program — created by the 2010 state legislature and known as the RuralMed program — "forgives" medical school tuition if the participant provides five years of rural practice following residency training.

Again, results show these programs work. Over the past 15 years, RuralMed has realized 50 participants. Dr. Josalynne Hoff Rue is one of them.

A 2016 graduate of UND SMHS, Hoff Rue said that RuralMed was central to shaping

her family medicine career path. A relatively new program when she entered medical school in 2012, the program offered a dollar amount tied to years of education and Hoff Rue decided to participate in order to begin practicing medicine without the weight of student loans.

"The ability to avoid a high debt load early on is what allowed family medicine to make financial sense," she said, noting that the decision also aligned with both her professional and personal goals, including raising her family in a rural community. Also, her spouse, a pharmacist, works in the same health system, further strengthening the local workforce.

Following residency at the Bismarck Family Medicine Residency Program, Hoff Rue began her five-year RuralMed commitment at Heart of America Medical Center (HAMC) in Rugby. Seven years later, she's still there—not only as a physician but serving as community faculty for UNDSMHS by continuing the mentorship cycle that influenced her own career.

"Although I had great urban mentors in medical school and residency, those in rural areas really invested in my training," she said. "They gave it their all and made such a difference in my life and career. Now, I want to be that person for current students."

Not just local care, but *quality* care

The results are irrefutable. Rural residents benefit from local care provided by the RuralMed alums practicing in their towns. However, healthcare administrators like Heart of America's CEO Erik Christenson note something else about that care: its quality.

"The [RuralMed] program allows us to recruit physicians trained at the highest level of clinical expertise, like Dr. Hoff Rue who is at the top of her field," Christenson said, acknowledging that RuralMed was an

integral part of bringing Hoff Rue to Rugby. “She’s also dedicated to our community and willing to lead our medical staff to their highest level.”

As an aside, Christenson said he’s been able to use other loan repayment programs to recruit nurses, nurse practitioners, physician assistants, and other healthcare providers for rural healthcare. State programs like “Career Builders” and North Dakota Department of Commerce workforce development grants provide similar incentive structures for a range of healthcare professions, ensuring that rural communities have access not only to physicians, but to the full interdisciplinary teams required to sustain care delivery.

A faster track to rural practice

Those involved with North Dakota’s recruitment and retention programs recognize that there’s a never-ending need for innovation, and a recent philanthropic gift through the Joe and Norma Peltier endowment supports that innovation.

The Primary Care Accelerated Track (PCAT), a new program slated to launch in 2028, reduces time and decreases debt for select students choosing a primary care career. Medical school is completed in three rather than the traditional four years, followed by training in a North Dakota residency program, and a five-year service commitment to rural North Dakota.

Back in Grand Forks, Dr. David Schmitz, chair of the School’s Department of Family & Community Medicine and a national and state-level rural workforce expert, highlighted the broader importance of this investment in shaping the future workforce by clarifying the advantages of primary care.

“Family physicians meet patients’ most immediate needs, from delivering babies to responding to trauma, making them essential to rural healthcare,” he said.

“Family physicians meet patients’ most immediate needs, from delivering babies to responding to trauma, making them essential to rural healthcare.”



DR. DAVID SCHMITZ

Chair, Department of Family & Community Medicine

“The Peltiers’ generosity is helping us ‘train our own and grow at home,’ a key element in building North Dakota’s healthcare workforce.”

Taken together, North Dakota’s recruitment and retention efforts reflect a clear theme: rural workforce stability is built over time through coordinated strategies and strong partnerships and innovation. With the resulting alignment of education, medical training, financial support, and state legislative efforts, high-quality rural healthcare delivered by clinicians committed to staying rural benefits all of North Dakota.

By Stacy Kusler

THE FUTURE HEALTHCARE TEAM

North Dakota HOSA helps cultivate tomorrow's health profession students today



This March, middle and high school students from across North Dakota gathered in Grand Forks to practice their leadership skills, connect with like-minded peers, and showcase their knowledge of healthcare. These students are all part of North Dakota HOSA, an organization that aims to introduce youth to opportunities in healthcare professions and to build their confidence and passion for the field early on.

The State Leadership Convention (SLC), held each spring, is the largest statewide event of the year for HOSA. The three-day conference offers over 60 competitive events dedicated to service, leadership, and health science. Top competitors earn the opportunity to compete at the international level, representing North Dakota on a global stage. In addition to the competitions, students engage with post-secondary institutions, healthcare employers, and community partners.

“Students benefit from hands-on skills opportunities, competitive experiences, and networking with healthcare professionals and educators,” said Brandy Madrigal, the state HOSA advisor for North Dakota. “Our organization also makes great efforts to provide opportunities for recognition through service awards and scholarship opportunities. HOSA helps students build both the technical and professional skills needed to succeed in healthcare careers.”

Opportunities for all ages

HOSA activities are targeted for each chapter level: middle schoolers, high schoolers, and post-secondary members. Middle school members are introduced to healthcare careers and begin building foundational leadership and teamwork skills. High school students have more expanded opportunities for competitive events, holding leadership roles at the local

chapter and state levels, and involvement in community service. Likewise, post-secondary members have a higher focus on professional development, networking, and preparing for entry into the healthcare workforce or graduate programs.

At the core of ND HOSA are the local chapters, which work year-round to engage students with educational and service opportunities in their own backyards.

Marley Foss, a sophomore at Oakes High School, has been a HOSA member for two years and was re-elected at SLC to serve as ND HOSA's State Secondary Vice President for the 2026-27 term. Foss says HOSA has taught her not only about career opportunities in healthcare but also helped her build lasting friendships, strengthen soft skills, and create lasting memories.

“At first, I was a little skeptical about running for office, but my advisor encouraged me to do it. Over time, I became more confident and outgoing,” Foss shared. “I’ve developed leadership skills that have helped me grow not only within HOSA, but also as a person outside of it.”

With HOSA's strong impact on her high school career, Foss is still weighing her options on what area of study she'd like to pursue. She plans to attend the University of North Dakota.

Nurturing our own

Madrigal, who has been the state advisor since 2023, is responsible for developing and implementing statewide HOSA events. Her advisor role is part of her work at the North Dakota Area Health Education Center (AHEC). The AHEC program office resides within the Center for Rural Health (CRH) at the UND School of Medicine & Health Sciences.



The top three winners in the Patient Care Technician competition celebrate at the HOSA SLC Awards Ceremony in March 2026.

Additionally, AHEC has regional centers located in Mayville and Velva, N.D. North Dakota AHEC provides the infrastructure, funding support, and program coordination to ensure HOSA can operate effectively in the state.

As part of the UND SMHS, North Dakota HOSA aims to support the North Dakota 85 (ND85) initiative: a goal that 85% of graduating physicians and physician assistants from the SMHS be in-state students. One of the ways SMHS works to reach this goal is by supporting programs that provide opportunities for North Dakota youth to become involved in healthcare at an early age and nurture an ever-growing passion for serving others.

“Engaging students in healthcare at a young age is essential to building a strong, sustainable workforce,” said Dr. Jacob Warren, director of CRH. “When young people are introduced to the wide range of careers in healthcare, they can begin to see themselves as future providers, leaders, and advocates. It sparks curiosity and builds confidence in pathways they may not have otherwise considered.”

Beyond HOSA, AHEC works to strengthen the healthcare workforce by offering additional career exploration opportunities, supporting clinical training through the AHEC Scholars and Clinical Rotations Programs, and focusing on improving access to care in rural and underserved communities in North Dakota.

Ever-growing leadership

Since 2020, North Dakota HOSA has experienced significant growth in both the number of community chapters and

members involved. In the 2020-21 school year, HOSA recorded a total of 294 members statewide. At the end of 2025-26, the organization boasted 1,065 total members. During the same time period, the number of middle and high school chapters increased from 15 to 26.

“We’ve been able to generate stronger partnerships across the state and increase education and awareness of HOSA to our stakeholders,” commented Madrigal on the growth of HOSA membership. “We’ve been so intentional in our efforts to expand access to HOSA across the state through increased outreach. Lastly, I believe with the stability in the state advisor role, I’ve been able to focus on assisting advisors, building rapport with them, and supporting them in creating meaningful experiences for students.”

Stacy Kusler, workforce specialist at CRH and associate program director for AHEC, agrees that the pathways that HOSA creates for youth in the state are irreplaceable in developing the next generation of healthcare workers.

“As HOSA gains traction in the state, more students have the opportunity to explore healthcare and whether it might be a career they want to pursue,” Kusler continued. “As North Dakota grapples with current and anticipated healthcare workforce shortages, HOSA is a beacon of opportunity for additional resources and partnerships to build upon this amazing program that has been quietly and effectively expanding across the state.”

By Jessica Rosencrans



SKIN IN THE GAME

Basir and Mohiba Tareen give \$5 million to North Dakota's only interprofessional school of medicine and health sciences to establish a Department of Dermatology

In May, the UND School of Medicine & Health Sciences (SMHS) announced a \$5 million gift commitment from the Mohiba and Basir Tareen family to establish the Department of Dermatology. The gift will also endow the Tareen Family Chair of Dermatology, strengthening specialty care and medical education for North Dakota and the broader Upper Midwest.

"UND has and will always hold a special place for me and my family," said Dr. Basir Tareen. "It gave me my education, and my father, Dr. Jamil Tareen, taught students here for many years while serving as a rural surgeon in Cavalier, North Dakota. This gift honors the legacy of physicians who dedicate their lives to rural communities and helps ensure the next generation of doctors continues that tradition."

A 2002 UND graduate, Basir Tareen is a urologist with Minnesota Urology in the Twin Cities. He is also the founder of Tareen Development Partners, a national real estate development firm focused on building and preserving affordable housing communities across the United States. Basir's father, Jamil Tareen, served as a rural surgeon in

Cavalier for more than 35 years, caring for generations of patients in northeastern North Dakota and mentoring medical students throughout his career.

For Mohiba Tareen, the gift represents an opportunity to advance both dermatology education and patient care across the state.

"Dermatology is my passion, and to be able to bring dermatology and specialty care to better serve North Dakota is a lifelong dream," said Mohiba, a board-certified dermatologist who founded Tareen Dermatology in 2011 in Roseville, Minn. "We are honored to help the University and excited for what is to come."

The Tareen family's gift aims to help address the growing need for dermatology specialists in rural and underserved communities while strengthening UND's ability to train future physicians.

University leaders say the gift represents a transformational investment in UND's School of Medicine & Health Sciences

“I am grateful that through Mohiba and Basir’s vision, more individuals and families across North Dakota will have access to the kind of expert care that truly changes lives.”

ANDY ARMACOST

UND President



**SCAN TO LEARN MORE ABOUT
PHILANTHROPIC OPPORTUNITIES AT THE
UND ALUMNI ASSOCIATION & FOUNDATION**

and will significantly strengthen the university’s ability to expand specialty training in North Dakota.

“This amazing gift reflects Mohiba and Basir’s deep commitment to higher education and connection to family. It shows gratitude for the opportunities that shaped their journey, a profound connection to a purpose greater than themselves, and a dedication to driving meaningful change to strengthen communities,” said UND President Andy Armacost. “I am grateful that through Mohiba and Basir’s vision, more individuals and families across North Dakota will have access to the kind of expert care that truly changes lives. The impact of their special gift will be felt for generations.”

“The Tareen Family Chair of Dermatology will provide permanent support for a nationally recognized physician-leader who will help build the new department, lead research initiatives, and train future dermatologists at UND,” said Dr. Marjorie Jenkins, dean of the SMHS and UND’s vice president for Health Affairs. “The gift will also support the development of dermatology education, clinical training, and research at

UND while expanding access to specialty dermatologic care across the region.”

By establishing a Department of Dermatology and an endowed chair, said Jenkins, the Tareen family’s gift will help position UND as a regional leader in dermatology education.

DeAnna Carlson Zink, CEO of the UND Alumni Association & Foundation, agreed.

“It is wonderful to see the Tareen family not only establish an endowed chair through this remarkable gift but also help create a much-needed Department of Dermatology within the School of Medicine & Health Sciences,” said Carlson Zink. “By creating an endowment, their generosity will live on in perpetuity—supporting today’s medical students, future physicians, and the patients they will one day serve. This gift is a powerful example of legacy, vision, and the lasting impact philanthropy can have for generations to come.”

By Milo Smith

WELCOME TO OUR NEWEST DEVELOPMENT DIRECTORS!

Greg Breitbach

“I’m excited to help the students, the donors, and the UND School of Medicine & Health Sciences achieve their shared goals,” said Breitbach, who will be based in Wisconsin. “I look forward to helping make a positive impact for UND every day.” Prior to joining the UNDAAF, Greg worked for nearly three decades as a coach, recruiter, and relationship builder at every level of college football.”

Faith Wahl

A former UND student body president, the Grand Forks-based Wahl is excited to begin building relationships with UND School of Medicine & Health Sciences alumni. “UND had a special place in my heart growing up as I drove from Bismarck to attend hockey games, athletic camps, and to see family,” said Wahl. “I’m so grateful to have a job that allows me to give back to the place and people that have given me so much.”



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School of Medicine & Health Sciences recognizes more than 200 graduating health sciences students

In addition to the dozens of new medical doctors who graduated from the UND School of Medicine & Health Sciences (SMHS) on May 2, the School recognized more than 200 students who graduated from its many health sciences programs on Saturday, May 16.

One such student is new physician assistant (PA) Tatjana Svjetlanovic, a Bismarck, N.D., native who is among the 29 new PAs who just graduated from UND.

"I chose UND because I completed my undergraduate education here and truly loved the atmosphere, the faculty, and of course, UND hockey," said Svjetlanovic, who is starting a career with the VA Health System. "I believe UND has prepared me exceptionally well for my career. I especially appreciated the program's strong focus on primary care and rural rotations, which provided valuable hands-on experience and helped shape my clinical skills. UND's PA program has some of the best faculty, who are genuinely invested in the success of their students."

UND's physician assistant program notwithstanding, health science departments represented at UND's Undergraduate and Graduate Commencement ceremonies this spring included not only five master and doctoral graduates of the School's many biomedical and clinical and translational science programs, but students from programs in medical laboratory science (74), occupational therapy (45), physical therapy (49), Master of Public Health (seven, plus another seven Public Health Certificate grads), and athletic training (one).



UND's 2026 Master of Public Health grads. Left-to-right: Jodi Hajicek (Spring), Rylee Bergeron (Spring), Madeline Sitting Holy (Spring), Joelle Fettig (Fall), Joshlyn Resek (Fall), and Eliana Malnourie (Summer).

For her part, Hannah SnoBeck, who hails from Grand Forks, N.D., took her Doctor of Physical Therapy (DPT) degree to MORGAIN Physical Therapy in Grand Forks.

"I had the chance to explore other states through my clinical rotations in the physical therapy program," said SnoBeck, who was on the UND Hockey cheer team. "I truly enjoyed those experiences – and ultimately my heart led me back home when applying for jobs. You can't beat North Dakota nice. The UND Physical Therapy program provides more than clinic-based skills mentorship: the faculty truly care about your success. I appreciated being on a first-name basis with the faculty because it showed the respect they have for us students and as future colleagues."

David Relling, P.T., Ph.D., senior associate dean for health sciences at the SMHS and longtime physical therapist, couldn't have said it better himself.

"We want to extend congratulations to all of the graduates of our many health sciences programs," added Relling. "They have completed rigorous educational programs and are well prepared to provide high quality, collaborative care in today's complex healthcare environments."

Scan the QR code to see photos from our programs' UND Commencement events.



Brisette named Assistant Dean for Graduate and Postdoctoral Studies at School of Medicine & Health Sciences

Dr. Catherine Brisette, professor in the UND School of Medicine & Health Sciences (SMHS) Department of Biomedical Sciences, has been named Assistant Dean for Graduate and Postdoctoral Studies at the School.

A veteran researcher focused on infectious disease – particularly the tick-borne *Borrelia burgdorferi* bacteria that cause Lyme disease – Brisette, who came to UND in 2010, has helped secure more than \$25 million in research dollars for UND. Much of this funding is connected to the School's Host-Pathogen Interactions (HPI) Center of Biomedical Research Excellence (CoBRE), a National Institutes of Health-sponsored project that allows institutions to focus their research efforts in a defined way. The HPI program is one of several NIH CoBRE program at the SMHS.

This growth in graduate and postdoctoral biomedical research at UND is part of

why the SMHS sought a senior faculty member dedicated to guiding and mentoring junior researchers.

"Our graduate students and postdoctoral scholars are essential to the research and discovery mission of the School, and I'm excited to support their training, mentorship, and professional development," said Brisette. "Graduate students and postdocs are the future of biomedical research, and I'm excited to help ensure that SMHS remains a place where they can do outstanding science and build fulfilling careers."

While the title is new, the work of shepherding graduate and postdoctoral researchers is not. For years, this task was managed by a platoon of SMHS faculty across programs. The new half-time role will ease the loads of other faculty and allow Brisette to facilitate mentoring

across SMHS departments and disciplines, fostering a supportive, inclusive, and high-quality learning environment that advances the school's purposes in education, discovery, and innovation.

"I'm particularly committed to strengthening mentorship and building a supportive research culture where trainees feel empowered to develop as scientists, scholars, and future leaders," said Brisette. "Effective mentorship and clear professional pathways are key to helping graduate students and postdocs reach their full potential."



Catherine Brisette, Ph.D.

UND School of Medicine & Health Sciences announces student and faculty award winners for 2026

The UND School of Medicine & Health Sciences (SMHS), presented a number of awards to its M.D. Class of 2026 medical students during its M.D. Commencement festivities on May 1 and 2. Several faculty were also honored with awards.

"As a community-based institution, our School depends on the dedication and support of our clinical community faculty statewide," said SMHS Dean and UND's Vice President for Health Affairs, Dr. Marjorie Jenkins. "We are deeply grateful to these physicians, many of whom are our alumni. Like those who came before these faculty, they provide invaluable teaching, training, and mentoring for our students and residents and work hard to help our School meet its purpose: To serve North Dakota, for the benefit of its people, and to improve the quality of their lives."

Faculty Awards

The winners of the Dean's Special Recognition Awards for Outstanding Clinical Faculty were:

- Supha Arthurs, M.D., Clinical Assistant Professor of Internal Medicine with Sanford Health in Bismarck
- Benjamin Axtman, M.D., Clerkship Director of Surgery with Sanford Health in Bismarck
- John Bassett, M.D., Clinical Associate Professor of Internal Medicine with Sanford Health in Fargo
- Dustin Evans, M.D., Clerkship Director of Surgery for our MILE program at Trinity Health in Minot
- Stacy Longnecker, M.D., Clinical Assistant Professor of Family Medicine with Ortonville Area Health Services
- Brett MacLeod, M.D., Clinical Assistant Professor of Internal Medicine with Altru Health System in Grand Forks
- Rachel Marohl, M.D., Clinical Instructor of Obstetrics & Gynecology with Essentia Health in Bismarck
- Amna Masood, M.D., Clinical Assistant Professor of Psychiatry with Sanford Health in Fargo
- Heidi Philpot, M.D., Clinical Assistant Professor of Family Medicine with Altru Health System in Grand Forks
- Michelle Placke, M.D., Clinical Assistant Professor of Family Medicine with Coal County Community Health Center in Beulah

The graduating medical student class also selected the following outstanding physicians-teachers at each campus:

- Timothy Pansegrau, M.D., Clinical Associate Professor of Surgery - Southwest Campus, Bismarck

- Kayla Estepp, D.O., Clinical Assistant Professor of Internal Medicine - Southeast Campus, Fargo
- Kathleen Gallagher, M.D., Clinical Instructor of Surgery - Northeast Campus, Grand Forks
- James Schmidt, M.D., Clinical Instructor of Family & Community Medicine - Northwest Campus, Minot

Student Awards

The North Dakota Medical

Association Awards

- Brailyn Weber, Fargo, N.D.
- Phillip Hoffarth, Shakopee, Minn.
- Cade O'Neill, Butte, Mont.

North Dakota Medical Association

Alliance Awards

- Abby Lund Da Costa, Grand Forks, N.D.
- Mikale Kuntz, Grand Forks, N.D.

North Dakota District Medical

Society Awards

- First District (Fargo): Brailyn Weber, Fargo, N.D., and Emma Weisner, St. Louis Park, Minn.
- Third District (Grand Forks): Lincoln Kranz, Horace, N.D.
- Fourth District (Minot): Annie Ferguson, Snohomish, Wash.
- Sixth District (Bismarck): Nolan Christenson, Alexandria, Minn.

University Alumni Special Awards

- Gretchen Anderson, Grand Forks, N.D.
- Jace Otremba, Lakeville, Minn.
- Jacob Tupa, Larimore, N.D.

Dr. John Wahl Memorial Rural Health Scholarship Endowment Award

- Katie Ruff, Ashley, N.D.

Kokila and Raman Patel, M.D., Family Practice Award

- William Fleck, Mandan, N.D.

North Dakota Academy of Family Physicians Award

- William Fleck, Mandan, N.D.
- Regan Lawrence, Stonewall, Manitoba, Canada



- Jonah Muller, Bemidji, Minn.
- Madison Seifert, Bismarck, N.D.
- Nicole Sinclair, Fargo, N.D.
- Rebecca Solloway, Glenburn, N.D.
- Jenna Steichen, Overland Park, Kan.
- Natalie Zinn, Lake Elmo, Minn.

George and Margaret Seaworth Scholarship Endowment Award

- Nicole Virgin, Woodbury, Minn.

Dr. Frank E. Stinchfield Award

- Brailyn Weber, Fargo, N.D.

Dr. Nadim and Rola Kanafani Koleilat Award

- Michael Burd, Grand Forks, N.D.
- Welsh Award
- Jace Otremba, Lakeville, Minn.

Lloyd S. Ralston, M.D., Memorial Endowment Award

- Gretchen Anderson, Grand Forks, N.D.

Altru Clinic Senior Medical Student Award

- George Beddow, Billings, Mont.
- Miriah Forness, West Fargo, N.D.
- Jacob Tupa, Larimore, N.D.

Tiongson Humanities Award

- Katherine Tomczik, Saint Cloud, Minn.

Dr. Louis B. and Thelma K. Silverman Medical Award

- Bailey Engesether, Bagley, Minn.

Preceptor Recognition Student Scholarship in honor of Dr.

Timothy Pansegrau

- Camille Klindworth, Beulah, N.D.

Glasgow-Rubin Award from the American Medical Women's Association (pictured)

- Jaelyn Baisch, St. Paul, Minn.
- Miriah Forness, West Fargo, N.D.
- Nicole Virgin, Woodbury, Minn.
- Brailyn Weber, Fargo, N.D.
- Natalie Zinn, Lake Elmo, Minn.

School of Medicine & Health Sciences Medical Education Scholarship

- Tatiana Roberts, Deland, Fla.

Robert C. Painter, M.D., Internal Medicine Award

- Wyatt Hahn, Hutchinson, Minn.

American College of Physicians–Department of Internal Medicine Mack V. Traynor Award

- Jaelyn Baisch, St. Paul, Minn.

Department of Obstetrics & Gynecology Senior Award

- Emma Weisner, St. Louis Park, Minn.

Department of Obstetrics & Gynecology Recognition

- Annie Ferguson, Snohomish, Wash.
- Kathryn Poolman, Duluth, Minn.
- Blair Stewig, Maple Lake, Minn.
- Alyssa Thielges, LaMoure, N.D.

Department of Neurology Senior Awards

- Gretchen Anderson, Grand Forks, N.D.
- Cade O'Neill, Butte, Mont.
- Kelly Reishus, Frazee, Minn.

Department of Pathology Recognition

- Chloe Bakkum, Moorhead, Minn.

Dr. Mike Schlosser Emergency Medicine Scholarship

- Mikale Kuntz, Grand Forks, N.D.

Bradley Neil Meyer, M.D., Diagnostic Radiology Award

- Nicholas Mathias, Kindred, N.D.

Dr. Erica Martin-Macintosh & Daniel Macintosh Scholarship

- Matthew Anderson, Apple Valley, Minn.

Department of Surgery Senior Award

- Carson Herbert, Thompson, N.D.

Michael Kaspari Recovery Award

- Carissa Amundson, Moorhead, Minn.

Richard P. Stadter Excellence in Psychiatry Award

- Phillip Hoffarth, Shakopee, Minn.

Joy M. Query Prize for Social and Behavioral Science

- Nolan Christenson, Alexandria, Minn.

The Gold Foundation Humanism in Medicine Honorees

- Gretchen Anderson, Grand Forks, N.D.
- Kajsa Anderson, Sebeka, Minn.
- Chloe Bakkum, Grand Forks, N.D.
- Michael Burd, Grand Forks, N.D.
- Lincoln Kranz, Horace, N.D.
- Nicholas Mathias, Kindred, N.D.
- Emilee Ohman, Grand Forks, N.D.

Alpha Omega Alpha Honor Medical Society Recognition

- Matthew Anderson, Apple Valley, Minn.
- Kajsa Anderson, Sebeka, Minn.
- Jaelyn Baisch, St. Paul, Minn.
- Autumn Bertch, Carson, N.D.
- Whitney Carriveau, Mankato, Minn.
- Bailey Engesether, Bagley, Minn.
- Devin Evavold, East Grand Forks, Minn.
- Miriah Forness, West Fargo, N.D.
- Rachel Guyer, Rochester, Minn.
- Carson Herbert, Thompson, N.D.
- Phillip Hoffarth, Shakopee, Minn.
- Cade O'Neill, Butte, Mont.
- Jacob Tupa, Larimore, N.D.
- Nichole Virgin, Woodbury, Minn.
- Brailyn Weber, Fargo, N.D.
- Emma Weisner, St. Louis Park, Minn.
- Natalie Zinn, Lake Elmo, Minn.

**Grant Edland, M.D.****Kristen Stenehjelm, M.D.****Justin Reisenauer, M.D.****Lori Wolff, M.D.****Dustin Leigh, M.D.****Anil Potti, M.D.****■ '20s**

Grant Edland, MD '20, is now at McKenzie Health in Watford City, N.D., as an allergy and immunology specialist. Edland provides comprehensive care for asthma, allergic diseases, and immune disorders in adolescents and adults.

Kristen Stenehjelm, MD '20, has joined the medical team at McKenzie Health in Watford City, N.D. Stenehjelm is board certified in Allergy & Immunology and Pediatrics.

■ '10s

Lori Wolff, MD '12, has joined Essentia Health-Mid Dakota's Bismarck 9th Street Clinic to practice walk-in care.

Dustin Leigh, MD '10, has joined the emergency medicine team at Essentia Health in Fargo, N.D.

■ '00s

Justin Reisenauer, MD '08, has been named to Becker's Healthcare's 2026 list of hospital and health system chief medical officers to know, recognizing leaders across the country who are driving excellence in clinical care, innovation, and organizational strategy. Reisenauer is Sanford Bismarck's chief medical officer.

John Lyng, MD '05, delivered the 71st Louis H. Bauer Lecture on May 18 at the Aerospace Medical Association and Undersea and Hyperbaric Medical Society Annual Scientific Meeting in Denver, Colo. The lecture recognizes leadership in aerospace and operational medicine.

■ '90s

RiverView Health will continue partnering with **Anil Potti, M.D.**, hematologist and medical oncologist with the Cancer Center of North Dakota in Grand Forks. Dr. Potti has been delivering services at RiverView since Nov. 2014. He completed an Internal Medicine residency at UND in Fargo in 1999.

Albert Marvin “Marv” Cooley, BS Med ’69, age 81, of Grand Forks, N.D., passed away peacefully at home on April 10, 2026, surrounded by his family. Marv was born on Aug. 17, 1944, in Grand Forks to Albert and Margaret (Fosmark) Cooley. He graduated from Central High School in 1962, where he enjoyed playing baseball and hockey. He was a proud member of the school's first state championship hockey team. He continued his education at the University of North Dakota, where he played baseball for three years alongside his younger brother, Alex. Marv attended the University of North Dakota School of Medicine and Health Sciences, completing his Bachelor of Science in Medicine, followed by clinical training at Northwestern University in Chicago, Ill., and graduating with his Medical Doctorate in 1971. He went on to complete an internship at the University of Tennessee before returning to Grand Forks to finish his residency in pathology at the University of North Dakota. He worked at Altru Hospital (formerly United Hospital) from 1978 to 2018, most notably as Medical Director of the Dak-Minn Blood Bank, and Director of the Laboratory. He was also a valued member of the faculty at the UND School of Medicine & Health Sciences from 1978 to 2015, serving as an Associate Professor and Chair of the Department of Pathology for several years. He was deeply committed to medicine and teaching future generations of physicians and health professionals.

Gregory L. Culver, FMR ’88, age 69, of Stanton, N.D., passed away Tuesday, Jan. 13, 2026, at CHI St. Alexius Medical Center, Bismarck, N.D. Gregory was born Sept. 19, 1956, in Fort Collins, Colo., to Clair and Lois Thompson Culver. He was a small baby weighing in at just over six pounds. Greg married and moved to Guadalajara, Mexico, to complete his family practice medical degree in 1983. For residency, Greg chose Minot, N.D., with the UND family practice program. After residency, Greg moved to Garrison, N.D., for a job as a family practice physician and surgeon. He later moved to Cando, N.D., and worked at the Towner County Medical Center for many years before later settling into Stanton where once again the hunting and fishing were a semi-priority. Greg was a commercial pilot and instructor in hot air ballooning, an author, an artist, a painter, and sculptor. Add to that an exhibitionist in parachuting. He even dug for dinosaur bones near Marmarth, N.D.

Randy Eken, 69, of Alexandria, Minn., passed away peacefully on March 22, 2026, surrounded by loved ones. Born on July 31, 1956, to Carol and Stanley Eken, Randy was raised in Mayville, N.D., where he graduated high school in 1974. Following graduation, he attended Mayville State University, where he played football and earned a degree in business administration in 1978. After marrying his late wife Janelle on June 18, 1977, they moved to Grand Forks where Randy began a career at the University of North Dakota School of Medicine and Health Sciences. He eventually assumed the role of Associate Dean of the UND School of Medicine and Health Sciences, a position he held until his retirement in 2017.

He took pride in his work and in contributing to an institution dedicated to improving the lives and health of the people of North Dakota. Randy was known for his dependable nature, his thoughtful perspective, and his ability to connect with people in a genuine and unassuming way. Those who knew him will remember his kindness, his steady presence, and the quiet way he showed he cared.

Karel Kristine Holten, MT ’55, died on Dec. 16, 2025, at Parks’ Place Memory Care in Plymouth, Minn. Karel was born on July 23, 1933, in Breckenridge, Minn., to Christina (Michels) and George Johnson. Raised in Wyndmere, N.D., she graduated valedictorian of her 1951 high school class. Karel attended the University of North Dakota where she earned a degree in Medical Technology in 1955. She was a proud Delta Gamma member, continuing friendships, gatherings, and Round Robin letters throughout the years with her DG sisters. Following graduation, Karel ventured to Seattle via train for a laboratory position as a Medical Technologist. On Easter Sunday 1957, Karel married Dr. John R. Holten in Wyndmere. The following year they moved to Moorhead, Minn., where John began his medical career.

John Reginald Jarrett, BS Med ’63, passed away on March 17, 2026, at the age of 86. He was born in Grand Forks, N.D., to Glenn and Margaret Jarrett. John attended the University of North Dakota, just down the street from the house he grew up in. He played quarterback and kicker for the UND football team and was a member of Sigma Chi fraternity. He finished medical school at Northwestern, general surgery at Marquette University, where he became fascinated with plastic surgery which lead him to study at St. Louis University. John was an accomplished surgeon who developed a surgical technique that was put into practice, taught through seminars, and published in medical textbooks. John gained exposure to sports from his father, who was a coach and athletic director at UND, which gave him a steadfast enthusiasm for sports and love of athletics. John had a sparkle in his eye whenever recounting football stories from high school and college.

Leland J. Larson, BS Med ’58, age 90, passed away peacefully on Monday, Feb. 2, 2026, in Tucson, Ariz. Leland was born in Moorhead, Minn., on July 28, 1935. He was the eldest son of Leland and Pearl Larson. His education took him through Moorhead High School, Concordia College, and the University of North Dakota and University of Kansas Medical Schools, followed by a radiology residency at the Mayo Clinic in Rochester, Minn. His radiology career included over 30 years of practice in Sioux Falls, S.D., at the Medical X-Ray Center, as well as several years at the Fargo, N.D., MeritCare Hospital.

René William Pelletier, BS Med '62, age 91, of Osceola, Wis., passed away on Monday, March 2, 2026. Born on Bastille Day (July 14), 1934, in Wallhalla, N.D., to Hector and Yvonne (Gendreau), René spent the next 91 years living an extraordinary life. He attended the University of North Dakota as an undergraduate and eventually was accepted to medical school there. While in medical school, he met the love of his life, Barbara Furin of Hibbing, Minn. They married on June 30, 1962, before heading to Portland, Ore., where René did his medical internship. Ultimately specializing in ophthalmology, René settled in St. Paul, Minn., as a partner in the St. Paul Eye Clinic, which continues to operate and grow across the Twin Cities.

Karen L. Robert (Lane), PA '00, age 74, of Neoga, Ill., passed away on Friday, Jan. 16, 2025, at her home surrounded by her beloved family. Karen was born on Oct. 16, 1951, in Mattoon, Ill., to William and Lillie (Hatten) Lane. Karen spent her life working in the medical field caring for others. She attended Olney College where she received her nursing degree. She later went on to attend the University of North Dakota, where she received her physician assistant license. She most recently worked in cardiology in Mattoon, St. Anthony's in Effingham, as well as family practice. Karen loved spending time with her sons. She enjoyed being out in nature. Her yard and her vegetable garden were a joy for her to care for. She also enjoyed spending time with her two furry pets Bear and Biltz.

Allan Bernhard Solum, BS Med '68, age 82, of Paynesville, Minn., passed to his heavenly home on Jan. 10, 2026, at the St. Cloud Hospital. He was born on April 25, 1943, in Hawley, Minn., to Gerhard and Lottie (Restad) Solum. He was raised on the family farm in Rollag and attended country school before moving with his parents to Moorhead at age 15. Allan graduated from Moorhead High School in 1961 and went on to attend Concordia College in Moorhead, where he earned a degree in biology in 1965. He began his medical education at the University of North Dakota, later transferring to the University of Minnesota, where he received his Doctor of Medicine degree in 1970. Allan completed his internship at St. Mary's Hospital in Duluth, Minn., before entering military service as a Lieutenant in the U.S. Navy.

Gordon A. St. Michel, OT '78, departed this world on March 17, 2026, at Baptist Health in Lexington, Ky. Born on Dec. 28, 1952, at the Naval Station Great Lakes in Illinois, Gordon succumbed peacefully after a valiant fight with a respiratory infection. He was 73 years old. Gordon's life was enriched by lifelong friendships and the camaraderie of colleagues and friends at Eastern Kentucky University (EKU). An accomplished scholar, Gordon earned an Associate of Arts degree in general education from Bemidji State University in 1973, a Bachelor of Science degree in occupational therapy from the University of North Dakota in 1978, and a Master

of Public Health degree from the University of Minnesota in 1985. Gordon's professional journey began in Minnesota, where he served as a staff occupational therapist in mental health settings. His passion for teaching and dedication to the field led him to academia, where he joined the University of North Dakota as an Assistant Professor from 1983 to 1988. In 1998, Gordon embarked on a pivotal chapter at EKU, where he taught for 24 years in the Occupational Therapy Department until his retirement in 2012, earning the honorary title of Faculty Emeritus.

Kevin Joseph Thorn, PA '02, age 57, passed away on Feb. 15, 2026. Born on Dec. 31, 1968, in Passaic, N.J., Kevin grew up in Fairfield, Mont., where he developed the strong character that would define his life. He earned his nursing degree from Montana State University immediately after high school and went on to graduate from the University of North Dakota School of Medicine to become a dedicated physician assistant. Kevin will be remembered as kind, friendly, strong, and deeply funny. Throughout his lifelong battle with Diamond Blackfan anemia, Kevin remained a determined fighter. His humor and warmth made those around him feel at ease, and his resilience inspired everyone who knew him. Kevin was a valued member of the Las Vegas medical community, caring deeply for his patients. He began his medical career as an ER nurse, working in a variety of healthcare settings. Kevin concluded his career with nearly a decade of service at Nevada Comprehensive Pain Center while navigating his own chronic health challenges with uncommon strength and determination.

Barbara Kathryn Youren, PA '78, died Feb. 9, 2026. Barbara was a beacon of kindness and compassion in the lives of all who knew her. Born in Okinawa, Japan, on a leap year day, Feb. 29, 1952, Barbara was the daughter of James Robert Burns and Joan Burns. Her early years were marked by a sense of adventure and curiosity, traits that would guide her through a life of remarkable achievement and service. Growing up in Clay Center, Kan., where she graduated second in her class, she excelled in drama and debate. Barb went on to a distinguished college career, first at Kansas State University, where she earned a Bachelor of Arts degree in sociology, graduating Cum Laude. Her passion for helping others then led her to pursue a Bachelor of Science degree in nursing from the University of Kansas, where she became a registered nurse. Barbara further advanced her medical career by becoming a family nurse practitioner at the University of North Dakota. Her commitment to healthcare was unwavering. Barbara dedicated her professional life to serving community health clinics, working at Terry Reilly Health Services, Valley Family Health Care, and St. Luke's Internal Medicine. Her colleagues remember her as a dedicated professional whose selflessness and dignity shone brightly in her work.



PARTING SHOTS

Did you attend a recent SMHS event, reconnect with classmates, or show your UND pride while out and about? We'd love to see it!

Share high-resolution photos for possible inclusion in the next issue of *North Dakota Medicine*. Photos from gatherings, reunions, professional milestones, or even snapshots of you wearing your UND gear are all welcome.

Submit your high-resolution photo(s) to med.UND.alumni@UND.edu for consideration and be entered into a **DRAWING FOR AN SMHS-BRANDED STANLEY TUMBLER.**

IN MAY, NORTH DAKOTA'S ONLY INTERPROFESSIONAL SCHOOL OF MEDICINE AND HEALTH SCIENCES CELEBRATED NEARLY 300 GRADUATES ACROSS OUR MANY PROGRAMS.

Scan the QR code to see graduate class photos and other scenes from our many commencement-related activities.



More than 300 faculty, students, post-docs, and staff convened at the UND School of Medicine & Health Sciences in April 2026 for the 46th annual Frank Low Research Day.



In May, Alyson White, administrative officer in the Department of Physical Therapy, was honored for her 50 years of service to UND!



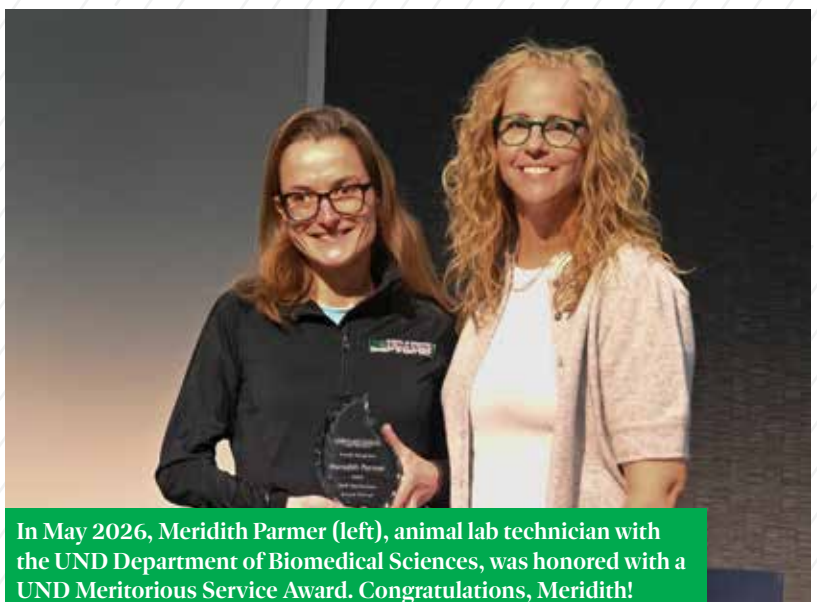
In May 2026, Ashley Bayne (left), assistant director of UND's Master of Public Health program, was named a 2026 Public Health Champion by the City of Grand Forks.



In April 2026, our longtime Simulation Center Operations Specialist Tim Shea retired after two decades at UND. We miss you, Tim!



UND Department of Medical Laboratory Science students and faculty at UND's Memorial Union in April 2026 recruited dozens of bone marrow donors for the National Marrow Donor Program.



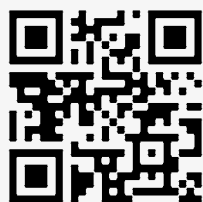
In May 2026, Meridith Parmer (left), animal lab technician with the UND Department of Biomedical Sciences, was honored with a UND Meritorious Service Award. Congratulations, Meridith!

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Photo by Bruce Kluckhohn, courtesy Minnesota Twins and Meet Minneapolis

For registration details,
scan the QR code or visit
med.UND.edu/events



AUGUST 10
UND Night at Target Field
Minneapolis, Minn.

SEPT. 28–OCT. 3
UND Homecoming 2026
Grand Forks, N.D.