“To receive everything, one must open one’s hands and give.”

~TAISEN DESHIMARU

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Nursing shortage. Those two words regularly pepper the headlines of newspapers across the country and illicit a palpable unease in readers nationwide. It only takes being a patient once to fully appreciate how critical nurses are to the fabric of our health care, and how compromised our system would be without enough of them.

As an academic health sciences center, it’s our public responsibility to ensure there are highly trained nurses available to work in our community and enough faculty members to teach them. It’s also our responsibility to ensure the nurses in our clinical settings deliver exceptional care to patients and their families.

At the University of Utah Health Sciences, I’m proud to say we do it all. It begins in the classrooms of the College of Nursing where students receive the highest quality academic and clinical training. It continues through research, where innovative practice models are developed that lead to improved health care. And it culminates in the hospitals and clinics, where our nursing staff provides highly specialized care to some of the most critically ill patients from throughout the Intermountain West.

As a physician, I know how much we depend on nurses to deliver the front-line care of our patients, from making sure that medications are properly dispensed, to alerting us to an almost imperceptible change in a patient’s condition. Everyone has a voice when it comes to patient care at University Health Care. And it’s this collaboration that drives our success.

It takes being a patient once to fully appreciate how critical nurses are to the fabric of our health care, and how compromised our system would be without enough of them.

Inside these pages, you will read about the compassionate care that our nurses have provided and see how they have enhanced the life, and death, experience of our patients—from the tiniest of premature infants, to those fighting end-stage cancer, to psychiatric patients needing nuanced care. I think you will be inspired.

Thank you for embracing our vision to develop leaders in health care. With your support, their work, discoveries, and voices are strengthening and transforming the health of individuals and communities worldwide.

A. Lorris Betz, M.D., Ph.D.
Senior Vice President for Health Sciences
and Executive Dean, School of Medicine
As we look at the growing nursing shortage and its impending ramifications for the future of health care, the responsibility of training tomorrow’s nurses by educating them today is very real for the College of Nursing at the University of Utah.

The shortage is really two-fold. Without doctoral degreed faculty to provide expert teaching and training, nurses cannot be educated. And the nursing shortage grows starker.

The College of Nursing is the only facility in Utah providing doctoral education (Ph.D. and D.N.P.) needed to prepare faculty experts in their field, who will then go on to educate highly-qualified nurses.

In order to meet these needs, the College of Nursing is focusing on three priorities:

1) Preparing Faculty—This will help us expand enrollment by preparing doctoral students to serve as faculty in all nursing schools across the state.
2) Increasing Access to Nursing Education—With distance delivery and scholarships, more students can receive their degrees from rural parts of Utah and all over the U.S.
3) Reaching Out to the Community and Beyond—Service learning enriches and expands the curriculum in nursing. Students work in many underserved communities and also have the opportunity to study abroad and learn health care delivery in other cultures.

Last year, the College of Nursing reached a remarkable milestone, the addition of the D.N.P.—Doctor of Nursing Practice, the first new degree designation in 30 years. This new program will prepare advanced practice nurses as well as community and organizational nurse leaders with advanced knowledge in population health, patient safety, information systems and leading interdisciplinary teams. These new nurse leaders will help transform the current health care delivery systems to better serve your needs.

Thank you for all you have done to support nurses and nursing at the University of Utah.

Maureen R. Keefe, R.N., Ph.D., F.A.A.N.
Dean and Professor
Louis H. Peery Endowed Professor
The Nurse. It brings to mind images of relief: a comforting hand before surgery, a listening ear at the bedside or a caring voice explaining a procedure. We depend on nurses in all aspects of our health care.

When patients are acutely ill, it is often their nurse who provides that continual thread of care and reassurance in a very stressful situation. The nurses throughout the University Hospital system are examples of this level of highly-skilled health care. We are the face that patients see, and we are their advocates.

Our nurses are among the “heroes” in a job that can be physically and emotionally draining. Because the University Hospital is an academic medical center and a level 1 Trauma center, we see the most critical injuries and patients who are gravely ill. In fact, every day we see patient conditions at this hospital that some nurses never see during their entire career.

Nurses at the University of Utah feel highly valued, and work collaboratively with physicians in a team-oriented environment. We are at the bedside 24 hours per day 7 days per week, and are seen as a big part of the patients’ safety net.

We are beginning a journey to be known nationally as the place that exemplifies professional nursing. We are unique to other hospitals in that the University Hospital functions as the clinical lab for the College of Nursing. Not only are we training the most specialized nurses on-site, we are able to utilize the latest methodologies because of the on-going research taking place right here, making this the best place to come for care.

We are at the bedside 24 hours per day, 7 days per week, and are seen as a big part of the patients’ safety net.

Most importantly, our patients benefit from this enhanced care model, especially the tiniest of our patients, premature infants. The University Hospital’s NICU unit has the highest survival rate in the nation.

I am amazed every day by the quality of nurses working here, and am so proud of the compassionate, exemplary care they deliver. During a recent nurses’ orientation, I asked the group why they had chosen to work at the University Hospital. Their response summed it all up—“I wanted to be surrounded by intelligence.”

Margaret Pearce, R.N., Ph.D.
Chief Nursing Officer
“Mom, I think my water just broke.” Those words, uttered in gut-wrenching panicked tones that summer night in 2001, at 27 weeks gestation, were just the beginning of a surreal, intense and frightening journey. Bridger Loyal Densely, not due until mid-November, was determined to make his entrance that August evening...13 weeks early.

Confusion and panic set in as we rushed frantically first to Alta View Hospital, where staff quickly determined that she was in fact going into early labor and they were not equipped to care for a baby that premature, so transferred her to University Hospital.

Once at University Hospital, staff worked to stabilize the situation and calm the contractions. The hope was that, even though a large amount of amniotic fluid had passed, with hospital bed rest and antibiotics to ward off infections, they could hold off the birth for a few weeks, unless the baby stopped moving.

Then, the news we all dreaded...an emergency c-section was necessary in order to save the baby as he had stopped moving and was in distress.

Standing at the foot of the bed, watching that final ultrasound and willing the baby to move, helpless tears streamed down my face. I stood still, unable to help my own child as she struggled to help her unborn child, or comfort our son-in-law, as we all tried to come to grips with the inevitable. The circle of life unraveling...layer upon layer of despair. The gentle touch of a compassionate nurse reaching across the bed and holding my hand offered reassurance and understanding.

Bridger was delivered a short time later, and passed immediately through the connecting window into the NICU unit, all 2 lbs, 14 inches of him - not much bigger that his father's large hand. Tissue paper thin skin, eyes still not able to open, crying like a little weak kitten...tubes coming out of him seemingly everywhere, while a machine breathed for him.

Incredibly skilled nurses, trained to take care of these most fragile babies, tenderly monitored every nuance and function of his tiny body. Holding him as gently
as possible to not injure his delicate skin or damage his soft, floating skull, changing impossibly small diapers, and drawing blood from his tiny feet.

The next three months were a roller coaster of hope and absolute despair, as we trudged through the journey of milestones and setbacks. Through it all our hospital hero was Dawn, Bridger’s primary nurse.

He required three transfusions that first week, followed by surgery to close a heart valve that was allowing blood to fill his lungs. Many times we all wondered if he had it in him to fight on, but he did. He was stronger than all of us.

“We will never forget the remarkable care Bridger received. The circle of life continues.”
Dawn was the reassuring calm of our storm. She celebrated Bridger’s successes, from gaining a few ounces because he was able keep down a teaspoon of breast milk given through his feeding tube; to realizing he could hear when he turned his tiny head towards his father’s voice and that he would have vision because the blood vessels in his eyes were growing towards his retinas. Each time Bridger was moved to a less critical level in the NICU, we rejoiced, as we knew he was progressing, and Dawn was there cheering us all on.

Dawn was always available, offering hope and a steadying voice, especially in those dark times when we thought there was none. She never held anything back, but delivered each day’s updates, good or bad, with sensitive finesse. She was truly the soul of our NICU journey.

Today, Bridger is one of the University of Utah’s NICU success stories. He is a happy, healthy, six-year-old, who enjoys life and is very curious about everything. Dawn has since moved, but continues to exchange annual Christmas greetings, and will forever be appreciated for her dedicated service. We will never forget the remarkable care Bridger received. The circle of life continues.
Bob Rice believed in giving back and being grateful for life, family, community and friends—and was loved with equal fervor by all who knew him.

Bob Rice’s open-armed style extended beyond his circle of family and friends, to envelope those who provided his health care at the Huntsman Cancer Hospital. The quality of care Bob received at the Huntsman Cancer Hospital was superb, from the highly skilled surgeons and physicians managing his care, to the state-of-the-art equipment, facilities and nursing staff. And, it was the nursing staff, aware of every nuance Bob and his family were experiencing, that helped make such a heart-wrenching experience transformative, as he was cared for with tender dignity in those final days and hours.

Of those nurses, a few stood out for the Rice family. For instance, Brad. Bob Rice, a life-long health and fitness advocate, was not a small man, even as ill as he was. While in rehab recovering from his first surgery, Bob was delighted upon meeting Brad, who assisted Bob with showering, providing great physical comfort. Harlan was another. A “big guy”, Harlan could seem kind of intimidating. But, not to Bob…Bob thought he was great. And then there was Sylvia. The level of care she provided for Bob was “eye opening” for one day while Joyce was gone, Jon Huntsman came in to visit Bob. Says Joyce, “He came in that day, and was so darling with Bob. The kids said that he leaned in to share in memories with his beloved wife, Joyce, a sense of peace permeates the room. The walls are covered, floor to ceiling, with photos and mementos of a long, productive life. Pictures of a happy, active, large extended family, including children, grandchildren, and great grandchildren, are everywhere. Interspersed with the photos are treasured University of Utah items, including a bright red U of U football helmet predominately displayed on a shelf behind his desk, glowing in the sunlight streaming in through the window.

Bob Rice believed in giving back and being grateful for life, family, community and friends—and was loved with equal fervor by all who knew him.

“Bob Rice believed in giving back and being grateful for life, family, community and friends.”
down and kissed him on the forehead and said ‘You know what, Bob? If anyone in this state deserves to be in this hospital right now it is Bob Rice, looking out over the campus you so love.’ That meant the world to all of us. That was truly wonderful. And I will forever be grateful to Jon for that.” It is this kind of personal attention that filters through all levels of care at the Huntsman Cancer Hospital.

Bob had a room facing out over the Salt Lake valley. One day his son pulled the bed over to the window so that his father could see his beloved stadium. Relates Joyce, “We enjoyed the sunsets and the sunrises. I remember the nights were so beautiful up there, and the moon…the beautiful big full moon.”

According to Joyce, “everyone there at the Huntsman Cancer Hospital was absolutely wonderful. The night before Bob passed there was a nurse we had never had before. She printed things off the internet for us to read from hospice. The information gave us suggestions on what we should be telling him at that particular time. I sat there by his bed that night talking to him and reassuring him that everybody was ready for him to pass on. I stayed there until he did pass on, although I didn’t think that I could, and I am so glad that I did,
because really…it was a beautiful thing. I thought, after all he did for us, and for our family, that was the least we could do for him.”

When asked what she wants people to remember, Joyce says “life is so fragile and we never know what each day holds. Live every day to the fullest and treat your loved ones the best that you possibly can.” She reminds us that “nurses are so important. Seeing first hand how they fill such an important role in the Huntsman Cancer Hospital, I can’t say enough how we as a family appreciated everything they did. We will forever be grateful.”
Lois Bailey, UNI’s Clinical Nursing Educator, discusses treatment protocol with a patient’s family member.
No one is immune to mental illness—it does not discriminate. Even so, mental illness can be perceived as a “dark corner”—often not acknowledged, or when it is, not discussed openly, and fairly. It’s “all just in your head” and you should “just snap out of it.” The University Neuropsychiatric Institute (UNI) at the University of Utah and its dedicated staff are determined to shine a bright light into that “dark corner” while providing a safe place to heal.

ElLois Bailey, Clinical Nursing Educator at UNI, and those she works with, are remarkable examples of how compassionate nursing care, combined with a structured therapeutic environment, can strip away those layers of shame. According to ElLois “when our patients first arrive, most are very anxious and do not want to be here, especially if it is their first time. But patients end up feeling that being treated at the UNI validates that mental illness is a true illness. It is a challenge for those who are depressed to get people to understand. This is the place where we acknowledge that this is an illness.”

UNI, located in University Research Park, is a full-service, 90-bed psychiatric hospital providing mental health and substance abuse treatment, for day therapy, or in-patient stays. And, it is the staff of dedicated physicians, therapists, nurses and technicians who provide the structured environment and therapies that are so essential to the successful treatment of mental illness related disorders.

ElLois Bailey, Clinical Nursing Educator at UNI, and those she works with, are remarkable examples of how compassionate nursing care, combined with a structured therapeutic environment, can strip away those layers of shame. According to ElLois “when our patients first arrive, most are very anxious and do not want to be here, especially if it is their first time. But patients end up feeling that being treated at the UNI validates that mental illness is a true illness. It is a challenge for those who are depressed to get people to understand. This is the place where we acknowledge that this is an illness.”

The University Neuropsychiatric Institute treats patients as young as four years old, up through elderly patients suffering from depression and dementia. It is a mixture of units for those needing short-term therapeutic stays, to those requiring placement in locked units.

Children and youth often have substance abuse problems, suffer from depression, and may even have attempted suicide, or they have major oppositional or behavior problems. Their unit is very structured with a system that bases privileges on behavior.
ElLois says that “seeing little children here for treatment can be hard. Many of the youth come from challenging circumstances or have difficult diagnoses. Some children have been abused, have no self esteem and are depressed.”

Adults benefiting from short-term stays can have issues with depression, too much life stress, or substance abuse. These patients are helped with group activities focusing on psychotherapy, music therapy, art therapy and recreational therapy, in addition to having individual meetings with their treatment team throughout the day.

Locked units are for patients who need enhanced medical assistance such as toileting, showering or eating, or for the most chronic patients exhibiting acute psychosis, who are often delusional. According to ElLoise, “these patients are tortured by what is going on inside their heads. They face auditory hallucinations; voices that tell them to hurt or kill themselves, or hallucinations to hurt somebody else.”

ElLoise notes that “the voices may never go away for some of our patients, but the quality of the voices helps us know they are getting better.” One patient related that “I know I am getting better because the voices are less mean.”

“I love seeing the patients get better. In any area of nursing seeing our patients get better is what feeds our souls.”
Treatment for mental illness disorders is not like going to a hospital for surgery, recovering and then the problem is fixed. Some patients need repeat treatment stays at the UNI, layering on levels of awareness in how to best treat their conditions. One common set-back happens when patients start to feel better and decide to go off medication, thinking that they don't need it anymore. According to ElLois, “I frequently have to tell patients that are hesitant to take medication, ‘if you were diabetic would you be hesitating to take medication?’ We teach patients how to solve problems, but patients have to do the work.”

Nurses tend to gravitate towards their area of specialty, where they feel the most connected and can see that they are making a difference. Because of this, says ElLoise, “we give really good care. All staff interacting with patients are very supportive. We never judge our patients—we just help them where they are, and help them learn what they need to do to cope with the life that they have and make better choices in the future.”

Even so, there can be very real challenges to being a psychiatric nurse. When asked how she can keep working within such an intense medical environment, ElLois states, “I love this! I love seeing the patients get better. In any area of nursing seeing our patients get better is what feeds our souls. Having a part in that is where the reward comes. We stay positive by focusing on the small steps.”
JOAN CRITCHLOW ANDERSON, M.D.

Joan and her husband, Roscoe B. Anderson, M.D., of Riverside, California, established the DR. ROSCOE B. ANDERSON AND DR. JOAN CRITCHLOW ENDOWED PROFESSORSHIP IN THE DEPARTMENT OF PATHOLOGY, and the DR. ROSCOE B. ANDERSON AND DR. JOAN CRITCHLOW ENDOWED SCHOLARSHIP IN THE SCHOOL OF MEDICINE. Both doctors were pathologists trained at the U. They took great pleasure in giving to their scholarship fund, to “their students” in the School of Medicine, and distinguished pathologists will one day receive help and support from their planned gift to create the Anderson professorship. Joan passed away after enduring cancer for many years. They were a devoted couple, and the parents of two accomplished children.

FRIEDA LEE AUERBACH

Frieda Lee Auerbach and her husband, Fred, had many adventures together traveling the world, and owning and operating Auerbach’s Department Store, a distinguished gathering and shopping arena in downtown Salt Lake City. Auerbach had been a household word for decades in Salt Lake City, offering silver spoons, the latest fashions, and a place to greet friends. When Fred’s health began to decline, Lee had a great desire to establish a cardiovascular center and endowment fund at University Hospital. A beautiful likeness of Lee and Fred hangs outside the center today. Fred died from a massive heart attack in 1998, and Lee passed away February 12, 2007, at UCLA in Westwood, California, at the age of 79. Despite many physical setbacks in her later years, Lee was determined to make a difference. Countless lives have been improved and even saved through her vision of better cardiovascular health for all.
Lael S. Bettilyon

Lael Corinne Smith Bettilyon passed away at the age of 94. She was an elegant woman until the day she died, and was able to attend the annual Scholarship Luncheon a week before her passing, mingling with “her” students. She and her late husband, Kyle, established the wonderful Bettilyon Serenity Room in University Hospital to provide a place of solace for grieving families. It is decorated with a beautiful stained-glass window mural depicting a peaceful journey through life. Lael wanted that environment for those who were struggling. She and Kyle also established the A. Kyle and Lael S. Bettilyon Endowed Scholarship Fund in the College of Nursing, and the A. Kyle and Lael S. Bettilyon Endowed Scholarship Fund in the School of Medicine. Lael loved to winter in southern California, and travel with Kyle in his real estate professional activities. Her greatest treasure was her family.

Wallace Sands Brooke, M.D. and Josephine Critchlow Brooke

Dr. Brooke was the fifth generation in a family of physicians. In 1943, he came to the U to help set up the four-year medical school. He practiced forty years as a surgeon at Holy Cross Hospital. He served as Chair of the Health Sciences Council, and as president of many medical societies. He was a Rhodes Scholar, and completed his M.D. at Johns Hopkins Medical School. He was a lieutenant in the U. S. Navy Medical Corps. He and his dear wife, Josephine, died within a week of each other. Jo was an accomplished artist, patron of the arts, and gracious hostess. The Brookes had four children, and several grandchildren and great-grandchildren. They established the Dr. and Mrs. Wallace S. Brooke Endowment in the School of Medicine.

Friedrich W. Bruenger

Friedrich W. Bruenger, who passed away at the age of 82, after a valiant six-month struggle with cancer, had a very distinguished career at the University of Utah. He was a wonderful mentor and example to junior scientists and other faculty and colleagues. Professor Bruenger’s depth and breadth of knowledge, particularly in chemistry, were legendary among his associates. His vast experience with rare, exotic radionuclides made him a unique international resource. National and worldwide recognition of his knowledge and skills made it possible for his research to be supported exclusively from extramural sources throughout his entire career. He, and the love of his life, Eveline, celebrated their fiftieth wedding anniversary in 2005, in Frankfurt, Germany, where their life together began.

Sally Rich Burbidge Cassity

Undoubtedly one of the U’s strongest advocates and cheerleaders, Sally made things happen. The U’s famous marching band, one of the finest in the country, had its beginnings, and its uniforms, thanks to Sally. The Health Sciences events held in Palm Springs were made possible through Sally’s hard work and organization. Sally served on the U’s Board of Trustees, and helped establish the Kenneth P. Burbidge, Jr. Family Athletics Academic Center, the Kenneth P. Burbidge, Jr. Endowed Chair for Pulmonary Medicine and Lung Transplantation in the Health Sciences Center, and the Dr. Clark Lowe Rich Distinguished Teaching Award in the School of Medicine, in honor of her father. Sally received the Distinguished Alumni award, the School of Music’s most prestigious Camerata Award, and the Marching Band’s Rehearsal Hall was named for her. Sally loved her U family, but more than anything, she adored the family of her own. She was famous for her adventurous spirit, her extended family vacations, her sense of humor, and her zest for life.

Allen W. Cowley, M.D.

Dr. Allen Cowley passed away in October, 2007, at the age of 104. From Venice, Utah, he was the ninth child of twelve born to a farming family living in a log cabin, and was the only child to leave the farm. He graduated from the U in 1925, and completed his medical intern/residency program at the University of Pennsylvania. He had a distinguished practice in Harrisburg for forty-two years, making extraordinary contributions in the medical world. He greatly valued his Utah Mormon Pioneer heritage. He and his wife, Norma, established the Dr. Allen W. and Norma Cowley Endowed Scholarship Fund in the School of Medicine to help others make their way. He had a strong work ethic and deep compassion for the less fortunate. As was written of him, “He loved every moment of his 104 years…he remained vital and lucid until the end.”

Marjorie A. Jones

Marjorie Jones passed away in 2007 at the age of 102. She was a graduate of the University of Utah and taught school for many years. She was married to the late Joseph S. Jones, an attorney and partner in Jones Waldo Holbrook and McDonough law firm. Mrs. Jones had a keen interest in health care as her father, brother and son were all doctors. She established two scholarships in the health sciences: the Dr. Samuel H. Allen Endowed Scholarship in memory of her father, and the Joseph S. and Marjorie Jones Endowed Scholarship in memory of her husband, to “help young students who are interested in health care, but cannot finance their studies.” Marjorie was a delightful and caring woman, with an affinity for Indian dolls and crafts, and interested in all the good that life had to offer.
MARIA A. OBYN

Maria Obyn couldn’t be long separated from her husband of sixty-six years, Richard K. Obyn, who passed away one year before Maria. They had been cherished companions through the darkest days of World War II in Belgium, to the brightest days of a beautiful life together in the United States. Maria had an indomitable character, and a gratitude for life. She and Richard shared an interest in education and medicine, and left their entire estate to the University of Utah Health Sciences Center to establish scholarships in all four colleges to benefit minority students. Maria had compassion for everyone, perhaps from being the tenth of fourteen children in a loving family, perhaps from her war-torn life experiences, or perhaps because she understood a great deal more about the human condition than her quiet demeanor would reveal. The Obyn scholarships will help others carry on as she has done, against all odds.

ROBERT L. RICE

Extensive awards, high praise, and much deserved recognitions are credited to Bob Rice (“Mr. Utah” of 1954, The Horatio Alger Award, the Utah Heart Association “Heart of Utah Award,” Utah Sports Hall of Fame, and the U’s College of Business Hall of Fame, an honorary degree from the U, to name a few) but they just hint at the stamina, foresight and leadership of Bob Rice, whose modest, local gym (owned and operated by modest, local Bob) grew into the European Health Spas, which at the time was the largest health club chain in the nation. Bob was a family man extraordinary, with his heart and soul invested in the lives of his wife and their six children and their families, and to service in the church to which they all belong. Bob, and his wife and sweetheart, Joyce, have established the Robert L. and Joyce T. Rice Presidential Endowed Chair in Healthy Aging in the College of Nursing, and scholarships and research endowments throughout the entire Health Sciences and University campuses. The Rice-Eccles Stadium stands as a permanent reminder of the generosity, sportsmanship, service, humility and humanitarianism of Robert L. Rice.

CLIFFORD C. SNYDER

Clifford C. Snyder, M.D., passed away at the age of 91. Dr. Snyder graduated from Texas Christian University and served with the U. S. Navy in the Pacific Theater during World War II as ship surgeon. He was the longtime chairman of the Division of Plastic Surgery at the University of Utah School of Medicine, and led the team of surgeons in the first successful separation of conjoined twins joined at the head. He was a world authority on children’s cleft palates, he invented antivenoms and vaccines to treat snakebite victims, and invented creative ways to use nerve-growth hormones for reattaching severed limbs. He invented multiple surgical instruments, wrote extensively, and received many high professional honors, but Dr. Snyder’s greatest accomplishment and joy was his family – his beloved wife, Mary, and their son, Cliff, Jr., and his family. Dr. Snyder established the Clifford C. Snyder, M.D., Far Eastern Presidential Endowed Chair in the Spencer S. Eccles Health Sciences Library, which he held until his passing.

JAMES L. SORENSON

Growing up in the Great Depression Jim Sorenson overcame the poverty of his childhood to become one of the world’s leading inventors, entrepreneurs and philanthropists. With undiagnosed dyslexia and informed by his teachers that he would never learn to read, his inventions garnered more than forty patents. He established his medical device company, Sorenson Research, followed by Sorenson Development, a holding company and investment arm of Sorenson Companies, a parent company to thirty-two corporations. He founded the Sorenson Molecular Genealogy Foundation, which is correlating genetic and genealogical databases for research. He was awarded the “Giant in our City” award by the Chamber of Commerce. It has been said that ideas gushed from Jim Sorenson like music from a savant. He was generous to many entities across campus, including the Huntsman Cancer Institute. Jim married Beverley Taylor and together had eight children. Mr. Sorenson said, “My family is my greatest treasure, and my greatest achievement and contribution to this life.”
Endowed chairs are supported by endowments at two levels – the $1 million level (Endowed Chair) and the $1.5 million level (Presidential Endowed Chair). The University is honored to be the recipient of the generous gifts establishing these fully-funded endowed chairs. The Chairs provide key support to men and women who have distinguished themselves in teaching, research and community service.

Ross R. Anderson, M.D. Presidential Endowed Chair in Surgery Established by Elliott V. Anderson in Honor of His Father
CHAIR HOLDER: Sean J. Mulvihill, M.D.

H. A. and Edna Benning Presidential Endowed Chair in the School of Medicine
CHAIR HOLDER: Cheryl M. Coffin, M.D.

D. Keith Barnes, M.D. and Ida May “Dotty” Barnes, R.N. Presidential Endowed Chair in the School of Medicine
CHAIR HOLDER: Randall W. Burt, M.D.

H. A. and Edna Benning Presidential Endowed Chair in the School of Medicine
CHAIR HOLDER: Jerry Kaplan, Ph.D.

Ida May “Dotty” Barnes, R.N. and D. Keith Barnes, M.D. Presidential Endowed Chair in the College of Nursing
CHAIR HOLDER: Janice M. Morse, Ph.D.

H. A. and Edna Benning Presidential Endowed Chair in the School of Medicine
CHAIR HOLDER: Gerald G. Krueger, M.D.

Grant H. Beckstrand, M.D. and Mildred Burrows Beckstrand Presidential Endowed Chair in Surgical Oncology
CHAIR HOLDER: Scholar Search in Progress

H. A. and Edna Benning Presidential Endowed Chair in the School of Medicine
CHAIR HOLDER: Dean Yaw Li, M.D., Ph.D.

B. Lue and Hope S. Bettilyon Presidential Endowed Chair in Internal Medicine for Diabetes Research
CHAIR HOLDER: Donald A. McClain, M.D., Ph.D.

Clarence M. and Ruth N. Birrer Presidential Endowed Chair in the School of Medicine in Memory of Dr. and Mrs. A. J. Nielson, Dr. Karl O. Nielson, Dr. Kenneth A. Nielson, Dr. Paul E. Nielson, and Mr. Douglas W. Nielsen
CHAIR HOLDER: John R. Hoidal, M.D.
Kenneth P. Burbidge Presidential Endowed Chair for Pulmonary Medicine and Lung Transplantation  
**CHAIR HOLDER:** Robert Paine III, M.D.

Mario R. Capecchi, Ph.D. Endowed Chair in Genetics established in honor of the University of Utah’s first Nobel Laureate by the George S. and Dolores Doré Eccles Foundation (1)  
**CHAIR HOLDER:** Scholar Search in Progress

Mario R. Capecchi, Ph.D. Endowed Chair in Genetics established in honor of the University of Utah’s first Nobel Laureate by the George S. and Dolores Doré Eccles Foundation (2)  
**CHAIR HOLDER:** Scholar Search in Progress

Robert S. and Beth M. Carter endowed Chair in the College of Nursing  
**CHAIR HOLDER:** Scholar Search in Progress

George E. Cartwright, M.D. Endowed Chair in the Department of Internal Medicine  
**CHAIR HOLDER:** Curt H. Hagedorn, M.D.

William H. and Patricia W. Child Presidential Endowed Chair Honoring Pioneering Utah Women in Medicine  
**CHAIR HOLDER:** Anne G. Osborn, M.D.

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$530 Million
- Tuition and Fees: 64%
- Clinical Services: 27%
- Research: 5%
- Gifts: 4%

College of Pharmacy
$33.5 Million
- Tuition and Fees: 69%
- Clinical Services: 4%
- Research: 25%
- Gifts: 2%

College of Nursing
$14.2 Million
- Tuition and Fees: 55%
- Clinical Services: 30%
- Research: 6%
- Gifts: 9%

College of Health
$12.7 Million
- Tuition and Fees: 82%
- Clinical Services: 7%
- Research: 2%
- Gifts: 9%

Eccles Health Sciences Library
$5.1 Million
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