SPECIAL ISSUE:

MEDICINE:

A Family Matter

Healthy Family Life Is at the Heart of Catholic Medicine

Dr. Frank McNesby
Giving Hope to Families with Special Needs Children

ALSO INSIDE:

Dr. Clement Cunningham
Trusting God on Life’s Journey

Marriage and Medicine
God’s Grace at Work

Dr. Harold Kletschka
Father of the Artificial Heart
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The Catholic Medical Association helps physicians and health care professionals uphold the principles of the Catholic faith in the science and practice of medicine.
FEATURES
5     From Fighter Pilot to Catholic Physician
8     A Beacon of Hope  Homes for Children with Special Needs
10    Marriage and Medicine  God’s Grace at Work
12    Dr. Clement Cunningham  Trusting God on Life’s Journey
14    Father and Son in the Pursuit of Faith, Family and Medicine
16    Dr. Harold Kletschka  The Father of the Artificial Heart

SECTIONS
2     President’s Message
3     Communications Chair Message
4     Chaplain’s Corner
6     CMA News
20    Students Section
22    Residents Section
24    Guild News
The persecution of Christians throughout the world, and sadly within our own country, makes daily headlines. Religious freedom and rights of conscience are under direct assault. Grave evils are extolled as virtue. St. John Paul II forewarned us of these days. Amid these present trials, it is heartening to inform you of all that the CMA is accomplishing on various battlefronts.

CMA physicians now sit on two key U.S. Conference of Catholic Bishops committees: Dr. Kathleen Raviele on the Pro-life Committee and Dr. Tom Pitre on the Health Care Issues Committee. Our presence on these committees gives a much-needed “boots on the ground” perspective on critical medical-moral issues. At the request of our bishops and with the assistance of the USCCB, the CMA has produced an outstanding and informative video on the dangers of the advanced directives known as Physician Orders for Life Sustaining Treatment and the Medical Orders for Life Sustaining Treatment: “POLST & MOLST — Are you signing your life away?” This video is being widely disseminated and is also posted on our website.

The Holy Alliance, a new CMA initiative that seeks to develop partnerships between priests and CMA physicians, is already proving quite effective. Inspired by the Holy Alliance, Dr. Steve Hannan led a collaborative effort to develop a protocol on the safe administration of the Sacraments to patients with Ebola infection.

The CMA’s Health Care Policy Committee, under the leadership of Dr. Steve White, is forging ahead in many areas of critical importance: supporting current federal legislation that protects conscience rights of individuals (HR 940); providing information on the impact of the Affordable Care Act on physicians and on mandated coverage of morally objectionable medical care; clarifying controversies regarding vaccinations derived from aborted fetal cells; and collaborating with others on developing recommendations for health care policy and legislation based upon Catholic moral principles and authentic Catholic principles of social justice.

At the state and local levels, CMA guilds are actively engaged in countering anti-life forces. Physician-assisted suicide measures were recently defeated in both Colorado and Montana, and CMA guild members were instrumental in achieving these pro-life victories.

Recognizing the crucial role our guilds play in the CMA’s efforts to re-evangelize our profession and the very culture itself, our mid-year meeting focused on providing in-depth training and organizational support for our regional directors and guild leaders. We well know that the strength of our organization lies in the talents, spiritual gifts and dedication of our members.

The CMA continues to rise in national prominence, and this is evidenced by the escalation of requests for our members to grant television, radio and print media interviews. This first edition of The Pulse of Catholic Medicine comes at a time when the voice of the CMA is much needed in our world.

I would like to close by encouraging you to attend this year’s annual conference in Philadelphia, “Healing the Wounded Culture: Bringing the Wholeness of Healing to Humanity.” God has called each one of us to this particular time in history. Let us pray for the grace to always be ready to provide courageous and faithful witness to the Truth.

Peter T. Morrow, M.D.
President
It is my privilege as chair of the Media and Communications Committee to introduce you to our inaugural issue of the Catholic Medical Association’s new magazine The Pulse of Catholic Medicine. The goal of this quarterly publication is to show the face of the CMA and palpate the pulse of our guilds and individual members.

The theme of our first issue is: “Medicine: A Family Matter,” which corresponds to the World Meeting of Families. In this issue you will find stories about the role of the physician in holistic care not just for the patient, but also for the entire family; about how the CMA is providing a family support system to our students and residents; and about family life while pursuing a career in medicine. This is something we can all relate to — the challenges of balancing a busy and demanding professional career with the daily necessities of family life, complicated by a culture that is often overtly hostile to the traditional family.

When I first joined the CMA, one of the most attractive aspects of this organization was the fellowship I experienced at its annual conference. It is the sincere hope of the board of directors that this fellowship will be extended throughout the year through this publication. Please take a moment to read the magazine. Then send us your comments and suggestions for future editions. Most importantly, send us your personal stories and those of your guilds. Tell us about your triumphs and struggles, successes and failures as they relate to the practice of medicine, holistic patient care formed in the image of Christ, and the ethical demands and professional and familial sacrifices of remaining faithful to the Magisterium of the Catholic Church.

This is one of the many ways the CMA is striving to foster communication and dialogue with and among our members and guilds. We hope this magazine will be a source of encouragement and fellowship for you our members.

God Bless,

Paul J. Braaton, M.D.

Media and Communications Committee Chair
Dear Readers,

As you read this inaugural issue of The Pulse of Catholic Medicine, it is to be hoped that you find the stories of fellow Catholic Medical Association members to be inspiring and, therefore, a help in living out the vocation of medicine. You who are Catholic physicians and health care professionals have been called by Jesus to share in His healing mission. While we hear in the Gospels of how Our Lord healed persons through miracles, His primary way of healing is through you who have the natural gifts and talents to exercise the art and science of medicine. Having been chosen by Christ to be His instruments of healing, this vocation involves the realization that your practice of medicine needs to be permeated by the light of faith as well. I believe that this publication will be discovered by you to be an aid in your awareness of how you can put this into practice so that the riches of the truths of our Catholic faith can make the healing arts to be Christ-centered.

With the theme of the stories contained herein being that of “Medicine: A Family Matter,” you will witness how the vocation of medicine is oftentimes a call received by multiple members of a family. As Jesus sent the apostles and His disciples out to evangelize in pairs, family members are often called to work side-by-side in the ministry of healing. I believe that whether or not those engaged in the mission of medicine have the blessing of a blood relative as a colleague, the witness of those presented in this issue is a help in remembering the support that Catholic physicians and medical professionals need to provide one another as brothers and sisters in Christ. It is certainly one of the desires of the board of the CMA that this magazine be a benefit to our members such that they are fortified by knowing that they are not alone in the challenge of remaining faithful to their practice of our Catholic faith within the milieu of medicine and in bearing the sacrifices necessary to imbue it with the compassionate love of Christ.

Another focus of this issue is that of treating the whole family, not merely the individual patient. This makes me think of how we hear in St. Luke’s Gospel of Jesus’ bringing back to life the dead son of the widow of Nain. We are told that, after miraculously resuscitating the dead man, Jesus gave him back to his mother. The death of the young man, who was her only son, was not only about the loss of his life, but also the loss of communion and support for his mother. Jesus restored the communio of mother and son. Hence, as Catholics we are challenged to be aware of the the effects that the concerns about the illness of an individual has on his or her family, especially how it can disrupt their communion, and therefore the need to minister Christ’s empathetic care to the family in the ministry of health care. Further, while so much that is bogusly promoted in the name of medicine today — such as abortion, contraception and euthanasia — destroys the communion of husband and wife as well as that of the family, we as Catholics know that we have to deliver excellent medical care that, in its practice, does not do bodily or spiritual harm. We must always respect the gift of the life of the person created in the image and likeness of God, who is called to self-giving communion in the family. Our times need your witness of the Gospel of Life so that marriage and family life can truly be the sanctuary for life and communion as Our Lord intends these to be by His design. Hence, I hope that this issue will be a springboard for you to pray and reflect on how you can be an agent of making medicine truly serve the preservation of communion of persons within marriage and the family.

Our former episcopal advisor, Bishop Robert Vasa, always stressed that the core mission of the CMA is to assist our members in responding to the grace of our Lord to be faithful to their Catholic faith in the practice of medicine so that their eternal salvation not be jeopardized. This solemn charge, of which the members of the board of the CMA are to be stewards, is shared by our current Episcopal Advisor Bishop James Conley and myself as the national chaplain. As you take this first issue in hand and all future ones, it is my prayer that, most of all, your reading of the contents of each issue be of spiritual benefit to you.

As the CMA is consecrated to the Sacred Heart of Jesus and the Immaculate Heart of Mary, may this endeavor of the publication of The Pulse of Catholic Medicine be consecrated to their hearts such that the love and compassion of the hearts of Our Lord and Our Lady will be the pulse that beats in your practice of medicine. May you discover in each issue a deep well of spiritual and professional edification that invigorates your resolve to be healers always faithful to the Gospel of Life!

Yours in Christ,

Fr. Gutowski
Rev. Matthew J. Gutowski
National Chaplain
I am excited and grateful for this opportunity to share the story about how I became a member of the CMA. In the words of Pope St. John Paul II, I pray that this story will inspire others to “Be Not Afraid” and “Put out into deep water” by becoming a faithful Catholic physician!

As a 1987 graduate from the United States Air Force Academy, my life ambition was to become an Air Force pilot and NASA astronaut — medicine was nowhere in my cross-check. I was blessed to have the opportunity to fly the F-4 Phantom, a Vietnam vintage fighter, and flew tactical reconnaissance missions “alone, unarmed and unafraid” in Germany from 1988 to 1991.

In 1991, the termination of the first Gulf War and our nation’s transition to a post–cold-war military resulted in several career changes for me. Ultimately, these changes led to me meeting my wife, Teri, and pursuing medicine as a “second” Air Force career. Teri and I married in 1992, and our first son, Paul, was born in 1994 — the same year I started medical school. Mark was born in 1996, and I graduated from the Uniformed Services University of Health Sciences in 1998.

As a result of my previous flying experiences, I was qualified to become an Air Force pilot-physician. To do so, I completed a one-year internship and a one-year tour as a flight surgeon, during which time I was the primary-care physician for aircrew and their families. I was subsequently assigned to the B-1B Bomber and completed mission qualification training in July 2001. Two months later our nation was attacked, and I deployed to the Middle East, flying combat missions in support of Operation Enduring Freedom.

During my deployment, a friend recommended that I read George Weigel’s biography of Pope St. John Paul II titled “Witness to Hope.” I was very inspired and impressed after reading St. John Paul II’s life story. Although I have been a Catholic all of my life, this was my first exposure to the Church’s teachings about marriage and family. St. John Paul II’s story convinced me that Catholic physicians should embrace these teachings as a framework for our practice of medicine. It also inspired me to become a Board Certified Family Physician.

The decision to become a family physician was reinforced when, thanks to my wife, I grew to understand the medical logic for the Church’s teaching on contraception. I subsequently went to the Pope Paul VI Institute and became a FertilityCare Practitioner — qualified to teach the Creighton Model System to my patients. At the same time, I became a FertilityCare Medical Consultant and learned how to manage many gynecological and reproductive illnesses using NaProTechnology.

NaProTechnology turned out to be my area of concentration during my family practice residency from 2005 to 2008. During residency I also attended my first Catholic Medical Association conference in Atlanta. It was extremely gratifying to be around so many other faithful Catholic physicians, and so I joined the CMA and have been a member ever since. Since I was an active-duty Air Force officer, I was asked to serve the organization as the military regional director and eventually as a board member. I now have the privilege of being the chair for the 2017 annual educational conference in Denver.

When discerning the theme for this conference, I was inspired to develop the same idea that motivated me to pursue family medicine — the medical truth of the Church’s beautiful teachings about marriage and family. As a result, the theme for our 2017 conference will be, “Medicine at the Service of Marriage and Families: Upholding a Culture of Life in the Healing Professions.”

In retrospect, I can see God’s divine providence leading my transition from a fighter pilot to a faithful Catholic physician. As I continue to discern God’s will for my life in these turbulent times, I pray with St. Catherine of Siena that we may all have the courage to become saints by becoming “who God meant us to be.”

Dr. Bill Mueller serves on the board as the treasurer for the Catholic Medical Association.
“JUST ONE MORE” CMA Mid-Year Meeting Seeks to Increase Local Guilds

BY AL OLIVA, M.D., FACS
Spokane-Coeur d’Alene Guild

The primary focus of the Catholic Medical Association mid-year meeting at Mundelein Seminary, June 4-7, was the growth and development of local guilds. Nuts-and-bolts sessions were held on the creation of guilds, recruitment strategies to increase membership, and ways to obtain tax-exempt status.

A great deal of effort was spent on establishing better communication policies between guild presidents, regional directors and board members. Discussion on the organizational structure of the CMA suggested moving from a guild model to a state model in order to address the serious threats posed to our religious medical institutions, which occur on a state level rather than a local level.

It was extremely helpful to learn from successful guilds in Wisconsin, Indiana and Colorado, which adopted different approaches based on local circumstances to expand membership and have an impact on the local medical community. Productive guilds all shared an emphasis on educating their members on relevant ethical issues, providing a venue for spiritual growth through retreats and receiving the sacraments, serving their community in charitable projects, and allowing opportunity for fellowship through social events.

Although the organizational and logistical work done during the mid-year meeting is essential, my favorite and most rewarding aspect of the meeting centered on the retreat-like aspects of the meeting including daily Mass and time for personal reflection. Previous mid-year meetings also included Eucharistic Adoration, daily rosary, and reflections given by a retreat director.

Meeting so many clinicians who are enthused about being Catholic, and not apologizing for it, is inspirational. Hearing about the difficulties faithful physicians encounter and overcome in their daily practice gives one courage and hope. The informal lunches and dinners allow one to solicit advice from more experienced members. It is encouraging to be part of a medical group that struggles to make the Gospel message alive and pertinent to daily practice.

During this mid-year meeting, it became clear to me that increasing our membership and changing the hearts of our colleagues will occur one person at a time. That is why one of the themes of this year’s meeting, introduced by Dr. Les Ruppersberger, makes so much sense. We are all asked to invite “Just One More.” This new evangelization starts first with personal growth in holiness. Our past episcopal advisor, Bishop Robert Vasa, reminded us often of our true mission in the Catholic Medical Association: the salvation of souls — yours, mine, our colleagues, our families and our patients.
Finding a Medical Family at Boot Camp

BY AMANDA STAHL

When I decided to go to medical school, I knew who I was. I went to Catholic grade school, high school and a Jesuit college that informed my individual personhood in God’s design. Faith, service to others and family were most important to me. I quickly realized that while medical school provides the knowledge of how to deal with a delicate patient’s medical issues, it fails to say why we as health care providers should keep trying to make life better for our patients. Medical school was giving me the tools that I needed to become a doctor, but it wasn’t giving me the tools to be the doctor that I desired to be: compassionate, just and honorable.

In starting medical school I feared that I would lose myself and, most importantly, my Catholic identity. I started trying to find ways to keep my faith a part of my future life as a physician. I continued to attend weekly Mass and attend youth group meetings in Manayunk. After Manayunk I found the CMA. I realized in spending those days at Saint Charles Borromeo Seminary that being an authentic Catholic and a physician are not mutually exclusive.

The CMA Boot Camp dispelled my medical school fears and provided me with joy. I had never been familiar with Liturgy of the Hours before boot camp; I found that being able to sit down three times a day and leave the day behind was a wonderful way to center myself on Christ and His mission to make the kingdom happen now.

In praying with like-minded individuals and talking about our Catholic teachings, I began to further understand and answer the following questions, which arose during my first year of medical school: Who am I? Where am I going in my medical career? Where am I going in my spiritual life? How can I know that I’m being true to my faith and my individuality as a doctor?

The CMA Boot Camp provided me with the comradery that I’ve been missing through my medical school class. I realized that medicine is not as pure-hearted as I wanted it to be. I got into medicine because it was a vocation, a calling to be better and to make the lives of others around me better. The medical students at boot camp were the medical family I needed: beautiful, intelligent souls who were invested in their faith, service and promoting Catholic values to the larger community. The CMA Boot Camp provided me with the Catholic family atmosphere and philosophy emphasis I lacked in medical school. I cannot be more grateful to the Archdiocese and to the CMA for their tireless efforts to make the third annual boot camp a success.

Amanda Stahl is a second year medical student at the Philadelphia College of Osteopathic Medicine, Class of 2018. She is a 2014 graduate of the University of Scranton in Pennsylvania.
By Erin Maguire

Blown out buildings, fence-lined lots and littered storefronts mark the landscape of North Philadelphia — the nation’s second poorest congressional district and home to Dr. Frank McNesby Jr.’s patients.

It is here, amid wrecked houses and broken hearts that McNesby, a pediatrician at St. Christopher's Hospital for Children in Philadelphia, hopes to create Houses of Hospitality for Children with Special Needs and Their Families.

“Transportation issues, drugs, anger… every day there’s chaos,” said McNesby, who works at the hospital’s Center for Children with Special Health Care Needs.

It is not uncommon to find McNesby making home visits in some of Philadelphia’s worst neighborhoods because it is the added poverty of his patients that makes McNesby’s vision clear.

“As a pediatrician my focus and goal is the health and well-being of children,” he said. “We are called to care for the sick in body and mind, to care for the broken.”

McNesby first became aware of this needed support of families with special needs children as health care policies changed and referrals increased in his practice. Even though he had only been in practice for a couple of years, he saw the fragmentation of services, the frustration of families and the poverty that culminated in a culture of near-despair that led him to his vision of hope.

McNesby envisions Houses that would not reproduce the hospital system, but rather provide outpatient care in an urban setting in collaboration with the local pediatric hospital. They would be “safe homes” for families with special needs children. Implementation would occur in phases.

He identified the paramount need as advocacy. House coordinators would serve as expert allies to assist families as they navigate the complex care systems and services for their child. McNesby’s advocates would attend daily Mass in the House’s chapel and embody Benedictine spirituality of “pray and work.”

“When the Eucharist is at the forefront, we are able to be our best selves,” he said.

McNesby wants to model his Houses after organizations like Houses of Hospitality of the Catholic Worker Movement, which cares for the poor; and the Philadelphia-founded Ronald McDonald House, which provides temporary housing for families of seriously ill or injured children.

In his Houses, he would provide support groups and additional services such as early intervention, educational advocacy, legal assistance and therapies. He also hopes to collaborate with the Archdiocese of Philadelphia to occupy unused property from recent church, school and rectory closings.

To make his vision a reality financially, McNesby plans to work with Catholic lay, religious and military orders that have missions to care for the sick and the poor. He hopes to partner with the Sisters of Life, as

Sonia Perez has been caring for her granddaughter Karina Colon since birth.
well as, Catholic fraternal service and philanthropic organizations that serve vulnerable populations, such as the Jerome Lejeune Foundation USA. He will also seek grants and support from individual donors.

“When it comes down to foundational principles, it does not get more basic than an understanding of the nature and essence of the human person,” McNesby said. “As a Catholic physician I understand the sanctity of life, the dignity of the human person created in the image and likeness of God.”

McNesby wants his Houses to have a Catholic ethos. His vision is theologically rooted in the examples of St. John Paul the Great, whose view of personhood impacted him; St. Pio of Pietrelcina, who had a home for the suffering in Italy; and St. Luigi Guanella, who gained sainthood through a local miracle in Delaware County.

He also looks to the wisdom of Pope-Emeritus Benedict XVI; Pope Francis; Cardinal John O’Connor, founder of the Sisters of Life; and Dr. Jerome Lejeune, the Father of Modern Genetics who discovered the Down Syndrome chromosome.

McNesby said that his participation in the Catholic Medical Association continues to inspire him, noting that the CMA helped form him as a Catholic physician. He said his role models and friendships there are “a source of encouragement, support and inspiration.”

Professor Peter J. Colosi, Ph.D., a CMA member, said McNesby’s vision would benefit not only special needs children and their parents, but also the culture.

“If a place like that existed, it would have a formative effect on the city,” Colosi said. “This is how you begin to restore a Catholic ethos in the culture; it gets in the consciousness of the people.”

Mark Bradford, president of Jerome Lejeune Foundation USA, affirms that “Frank’s vision is the heart of the Church’s social mission.” Adding that “the pro-life movement is not just about the beginning or end of life; it’s the continuum of life. We need to focus on special needs because people feel neglected.”

Jim Murray, the co-founder of Ronald McDonald House, believes “Frank embodies a quote from St. Francis de Sales, ‘Nothing is as strong as gentleness, nothing as gentle as real strength.’ Frank is not just someone who checks his patients out; he walks with them and prays for them. Frank isn’t just a dreamer, he will make his vision a reality.”

Erin Maguire is a freelance writer living in the Philadelphia area. She is passionate about aiding the poor and promoting St. John Paul II’s Theology of the Body.

A fund has been established at Jerome Lejeune Foundation USA to support this cause with 100 percent of donors’ gifts to back the establishment of support services for children with special needs and their families. Tax-deductible contributions can be made to:

Jerome Lejeune Foundation USA
Special Fund for Houses of Hospitality for Children with Special Needs and Their Families
6397 Drexel Rd, Philadelphia, PA 19151

To support this mission with prayer, or expertise contact Dr. Frank McNesby at: francis.mcnesby@drexelmed.edu.
It is no common feat for two doctors to marry right out of medical school, have successful practices and a family plus be able to say they are celebrating 41 years of marriage, but that is exactly what Drs. Anthony and Kathleen Raviele have been able to accomplish with a little bit of help from above.

The couple met as 18-year-olds interviewing for a place in the biomedical program at Rensselaer Polytechnic Institute in Troy, New York. They started out as friends, but midway through school that friendship blossomed into a relationship that resulted in marriage two days after graduation.

“I bought a Volkswagen Beetle but didn’t know how to drive a stick shift,” recalls Kathleen Raviele. “I knew Tony had a similar car so I asked him to teach me. That led to playing tennis together and dinner dates and by the end of the summer we knew we were getting married.”

To this day the couple can not agree on “who asked whom,” but they can agree on being determined to make it work.

“We simply felt that we were a ‘good fit’ and with somewhat common backgrounds and aspirations for the future, we would make it as a couple — no matter the pressures,” Anthony Raviele said.

Not everyone seemed so optimistic.

When Kathleen Raviele went to the administration office asking for a second diploma to be issued in her married name she recalls being told not to bother because she would probably be back in a couple of years wanting her name to be changed back due to divorce.

“We proved them wrong after 41 years,” she said, noting that married physicians do have specific challenges to overcome.

At the end of the day, the couple points to three things contributing to the success of their marriage: their parents and grandparents witness to life-long marriages; the right attitude about their roles as husband and wife; and having God at the center of their marriage.

It is what “has carried us through the trials and tribulations that beset any marriage — especially one with two physicians,” Anthony Raviele said.

**MAKING IT WORK**

The couple succeeded in being placed together for residency at Case Western Reserve in Cleveland, Ohio, where she did her residency for obstetrics and gynecology. He did it for pediatrics and also did his fellowship there for pediatric cardiology. They purposely scheduled the same nights for their on-call shifts so that they would be able to see each other until they had their first child.

“Then we had to do the opposite and barely saw each other,” she recalls.

Those were difficult years, especially for her as she tried to juggle her career and the desire to be home with her two children. To make it work she taught part time at Emory University in Atlanta for a couple of years to be able to be home more often.

“It was much more difficult for women having families to be in surgical fields because you had to see patients full time to keep up with your surgical skills,” Kathleen Raviele explained. “If I had stayed in academia, I was afraid I would lose all my technical skills in gynecology. I was constantly torn between wanting to spend more time with my children versus my responsibilities to my patients.”

She would have chosen a non-surgical field had she not believed that OB-GYN was her calling — a calling she felt when she was just 11 years old.

At that time her mother was having her fifth child. As the oldest, Kathleen Raviele was keenly aware that her mother was suffering from a difficult pregnancy. That experience led her to want to help women with difficult pregnancies and provide the care they needed.

“I remember seeing the transformation in the field of obstetrics and gynecology from a male-dominated field to...
a female-dominated one,” she said. “Women added gentleness, refined language and empathy.”

She recalls attending a forceps birth as a resident, in which the doctor had one foot on the bed and used all his might to pull the baby out while telling her that she would never be able to do it.

“I remember thinking that I shouldn’t have to do it,” she said. “Today that would be a cesarean section delivery.”

Anthony Raviele, on the other hand, discerned the priesthood early on, but he wanted to have a family. That led him to the decision to pursue medicine, a profession in which he could still help others.

“Pediatrics was the obvious choice,” he said. “Cardiology was the sub-specialty I chose because … of the ability to perform interventions that have only increased in scope since beginning my career in the late 1970s.”

As a pediatric cardiologist, he cares for critically ill children with heart defects or cardiac illnesses. Often the lives of his young patients hang in the balance, and it is his faith that helps him guide his patients’ families in making life-sustaining or even end-of-life decisions for them, he said.

Faith however was not always a part of their lives.

RETURNING TO THE CHURCH

During their time at Albany Medical College in New York, the couple fell away from their Catholic faith. For her the legalization of abortion played a big role in that decision since she bought into the lie of “a woman’s right to choose” until ultrasound technology made clear to her the humanity of the life in the womb.

It took their first child to bring them back “to the reality that our Catholic faith had been and should be an important part of our ‘family ethic,’” Anthony Raviele said.

Kathleen Raviele’s return led to a profound experience nine years later when she learned about the Marian apparition in the town of Medjugorje in Bosnia-Hercegovina — an apparition that the Catholic Church has yet to officially recognize.

“Following what Our Lady is asking us to do to grow in holiness has deepened my faith, and it is the same things the Church asks of us,” she said. “Daily prayer, especially the rosary, daily reading of Sacred Scripture, putting the Mass at the center of my life, fasting, monthly confession and praying for peace brought about that spiritual awakening for which I will be eternally grateful to Our Lady. It made me see things differently.”

She was bothered by the fact that her medical group prescribed contraception and did sterilizations for women, and some of her colleagues even performed abortions. It became clear to her that she could not have anything to do with these things personally, or in the case of abortion, even indirectly; and she told her partners. She did not anticipate

continued on page 30

FROM THE FIRE COMMITTEE

This committee was formed to fulfill one of the founding goals of the Catholic Medical Association to help in the spiritual formation of our members. We are all on a journey to eternity and some of us have a strong Catholic support group where we live and others are alone in their journey. Some have been faithful Catholics for many years, others of us are recent converts or reverts to the Catholic Church. However, we will be the best Catholic physicians in this secular culture if we are faith-filled Catholics.

The Faith, Inspiration, Reason and Evangelization (FIRE) Committee first began meeting in August of 2013. The committee is made up of physicians practicing around the country in different specialties, including the CMA’s chaplain, Fr. Matthew Gutowski, a moral theologian, and two physicians who are also religious sisters.

The first few months we worked on goals and developed a survey of the CMA members for what you wanted, spiritually. The key responses to the survey were: you wanted to understand the practice of medicine as a vocation and the spirituality of living that out; you wanted to develop a personal relationship with the Lord in prayer; you wanted to explore medical ethics, including major Church documents; and you wanted to understand how to bring Catholic medical and moral teachings to the public square.

In January of 2015, we began implementing those suggestions through monthly EMBERS emails with advice taken from the spiritual wealth of the Catholic Church. During Lent, we decided to do a weekly reflection on the physical suffering of Jesus Christ during His Passion, composed by one of the members, Dr. Tom McGovern, a dermatologist. Several of us had been moved by the book, “A Doctor at Calvary,” which discussed the physical sufferings of Jesus. We promoted Marian spirituality in the May edition of EMBERS and devoted the June EMBERS to the Sacred Heart of Jesus.

As we have done so far, we are recommending various spiritual books each month along with information on various saints of special interest to physicians and those in the field of medicine. We are hoping to offer long-distance learning programs on the faith and medical ethics in the months ahead, as well as, sharing information about retreats specifically for physicians.

The spirituality presented thus far is on the members-only section of the CMA website so that whenever someone joins the CMA, they can avail themselves of all the materials. If you have any suggestions or comments, please share them at info@cathmed.org.
God has placed many remarkable encounters in the life of Dr. Clement Cunningham. Now at 92 years old, this former Catholic Medical Association president and long-time CMA advisor and member has served God in countless capacities and roles — as a physician, as a family man, as a soldier in both World War II and later on the front lines of the culture wars, and as a devout Catholic. While he has not always known the exact course God would place before him, he has proceeded through life trusting that if he remained obedient to God’s truth, he could rest assured he was on the right track.

“I sleep well and have no regrets,” he said. “I have always defended the magisterial teachings of the Church. I have met people who have had different views, and listening to them can be helpful. On the other hand, recognize that when Christ established the Church He said that the world would change but His doctrine would not. This must have been an incredible support to the early Church, and it remains so.”

Cunningham graduated from St. Joseph’s High School in Rock Island, Illinois, in 1939 and went on to Ambrose University where he met renowned biologist and textbook author, Monsignor Ulrich Hauber, chair of the biology department. He credits Msgr. Hauber, as well as his brother, Glenn, with inspiring his interest in medicine.

After graduating from college, Cunningham moved on to Loyola University’s Stritch School of Medicine. It was in his second year as an intern at Cook County Hospital that he and fellow intern James McDonald joined the Army as troop surgeons on the transport team.

Military service took them all over, including France, Germany, England and Italy. Making about one trip each month, they carried sometimes up to 1,000 troops at a time, and treated numerous respiratory infections and G.I. tract problems, lacerations and fractures. At times the seas were extremely rough, producing up to 80-foot waves, and it was not unusual for tables and chairs to slide up into bundles and for soldiers to lie sick in their bunks.

The times at sea not only produced a close friendship with Dr. McDonald, it also resulted in Cunningham meeting his future wife — McDonald’s sister, Florence. After the war, during the last part of his internship, Cunningham met Florence, and the two were married in 1947.

“We had had many long conversations together, and we discovered that we had the same interests in life, particularly a strong faith,” Cunningham said of his decision to marry his late wife. “Over the years when patients would call our home, they remarked how very pleasant she was and that she never made them feel like they were intruding.”

The couple embraced the next journey of their lives together with Cunningham setting up a family practice in his hometown, to which he would devote his entire 48-year career. The couple had four children, and his oldest son, Patrick, became a physician, who would eventually take over his father’s practice. For Cunningham, establishing the proper value of family life has been instrumental in finding a balance in life.

“It’s important to establish the right pecking order, to have priorities,” he said. “God must be number one, your spouse must be second, your children are third, work is fourth, and social or athletic activities and hobbies are last. People, not just physicians, sometimes put golf ahead of
their work, or children ahead of their spouse; this could be a problem. If one puts anything above the Lord, then they are talking about real problems.”

Cunningham has managed to keep God at the center of not only his life and family, but also of his work and activities as a physician. His journey of service to his profession has been nothing short of distinguished and remarkable.

He served on the staff of St. Anthony Hospital in Rock Island and in 1959 was appointed president of the medical staff. He also was on the staff of Franciscan Medical Center, serving as president of the medical staff for two terms and as board member for nine years. He was member and board officer for both the Robert Young Mental Health Center and the Trinity Medical Center, and advised the boards of the schools of nursing at St. Anthony Hospital, Blackhawk College and Marycrest College.

His various professional memberships and affiliations earned him an Illinois State Medical Society Award for Service and a Rock Island County Medical Society Lifetime Achievement Award. Among his numerous awards, Cunningham received what he terms as one of the “highest honors” of his life: the Order of St. Gregory the Great Award for his personal service to the Church from then Pope John Paul II.

Throughout these years Cunningham served his parish, St. Pius X Church, as an extraordinary minister of the Eucharist, an auxiliary member of the Legion of Mary and a member of the Rock Island Ecumenical Group. He is a Fourth Degree Knight of Columbus, Alloues Council 658.

He served his country as a representative to the 1965 White House Conference on aging, where he advised on the need for individuals to have meals delivered to their homes and on the importance of rehabilitation after strokes.

“I am of the strong opinion that life and dignity begin at conception and end with natural death,” Cunningham said. “Providing food and water by means of a PEG tube is a procedure easily accomplished in 20 minutes or less by a competent surgeon. The Church does not consider this procedure to be an extraordinary means of sustaining life, but rather an ordinary one. Although there are very limited exceptions, providing food and water is a necessity, and this issue is a continual problem that needs to be monitored.”

As a cofounder of the National Commission on Human Life, Cunningham played a pivotal role in recommending against the use of the contraceptive pill and in favor of the expansion of natural family planning instruction by dioceses throughout the United States.

Cunningham’s desire to carry his faith into his practice as a physician led him to join the Catholic Medical Association in 1953, a commitment he would make for a lifetime. His first endeavors involved reaching out to physicians by means of a mailing and by organizing guild meetings; eventually he would become president of the association in 1964, membership chairperson and an advisor to other association presidents. His impact has been acclaimed by CMA leaders.

“One of the first things I did was to ask Dr. Cunningham to be a member of the newly formed National Commission on Human Life,” said current CMA President Dr. Peter Morrow. “He has taught us how to uphold the teaching of the Church through his personal witness and has kept us up-to-date on the challenges we face through his news briefs in his blog, Clem’s Corner. As leaders of the CMA, we stand on the shoulders of those who have gone before us. Clem Cunningham has been one of the great cornerstones we have relied on.”

CMA Executive Director Mario Dickerson remembers being encouraged by CMA members soon after his arrival on the job to seek out Cunningham because of his breadth and depth of knowledge about the CMA.

“When I first met him, I was touched by his humility,” recalled Dickerson. “The admiration and respect that members have for Dr. Cunningham speaks volumes not only about him personally, but also about the nature of the CMA as a family. I am inspired by his dedication and perseverance to ensure that he is doing everything possible to pass on the CMA to the next generation. He knows the stakes are high, and with ever-present joy he is doing his part.”

Cunningham’s journey through life has led him to make acquaintances in all the right places — namely with many who were on their way to heaven. While attending a Eucharistic congress in Bombay, India, he was invited to deliver a talk about the natural family planning clinics in his home Diocese of Peoria. There in attendance was Blessed Mother Teresa of Calcutta with sisters from her order, the Missionaries of Charity. Cunningham was introduced to her.

“We spoke mostly small talk,” he recalled. “Nothing too personal but I was struck by the fact that they did not have bedding facilities for Mother Teresa and her sisters; they slept humbly on the floor.”

continued on page 30
BY NADIA SMITH

Things have changed since the days when Dr. John D. Lane made house calls for $6. What has not, is his example of faith and medical ethics that inspired his first-born son Dr. John “Jack” Lane to also pursue the field of medicine.

“His influence on my choice of career was unspoken,” Jack Lane said. “My father was a great role model but he never pushed me into medicine, nor did he ever dissuade me from pursuing the profession.”

John Lane demonstrated an authentic love and unwavering dedication to the things that mattered most to him. He has been married to his high-school sweetheart, Patricia, for the past 58 years. He has seven children and 19 grandchildren. Three of his children entered the medical profession. In addition to his physician son, he has two daughters who are nurses. He practiced family medicine in Pennsylvania for 48 years, and he did it all by striking a healthy balance guided by his Catholic faith.

When he began his career almost a half a century ago, John Lane pursued family medicine, although the landscape of medicine was changing to specialized medicine.

“I liked taking care of the whole person, and I practiced medicine before Medicare and HMOs, when we still made house calls,” he recalled. “I found patients would communicate their feelings and confide in you as their family doctor. It was an awesome response to family medicine.”

Yet with the expansion of medical knowledge and skills along with the classification of family practice as a board-governing speciality, John Lane needed to continually study many areas of medicine in order to stay up-to-date in his field.

Despite the challenge, he says he has no regrets: “I was very happy in family medicine.”

In his years in practice, first on his own, then with a partner, and eventually in a group, he always tried to make time for his family life. Being home for his family dinner time was a priority. Teaching his children Christian morals and trying to do family prayers as much as possible were also priorities. Early on when he and his wife had a child a year for the first
five years and then two more a little further apart, he tried to help as much as he could.

In fact that is one of Jack Lane’s earliest memories of his father as a physician.

“One of my earliest memories was of my father taking my two younger brothers and me—ages 5, 6 and 7—to the hospital on the weekends to do rounds,” he said. “This would give my mother a much needed reprieve so that she could attend to my other, younger siblings without chasing after us at the same time. He would leave us in the family waiting room to wreak havoc while he went off to see his patients. If he returned from rounds before he got a call from hospital security, he’d take us to the snack shop and buy us ice cream.”

John Lane credits St. John Paul II and his writings for inspiring him to be not only a better Catholic, father and husband, but also a better doctor. His writing on life issues compelled him to be a firm pro-life, pro-chastity doctor.

“I tried to promote natural family planning and the sanctity of life in organized medicine, but I hit a stone wall,” he said. “I didn’t get a good response.”

He felt like David versus Goliath trying to fight what seemed like an uphill battle, so he was very happy when another physician introduced him to the Catholic Medical Association. There he found support, friendships, knowledge and inspiration, he said.

“The Catholic Medical Association educated me in Catholic medical ethics, especially end-of-life care. It taught me how to communicate Christian moral principles in medicine,” John Lane said. “And you meet some extraordinary people at the conferences, who inspire you to put your opinion in the public square.”

The treasure he found in the CMA led him to get involved in the leadership of the organization eventually serving as president for the 2003–2004 term.

Jack Lane also credits his father for recruiting him to the CMA.

“Initially I would travel to the national conferences with my golf clubs and try and convince [my father] to ‘play hookie,’ skip the meeting, and head to the nearest golf course,” he recalled. “However the more time I spent at the conferences and the more relationships I developed with other members, the deeper I entered into my faith life, my family life, and my professional life as a Catholic physician. The CMA played a very big part in my reversion to a more robust Catholic faith.”

He also went on to follow in his father’s footsteps serving as CMA president for the 2012–2013 term. It was not the first time that his father’s advice proved to be life changing for him.

When Jack Lane was in college pursuing a pre-medicine degree, he had doubts about whether he would be able to tend to his patients’ pain and suffering. His father suggested he take a job working as a nurse’s aid at a local nursing home.

“The experience was life-changing, which might have been his intent in making the suggestion,” he said. “After three months of caring for those who were infirm, demented, depressed and dying, I felt like I was up to the task. I learned more about compassion that summer than I did in all the rest of my medical training.”

Jack Lane went on to attend Jefferson Medical College of Thomas Jefferson University in Philadelphia, like his father, and joined the U.S. Navy to help pay for his schooling.

“I had a four-year obligation with the Navy coming out of medical school. I was considering training in ophthalmology, but the Navy didn’t need eye doctors at the time,” Jack Lane said. “I picked from a list of specialties for which applicants were most likely to receive military deferments from active duty until completion of their training program. Radiology was on the short list, so I went with it.”

He did an additional two-year fellowship in neuroradiology at Thomas Jefferson University Hospital, and then served four years at one of the Navy’s teaching hospitals in Oakland, California. After that, he spent four years in private practice before taking a teaching position in radiology at the Mayo Clinic in Rochester, Minnesota.

He has been with the Mayo Clinic for 16 years and says his Catholic faith plays a role in his practice and teaching of medicine.

“Practicing in proximity to our medical school, the members of our local CMA guild mentor our Catholic medical students,” he said. “We also run a brown bag lecture series for the students and invite them to all our guild functions. It has been the most satisfying part of my career.”

Like his father, he is also a devout family man. He has been married to his wife, Mary Frances, for 32 years and has four grown children and two grandchildren.

“It’s not common for Catholic physicians to practice in a professional environment that is supportive of the faith,” Jack Lane said. “We need to encourage each other in our desire to continue the healing ministry of Jesus Christ.”

His advice: “I would encourage all Catholic physicians to join the CMA and attend our national conferences. You’ll like what you see so much, you’ll want to leave the golf clubs at home.”
Dr. Harold Kletschka
The Father of the Artificial Heart

BY NADIA SMITH

It seemed to those around him that Dr. Harold D. Kletschka was anointed from a young age. He was a man of profound faith, sheer brilliance, relentless determination and genuine empathy. He earned international acclaim as a pioneer in the field of heart surgery and became known as the father of the artificial heart for his revolutionary medical invention that proved to be more efficient than the human heart — an invention he consecrated to Our Lady of Mount Carmel.

“Harold was a saintly man, whose life became a living prayer,” said his youngest sister Barbara Kletschka. “We could not have survived without the gift of faith and prayer in our lives.”

FROM THE BEGINNING

From a young age Kletschka felt compelled to help others in physical need. When he was just eight years old, he was profoundly affected by the death of a schoolmate who died suddenly of what today would be a preventable disease.

“Why can’t we discover something to cure it?” he said in his biography “To Change the Heart of Man” by David Racer. He knew that there had to be a way to prevent premature deaths and alleviate the needless suffering of people.

“During those years he listened to doctor stories on the radio and bought books about doctors,” Barbara Kletschka said. “The heart in particular stood out to him.”

In the midst of World War II, Kletschka entered the University of Minnesota School of Medicine, at the time ranked number one in the nation. Due to his asthma and hay fever he was not fit for military service, however, the war greatly impacted his medical education.

Tens of thousands of doctors, nurses and medical practitioners were needed, both at home and abroad, because of the projected high numbers of injured and casualties due to the war. For that reason the wartime protocol required condensing the four-year medical training into two years and ten months. That meant going to school year-round with few breaks. Many students flunked out.

Kletschka graduated from medical school in 1947 and did his medical internship at King’s County Hospital, today known as SUNY Downstate Medical Center in Brooklyn, New York. After that, he went on to study under the “Father of Thoracic Surgery,” Dr. John Alexander, at the University of Michigan Medical School.

Kletschka was drawn to thoracic surgery — then an emerging specialization — because doctors and researchers in this field were making giant leaps in curing deadly diseases and extending lives, which was exactly what he wanted to do ever since he lost his classmate in grade school.

He continued his training at Bratrud Clinic in Thief River Falls, Minnesota, and did his residency back at SUNY Downstate Medical Center in Brooklyn, where he became the chief resident of Thoracic Surgery. There, he was able to set up the hospital’s new residency training program, which had the Thoracic Board’s approval within nine months. By the time Kletschka completed his formal training in 1955, he was so highly distinguished that the United States Air Force wanted his skills.
THE ARTIFICIAL HEART

The Air Force ordered him to report to the largest and best-equipped hospital at Parks Air Base in northern California. It was during that time that Kletschka turned his attention to his dream of inventing a permanent, implantable artificial heart. With the permission and support of his commanders, he started the U.S. Air Force Cardiovascular Research Center as the founding director, which meant he was able to direct the research toward developing his artificial heart. It also initiated the entrance of the U.S. Air Force into the field of open-heart surgery.

After his service, he eventually landed at the Veterans Affairs Hospital in Syracuse, where he was appointed Chief of Thoracic Surgery and won a $20,000 grant for the artificial heart project. It was then that Kletschka was compelled to consecrate the project to Our Lady of Mount Carmel.

His biographer David Racer explains: “The artificial heart would dramatically change the world by offering health to millions of people who otherwise would die from incurable heart disease. As a man of devout Catholic faith, he believed that... evil conspires against human life, and something that would do as much good as would the artificial heart, would certainly be open to spiritual attack.”

It was for that reason that Kletschka made the consecration, and he was very specific as to what that meant to him as he explained, “This action means the future course of events are in her care and for her to direct them so they progress according to God’s will,” he said. “It means she can proceed by eliminating all evil interference and move the program forward to a smooth and successful early conclusion, or she may desire to use the undertaking to send a spiritual message, or she may use it to allow untold suffering to the one making the consecration and, if accepted by that person, to use that suffering to gain merits to serve divine purposes.”

With complete surrender he moved forward, of course hoping it would be the first option, however, as time would tell, “she had other designs,” he added.

The VA turned out to be a hindrance, not a help to the artificial heart project. Internal politics and jealousies almost killed the project and set it back several years.
Kletschka had teamed up with a biomedical engineer, Edson Rafferty; and together, without the grant money originally promised and despite all the attempts to ruin their careers, they were able to develop the Kletschka/Rafferty artificial heart.

They eventually had to start their own publicly funded research-and-development company called Bio-Medicus to carry on with research of the artificial heart, knowing that they were closer than ever to finally making it a reality. They focused first on making and perfecting the pump component that would be the “engine” that powered the artificial heart. It could also be marketed on its own as a sophisticated blood pump for open-heart surgery. That in turn would provide more revenues to complete the project.

**BIO-MEDICUS**

Five years later they had finished all their animal testing and concluded that the artificial heart pump they had invented was atraumatic, which meant it caused little to no blood damage, and worked better than a human heart. No other blood pump in the world could make that claim. Human trial was the last step, but Bio-Medicus could not find a surgeon willing to risk using it.

“I asked Harold to tell me what it involved,” Barbara Kletschka said. “I knew that if he said it was ready, it was. He wasn’t satisfied with anything less than perfect, so I volunteered.”

She had just turned 40 years old and was in good health other than suffering from allergies like her brother. There were always risks involved, and in this case her life was at stake, but she was determined to help her brother and trusted him completely. They did the historic test July 16, 1975, the feast of Our Lady of Mount Carmel, to determine if in fact the pump would circulate human blood without causing it any damage.

“The whole procedure lasted about 5 minutes, which was more than enough time to know if it worked or not,” she said. “Afterwards he came and gave me a kiss and said ‘thank you so much for what you did. You are a hero.’ I didn’t feel like a hero.”

Barbara Kletschka made history that day and soon after the pump, which became known as the Bio-Pump, was used in open-heart surgery and worked perfectly. Bio-Medicus had its revolutionary blood pump with calls coming in from around the world to purchase it. Kletschka was elated because the final stage of producing the implantable artificial heart could begin. But it never did. Instead greed lead the board of directors to push Kletschka and Rafferty out in order to take control of the company and the profits from the Bio-Pump.
“When everything seemed inevitable, that Harold would lose his company and not be able to continue his work on the artificial heart, I sat beside him at home crying, and said, ‘I just can’t believe that our Blessed Mother would not allow you to complete your work,’” Barbara Kletschka recalled. “Harold said, ‘It may be that Our Blessed Mother doesn’t want the artificial heart — She may want our suffering more.’ I witnessed Harold totally surrender himself to God’s holy will … never compromising with evil or immorality.”

Kletschka and Rafferty financially could not continue to litigate against the Bio-Medicus board and were forced into a settlement that included a confidentiality provision, which effectively prevented Kletschka from talking about his development of the blood pump and completing the artificial heart. Without Kletschka and Rafferty, however, Bio-Medicus was not able to continue as an independent entity and was subsequently acquired by Medtronic.

HIS SECOND LIFE’S WORK

This incredible persecution became a blessing when it allowed Kletschka to begin his other life’s work, writing “A Treatise on Human Life — An Unalienable Right,” a definitive work providing legal, constitutional and moral proof against Roe v. Wade and the practice of elective abortion in the United States.

Cardinal Raymond Burke hoped his treatise would “inspire many, especially physicians, to be faithful and generous witnesses of the Gospel of Life.”

During that time, although a world-renowned surgeon, he chose to work for ten years at the Brainerd State Hospital in Minnesota serving mentally handicapped and substance-abuse patients as he wrote his treatise.

“He was always reading and studying religious things,” Barbara Kletschka recalled. “I truly believe if he had not become a doctor, he would have become a priest.”

Though Kletschka suffered greatly during his medical career, he was eventually fully vindicated in the courts and went on to patent and design the permanent, fully implantable artificial heart. He died from a sudden massive stroke March 6, 2004, before he could finish the heart for testing.

However, his heart pump continues to be used today in more than half of the world’s heart surgeries and has saved more than 20 million lives in the last 30 years. It is considered by the international artificial-heart authorities as the gold standard for any future blood-pump development. Better still, a cause for his canonization is being considered.

It was Barbara Kletschka who discovered the Catholic Medical Association after his death.

“Harold would have loved being an enthusiastic member of the CMA,” she said. “To be around comrades who believe the same and who practice within the same moral parameters was something he searched for as a physician. I’m happy to support the CMA on his behalf. I think it’s an outstanding organization.”

For her part, she believes that God has called her to tell her brother’s life story and, through it continue to save lives by changing and inspiring hearts.

Barbara Kletschka is available to speak to any CMA guild event regarding the life and works of Dr. Kletschka. More information can be found at www.kletschkapublishing.com.
Throughout life it is always a gift to have some place to come home to, people who understand who we are, where we come from, and what our lives are about. It is a gift to have a family. I am so blessed with an incredibly supportive and loving biological family that has taught me how to live well, serve others, pray and love. When I entered medical school, I sought to have a “home base” in this area of my life to resemble the support and encouragement I had growing up. Over the last several years, I have come to discover just that in the Catholic Medical Association: a home and a family amid the exciting times, trying challenges and deep growth that encompasses medical education. Not only has the CMA and its members been a steady support, strong witness and perseverance example of virtuous medicine, they have also gone above and beyond to provide a deep intellectual formation, a desire for the pursuit of Truth and an invitation to live life to the full — a life dedicated to Christ and the service of His Church in each small moment with everything we are.

I was blessed to first encounter the CMA through Catholic medical students and guild members in my local community while I was applying to medical school. As I shadowed a local guild member, I had the privilege to witness the beautiful impact she had on each and every one of her patients’ lives. What a pure example of the Gospel in action.

At my first national conference, I was overwhelmed with the joy of community that comes from serving the Lord in a common vision and mission. Every year the conference feels more like a reunion of a family united in Christ as I meet and reconnect with so many. Out of this communion arises a mission to go forth, renewed in the gift it is to be of service to the Lord in this particular vocation. This vision was made especially clear to me at the CMA Bioethics Boot Camp. Each morning after the ultimate communion — the Mass — we went forth together in the mission of sanctification, service and the pursuit of Truth.

I am incredibly humbled at the gift it has been to serve as the president of the CMA-Student Section. The national board members, physician mentors from my local guild and CMA members whom I have encountered at conferences are all examples of tireless service to uphold the Truth in their offices, communities and nation. With wonderful leaders to follow in the CMA family, it has been an honor to journey with all of you, the CMA members, my fellow medical students, the residents who laid a solid foundation for us and my co-officers, Sally, Ana Maria, Daniel, and Elizabeth. I will be forever grateful for everyone’s role in the CMA family!

Elizabeth Gorecki is a fourth-year medical student at the University of Minnesota.
CARA BUSKMILLER, M.D.

Making It Possible for Students to Teach Natural Family Planning

I knew as a first-year medical student that I wanted to become a natural family planning (NFP)-only OB-GYN. I had a vague idea that there were multiple methods, but I didn’t know what they were. I had a vague idea that you could learn to teach them and that there was also training for physicians, but I didn’t know what it entailed. And I had a vague idea that I would want some training before residency, but I had no idea when I would do it.

Slowly, I learned that there are at least five evidence-based methods of NFP or fertility awareness: the Billings Ovulation Method (BOM), the Creighton Model FertilityCare System (CrMS), the Marquette Model (MM), the Sympto-Thermal Method as taught by the Couple to Couple League (CCL), and the Fertility Education and Medical Management (FEMM). I learned that all five methods offer rigorous education and certification for those who want to teach patients how to use them. I learned that CrMS, MM, and FEMM have education targeted toward physicians who want to learn to manage patients based on their charts.

Then I realized how much it would cost me to be trained in all the methods. MM training, all online, costs $750 for the introductory course and Medical Applications...
God brings people into our lives in often unexpected ways. That was the case for residents Dr. Paul Day and Dr. Amber Beery, who first met on a computer screen during a videoconference meeting nearly four years ago.

As medical students from the University of Louisville and Ohio State University, respectively, they each felt God calling them to serve medical students across the country as part of the Catholic Medical Association Student Section (CMA-SS).

Beery assumed responsibilities as the CMA-SS vice president in December 2011, at which time Day became the communications director. As part of the national student board, they would see each other on monthly conference calls, as they planned newsletters, national novenas, days of service, the first national medical student boot camp and programming for students at the national conference. Their shared passion for leading a Christ-centered life, and practicing medicine in the image of the Divine Physician inspired them to help their peers not merely survive medical training, but also thrive in it.

It was not until the 2012 St. Paul conference, ten months later, that they met in person for the first time. That conference not only brought Beery and Day together, it also brought almost 80 medical students to the Twin Cities.

They would continue to work side-by-side for the CMA-SS for another year and a half before the couple started dating. By the 2013 Santa Barbara conference their friendship was solidified, and there was the beginning of something more.

“I remember being told that when you run toward Christ and you look next to you and see who is running with you, that person may be a good future spouse,” Beery said. “Paul has not only been running with me, he keeps me running in the right direction.”
In March 2014, both Day and Beery attended a local CMA guild’s retreat. That weekend, through prayer and discernment, they began dating.

Day and Beery relate how their relationship, one founded on prayer and inspired by common faith, is sustained by prayer.

“When we first started dating, we decided that praying evening prayer together over the phone would be a way we could talk every night and pray together and encourage each other to grow in faith,” Day said. “This has become something that we look forward to very much and continue now that we are in the same place. I think our prayer as a couple has been the thing, most of all, that has helped us to grow closer together.”

A week after dating, they discovered, through The Match where they would be training for residency. Day went to Indianapolis to train in family medicine. Beery went to Cleveland to train in pediatrics. Although distance separated them yet again, their relationship was firmly planted in Christ. Their shared beliefs, their common interests, and their thirst for intellectual conversation nourished that relationship.

On February 18, 2015, Day proposed. He and Beery spent the day together in Columbus, Ohio — a halfway point for them to meet. The day began in Eucharistic Adoration and finished in their engagement — a fitting reflection of how their relationship began and continues to be centered in Christ.

Day and Beery are set to be wed October 17, 2015.

“It has been such a joyful journey so far, and we are excited for the Lord to challenge us and bless us in our marriage,” Beery said.

While Day added, “I can’t wait to be married to my best friend.”

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When the St. Louis Guild heard that the U.S. Conference of Catholic Bishops was coming to town for the annual Spring General Assembly, held June 10–12, they were excited to offer their help. The St. Louis Guild members received offers of help from local surgeons, emergency room physicians and internists.

“Everyone was excited to be a small part of the meeting, and to welcome our bishops,” said Dr. David Stansfield, the guild president.

In the past, bishops were only provided with a list of nearby emergency rooms, pharmacies close to the hotel, and local doctors and dentists willing to see them if needed. They did not have a tradition of on-site physician help, nor did they generally use the local CMA guild physicians. That changed at this meeting when the U.S. Conference granted the CMA guild permission to have a physical presence providing them a table in the conference center to be visible to the bishops. This enabled the guild members to provide assistance in a few instances.

“On the day prior to the start of the meeting, one of the bishops needed care for weakness associated with a previous stroke,” Stansfield said. “Dr. Gerry Mahon, our guild treasurer, made a house call and then made arrangements so that the bishop could continue to attend the meeting. On the days of the meeting, I was able to be of service arranging for home health care to draw blood on one of the bishops whose travel schedule did not permit following up with his physician back home. The extent of treatments we offered dealt with a couple of rashes and a headache.”

The opportunity to be present at the meeting afforded guild members a chance to meet and greet with the bishops and share the mission of the CMA.

“The time was very enjoyable and valuable both in terms of service to the USCCB and continuing to build a collaborative relationship,” Stansfield said. “I hope that this was just the start of a long tradition of the CMA’s local guilds helping the bishops when in town.”
The Catholic Medical Association’s outreach efforts in Florida were jump-started by a recent email in which CMA president Peter Morrow linked two Florida CMA guild presidents. They both planned to attend the Florida Medical Association July 31–Aug. 2 meeting in Orlando. As a result, Drs. Angeli Akey and Diane Gowski, as FMA delegates, co-sponsored and advocated for two ethical resolutions for new FMA policy. “Health Care Rights of Conscience” and “FMA Opposition to the Sale of Aborted Fetal Body Parts” were presented to the FMA House of Delegates.

“Our efforts were met with resistance including from doctors there who support Planned Parenthood and abortion,” Gowski said. “Both resolutions were referred to the FMA Board of Governors for a decision expected sometime within the next year.”

Both Akey and Gowski plan to advocate to the FMA Board of Governors to implement both resolutions into FMA policy.

The St. Gianna Molla Guild of Northeast Wisconsin hosted a faith and fellowship event July 16, which featured a presentation on “A Deadly Silence: What Advocates of Euthanasia and Physician-Assisted Suicide Won’t Tell You.” The Canadian speaker, Alex Schadenberg of the Euthanasia Prevention Coalition, gave a powerful presentation on the worldwide experience regarding the current tsunami of euthanasia and PAS.

“He debunked many popular arguments favoring euthanasia, and instead logically and faithfully presented arguments for the protection of life,” said Guild President Robin Goldsmith.

An in-depth question-and-answer session followed. Before the presentation, the evening began with the celebration of Holy Mass. After the Mass, attendees were able to visit vendor booths and the Catholic bookstore and visit with each other before having a buffet dinner. Over 120 people from around Wisconsin and the surrounding areas were in attendance.
The Nashville Guild

The Nashville Guild has been busy organizing our traditional annual events including our annual White Mass with Bishop David Choby of the Nashville diocese. We flew in speaker, Fr. Bill Joensen, who shared his perspective on the “The Church as Field Hospital.” He delivered a powerful talk that was well attended, in which we were able to envision our role as physicians playing a key role in the Field Hospital — the Church. We also had our annual Hippocratic Oath banquet, in which neonatologist Dr. Robin Pierucci inspired us with the compassionate care of palliative care in the perinatal period. One of the year’s highlights was the Evening of Lenten Reflection, hosted by the Dominican Sisters of St. Cecilia at their Motherhouse. This is always a highlight because we have the Sacrament of Penance available to all attendees. For our monthly meetings, we had numerous guest speakers discuss topics ranging from end-of-life issues to the formation of young physicians with the goal of moving from being physicians who are Catholic to Catholic physicians. We had other intriguing monthly topics such as “Depression: A Catholic Perspective” and “Suffering, Addiction, and Healing in the Lord of the Rings” by noted author Joseph Pearce. Both physician and medical-student representatives from our guild attended the national CMA conference in Orlando.

This year our guild is sponsoring four medical students to attend the national conference in Philadelphia. An exciting advance for our guild is that we now have a robust relationship with our students of the Society of Saints Cosmas and Damian (SSCD) as they have become a formally approved student section of the CMA. This is wonderful, and as part of our “new evangelization” on campus, it is critical that our SSCD is co-hosting events for the medical students on a regular basis with the Protestant group Medical Christian Fellowship (MCF). Just this past week we had our first SSCD/MCF “Lewis Lunch Talk,” in which we reviewed and discussed the C.S. Lewis book, “The Weight of Glory.” At this talk, we had over 40 Vanderbilt medical students, 16 of whom were newly signed first-year Catholic SSCD members. Lastly, it is with great pride and thankfulness that we claim the first ever nuptial celebration to arise from the CMA Boot Camp, at which our current SSCD president, Brittany Tielbur, met her now fiancé, Luke Gatta. They are to be wed soon, and this is a testimony to the Holy Spirit being alive and well in the hearts and minds of our young Catholic physicians in the CMA. Our guild looks forward to continuing to grow in faith, formation and fellowship as we continue our ministry in Nashville.

St. Raphael Catholic Medical Guild of Indianapolis

The St. Raphael Catholic Medical Guild of Indianapolis has been growing rapidly over the past year. We meet monthly at a parish in town and discuss an ethics article of The Linacre Quarterly. Recent topics have included vaccine controversy; homosexuality and hope; contraception and informed consent; and abortion. We support two student chapters of the CMA at both Indiana University School of Medicine and Marian University School of Osteopathic Medicine, the first Catholic medical school in the United States Service and other outreach activities have included volunteering at our local St. Vincent de Paul food pantry, praying outside Planned Parenthood during the 40 Days for Life campaign, and touring the local pregnancy center right next door to the abortion center. We celebrated the first White Mass for the Archdiocese of Indianapolis last fall, and the next Mass is set for September 30 with Archbishop Joseph Tobin. Another recent venture is a monthly show on our local Catholic radio featuring CMA members, as well as our chaplain, titled, “The Faith Filled Physician,” which will air during drive time after work, and people will be able to call in with medical and ethical questions for the panel to discuss. We are blessed to have a faithful and committed chaplain, Fr. Ryan McCarthy. He has a Ph.D. in moral theology and is instrumental in helping guide our moral and ethical discussions. We look forward to recruiting more members in the coming months, as well as increasing our outreach and community presence.
The Finger Lakes Guild

The Finger Lakes Guild has had a busy and productive year. We had our first White Mass in October 2014 at Sacred Heart Cathedral, celebrated by Bishop Salvatore Matano. We are busy planning the next one for this coming October. Also, we sponsor an annual bioethics seminar each fall. We have a bimonthly journal club reviewing articles from *The Linacre Quarterly*. Over this past summer we heard one of our members present her experience working in the medical missions, and we also held our third annual Summer Soiree — an evening event at the home of one of our board members. Finally, our most recent effort, in collaboration with the Diocese of Rochester, was establishing a Continuing Education Fund to be used to provide assistance to health care professionals and pastoral ministers who are interested in furthering their education in Catholic social teaching and health care ethics.

Southern Nevada Guild

We are honored and pleased to announce the formation and approval of the Southern Nevada Guild of the Catholic Medical Association. Our guild was formed in response to a need in our community for a visible and identifiable Catholic organization of physicians. This need was expressed to us by our pro-life liaison to the diocese, our chaplain, several priests and other laity. Our mission is to support our bishop, Catholic residents, medical students and colleagues in upholding the principles of our Catholic faith in the practice of medicine. We will also be a local Catholic resource to our community providing education and medical care consistent with Catholic principles. Our guild covers the Nevada counties of Clark (which includes Las Vegas and Henderson) Esmeralda, Lincoln, Nye and White Pine. Our bishop is the Most Reverend Joseph A. Pepe and our chaplain is Reverend Monsignor Greg Gordon. Our founding members include: President Dr. Sharon Frank, Vice President Dr. Crispino Santos, and Secretary-Treasurer Dr. William Von Tobel. Board members at large include: Dr. Darlina Manthei, Dr. Scott Manthei and Dr. Christopher McNicoll. Our guild is planning a White Mass with Bishop Pepe on Oct. 14, 2015, in honor of the Feast of St. Luke, at our Guardian Angel Cathedral located on the Las Vegas Strip. This will be our inaugural event, and we hope to make it an annual Mass. Some of our members will be attending the national conference in Philadelphia and look forward to joining with the other guilds of the Catholic Medical Association. For more information about the Southern Nevada Guild contact Sharon Frank, M.D., sfentmd@aol.com.
2015 CHARTERED GUILDS AND PRESIDENTS
Upholding the principles of the Catholic faith in the science and practice of medicine.

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The next time he met her, she placed a medal of the Immaculate Heart of Mary in the palm of his hand.

Another journey brought Cunningham and his late wife Florence to Rome where they met Monsignor Hugh O’Flaherty, the Irish priest who heroically rescued 6,500 Allied forces and Jews during the German occupation of Rome in World War II. The priest, whose life is immortalized in the film, “The Scarlet and the Black,” hosted the Cunninghams for more than two weeks, during which time he skilfully maneuvered through crowds to position them in clear view of Pope Pius XII at an audience at Castel Gandolfo — the papal summer residence.

Cunningham had the opportunity to meet other popes as well. Following an audience in Rome, he presented Blessed Pope Paul VI with a CMA program booklet as a way of informing him that the association was in accordance with the magisterial teachings of the Church. Years later he met Pope St. John Paul II on two occasions, one of which was during a meeting of the International Federation of Catholic Physicians on the subject of hydration and nutrition for patients. Cunningham had what he terms “an awesome experience” speaking to the pope about people he knew who were having trouble in their lives, seeking the pontiff’s prayers.

Cunningham traveled to New York’s Yankee Stadium to attend the papal Mass said by Pope Benedict when he visited the United States. He also attended a Wednesday papal audience with Pope Francis in Rome recently. He hopes to attend the upcoming World Meeting of Families and the visit of Pope Francis to Philadelphia.

Perhaps one of the greatest experiences of his life, according to Cunningham, was being asked to serve as a medical expert for one of the first miracles attributed to the intercession of Venerable Fulton J. Sheen. A native of Illinois, Archbishop Sheen was well known in the 1950s for his television show “Life Is Worth Living,” and whose cause for canonization is now under consideration.

Cunningham had met the archbishop a number of times during his life. Once while attending an American Medical Association conference in New York City where Archbishop Sheen was a speaker, two altar servers were needed to assist the archbishop with morning Mass. Cunningham and a colleague volunteered for the job and, after Mass was celebrated, heard some of Fulton Sheen’s classically humorous stories firsthand.

As part of the diocesan review of a reported miracle, Cunningham was asked to participate in the medical analysis of the case of a 72-year-old Champaign, Illinois, woman who had undergone surgery on her lung when a tear was noticed in her main pulmonary artery, which was infected. As the surgeons worked to repair the tear and stop the bleeding, the woman’s husband is said to have prayed to Archbishop Sheen for his intercession. The woman pulled through and survived. After examining all of the reports and hearing from the surgeons who had operated on the woman, the realization of the certainty of a miraculous event was stunning to Cunningham not only as a Catholic, but particularly as a physician.

Reflecting upon his own journey as a physician, Cunningham would advise young doctors and those in training to associate with their college or medical school’s Newman Center, to become members of their local CMA guilds, and to attend activities sponsored there.

“Allways aspire to be well trained and educated in the practice of medicine,” he said. “You will need to be well respected as a physician before you can motivate others or persuade their thinking. Always be the best doctor you can be within whatever area of practice you choose.”

One word that comes to mind regarding his life’s journey is gratitude: “I’m thankful to God for all He has done in my life,” Cunningham said. “I’m thankful for all of the opportunities He has placed there, for my family, wife, children, grandchildren and great grandchildren, for my parents of course, and for my five brothers and sisters.”

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MARRIAGE AND MEDICINE / continued from page 11

backlash she would receive. It led her to leave the group almost immediately and go into practice on her own as a natural family planning-only OB-GYN in what she described as “a huge leap of faith.”

“The spiritual awakening Kathy had, I believe, was her ‘slap-in-the-face’ from the Holy Spirit to encourage her to change her OB-GYN approach away from birth control and sterilization that she had been trained in,” Anthony Raviele said.

The change was so swift that her colleagues thought she was crazy, and “we actually sent her to a psychiatrist to convince everyone that this conversion was real,” he added.

She is trained in all forms of natural family planning and does medical abortion reversals. Since her decision 24 years ago to practice medicine as a faithful Catholic doctor, she has come to realize the type of care she provides is making a difference.

“As Catholic doctors we do good to our patients both physically and spiritually and can give them guidance in the faith. Now I go home, and I know I’ve helped my patients,” she said.

Both are members of the Catholic Medical Association and Kathleen Raviele is a past-president. She currently serves on the CMA’s FIRE committee, which aims to provide the spiritual resources the members seek to help them understand Church teaching. She also represents the CMA as a member of the U.S. Conference of Catholic Bishops Pro-Life Committee.

What the Ravieles have learned over the years, she says, is that “we shouldn’t be afraid to step out in faith and do what God has called us to do.”
Barbara Kletschka extends her gratitude to all members of the CMA for upholding the principles of the faith in medicine.

Visit KletschkaPublishing.com to book Barbara for a presentation to your guild or any group.

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Welcomes the Holy Father, POPE FRANCIS to the World Meeting of Families 2015 Philadelphia

The CMA is at Booth 130 in the WMF Exhibit Hall. Please stop by and say hello.
course. FEMM, a two-day training out of town, would cost me $1500, plus a plane ticket and lodging. And CrMS tells participants in its two week Medical Consultant training to budget $5000 for textbooks, lodging and tuition. I was not even eligible for CCL — I am single, they take only couples. When could I escape from rotations and coursework for all this? And how could I pay for it? I started to think I would just read what I could find on Wikipedia and wait until residency for training.

Then the CMA Student Section came to the rescue when I was a fourth year. They lowered the price of MM to $300 and allowed me to go through CCL’s training modules for free. This greatly reduced the financial burden of the other trainings, and I went through BOM, CrMS, and FEMM as well.

As a result, I am now what I dreamed of being: I am an intern at St. Louis University’s Obstetrics and Gynecology program, and I have gone through training in all five of the methods I identified earlier. My MM training was easy to do, and I gained a lot from it. CCL charts proved the more challenging to learn of all the methods, but the support system behind the training was strong and personal — I had many kind emails from CCL’s teaching team, helping me through the quizzes and tests.

There is no way I could see patients in clinic and counsel about NFP with confidence without the opening that CMA-SS created for me. I can now walk into a room and truly present a patient with all her options, and help her find a method that fits her. I’m creating a brochure that I can hand out to clinic and postpartum patients on NFP resources in my community. Moreover, I’m trying to start an NFP half-day clinic at my program so that other residents can learn what I’ve learned. This is all possible because CMA-SS worked to negotiate discounts with CCL and MM.

I have also noticed that I have more courage when I dialogue with my fellow residents, my non-Catholic friends and even my attendings. I know the facts: NFP is hard, but it’s effective and good for couples, families and souls. My confidence has even strengthened the faith of some of my family members.

I encourage every Catholic medical student regardless of what they specialize in to take advantage of one or more of the discounts that CMA makes available. Not only will you gain a new skill set, but you will also be able to answer responsibly when people ask about the Church and birth control, the effectiveness of NFP, and what people who do not like contraceptives can take. You will gain knowledge for planning your own family, too, and you’ll be a stronger Catholic to set an example for those around you.

Obtain CMA discounts for NFP training by contacting Elizabeth Gorecki at ejgorecki@gmail.com.

Dr. Cara Buskmiller is an intern at St. Louis University pursuing her residency in Obstetrics and Gynecology.
Invest in the future healers of our wounded culture!

Ours is truly a wounded and broken culture and as CMA members we are called to be ministers of spiritual and physical healing. Through your generosity last year we were able to offer conference scholarships to 56 medical students and residents. Additionally, the CMA Boot Camp provided 35 medical students with a life changing educational experience of Catholic faith and morals. All of this, and more, was made possible by your investment in the future healers of our culture.

Take a leadership role in advancing this year’s development goals!

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