

The Pulse

OF CATHOLIC MEDICINE



CATHOLIC
MEDICAL
ASSOCIATION

FALL/WINTER 2017 ISSUE 2

MEDICAL MISSIONS

"Medical missions help me to reconnect to why I went into medicine in the first place."

- DR. BRIAN BAMBERGER

Bishop James D. Conley:
Finding Calcutta

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Medical Mission and
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CATHOLIC MEDICAL ASSOCIATION



DEAR CMA MEMBERS AND FRIENDS,

I am delighted to introduce you to the Medical Missions issue of the Pulse of Catholic Medicine, where the missionary work of a few of our talented CMA members will be highlighted.

I believe that I can speak for many when I say that it is a tremendous privilege to serve as a missionary in that the missionary has the honor of serving as God's emissary of healing, mercy, and love. I hope the stories you are about to read will inspire you to seek out an opportunity to serve in this capacity if you have not already done so.

Do not despair if you cannot travel and serve. We can, as St. Therese of Lisieux did, pray for all who serve as missionaries. More importantly, we can all serve as missionaries right where we live. From its very inception, the Catholic Medical Association has always had as one of its goals to evangelize the culture. In his apostolic exhortation, *Evangelii Gaudium*, Pope Francis invites us all to enter a "new phase of evangelization" as "missionary disciples" — a phase marked by ongoing "missionary conversion" (EG 8-9).

I encourage you to be mindful of the many opportunities we are presented with daily in our workplace and home to evangelize others. The home is where it all begins. Those of us who had the opportunity to attend our 86th Annual Educational Conference have hopefully come away invigorated and recommitted to carrying on in our missionary work of evangelization.

May God continue to bless you in your service to Him through the Catholic Medical Association.

Yours in Christ,

Marie-Alberte Boursiquot, M.D., F.A.C.P.
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CONTRIBUTORS

Brian Bamberger, M.D.

Tucker Brown

Bishop James D. Conley

E. Wesley Ely, M.D., M.P.H.

Renee Foss

Erin Maguire

Michelle Stanford, M.D.

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Finding Calcutta

By

BISHOP JAMES D. CONLEY

ALMOST SEVEN MILLION PEOPLE LIVE in and around Nairobi, Kenya, in a river valley north of Mount Kilimanjaro. Nearly half of Nairobi's residents live in slums — in makeshift houses and tents, surviving on less than \$1.00 a day, where HIV, prostitution, and crime run rampant. Open sewers and garbage litter the streets. The ground is often a muddy mix of decomposing trash and human waste.

The slums of Nairobi are populated by families and children who work to survive amidst terrible conditions. They often find creative ways to work together. They are often people of faith. They often, in ways we cannot imagine, have not lost sight of their dignity, and have not lost the joy of human life. Still, no one should have to live in such terrible poverty, and it is a profound injustice that they do.

In *Laudato si*, Pope Francis says that those living in such abject conditions remind us that “in the present condition of global society, where injustices abound and growing numbers of people are deprived of basic human rights and considered expendable; the principle of the common good immediately becomes, logically and inevitably, a summons to solidarity and a preferential option for the poorest of our brothers and sisters.”

The Gospel demands, Pope Francis says, “an appreciation of the immense dignity of the poor in the light of our deepest convictions as believers.”

We have an obligation to prioritize the needs of the poorest, in each day of our lives, in response to Christ's call to love him in the service of the poor.

Early in my priesthood, I had the opportunity to spend ten years working in an office of the Vatican, and living in Rome. During that time, I was often invited to celebrate Holy Mass and to hear Confessions for the Missionaries of Charity, St. Mother Theresa of Calcutta's sisters, in their various houses throughout the city of Rome. On several occasions, I was asked to give retreats and to celebrate the ceremonies of Holy Week for their communities all over the world.

In the year 2000, I was invited to the Missionaries of Charity community in Nairobi, Kenya, for Holy Week, to serve more than 200 sisters, novices, and postulants. I was astounded by the lives of these sisters, who lived with the poor of Nairobi, and who worked each day to love them, to treat them with dignity, and to reveal to them the love of Jesus Christ. Their work was very hard. But it brought them close to the Lord, and helped them to

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CMA Doctor's Call To Medical Missions And The Catholic Church

By
ERIN MAGUIRE

CATHOLIC MEDICAL ASSOCIATION MEMBER AND family physician, Dr. Lisa Gilbert, first glimpsed her calling to medical mission work as a child — growing up with missionary parents in Africa. She recalls regularly witnessing Kenyan children on the streets sniffing glue to numb their hunger and despair. At the age of 10, she accompanied her parents to visit a makeshift HIV/AIDS orphanage where a young couple had begun to take in abandoned or orphaned infants. Most of the babies died before age five due to pneumonia, diarrhea, skin infections — anything that took advantage of their weakened immune systems and the lack of proper health care. At that point, Dr. Gilbert made a promise to herself: she would go back and work there as an adult.

Years later, she accompanied her parents on their relocation to Cape Town, South Africa midway through college to serve as a childcare volunteer at Nazareth House, a Catholic HIV/AIDS orphanage. There, she felt like the promise she had made as a child was finally being fulfilled and, although always a devout Christian having been raised in the Assembly of God denomination, it was also her first exposure to the Catholic Church.

She remembered bonding closely with all the children, but one baby in particular became like her own. “As she got sicker and sicker, I realized that if she didn’t die, I couldn’t leave South Africa. She passed right before I left, and I was with her when she died,” Dr. Gilbert shared.

The child’s name — Lucinathi, which means “God’s blessing is with us” — at the time seemed like a perplexing paradox to her.

“God is always with us, even in hard times, but at that moment it felt like God’s blessing had vanished because she had been taken,” she said. “This was my first experience with injustice and the profoundness of suffering. I never doubted God’s existence, but I was dealing with the grief of a broken fallen world. Her



parents had both died because of this disease, likely a result of infidelity, and now this child also had to die through no fault of her own.”

Dr. Gilbert recalls encountering deep suffering many more times in her missions overseas and work here in the U.S. — all of which has deepened her union with Christ.

“I learned to lean on Christ in a new way through these experiences,” she said. “To cling to Him as my companion on the journey.”

Following her year at Nazareth House, her faith and new-felt mission propelled Dr. Gilbert back to the University of Missouri, where she had been attending, to complete her Bachelor of Science, double majoring in Cellular and Molecular Biology and French. She went on to the University of Texas Southwestern Medical School in Dallas, and completed her residency in Family Medicine at Via Christi in Wichita, Kansas. It was there that she first felt herself drawn to Catholicism — an attraction that would deepen over the next four years. After her residency, she was accepted into the Via Christi’s International Family Medicine Fellowship, which gave her experience in a burn intensive care unit, in dentistry, trauma management, and other areas of expertise which American family doctors would normally refer out to specialists, but



CHILDREN OF NIGER

overseas doctors would need to handle for themselves. She also earned her certification in tropical medicine and traveler's health from West Virginia University School of Medicine. This specialized training prepared her for her five months in rural Niger as part of her practicum.

With most of the country located in the Sahara Desert, Niger was then statistically the worst place in the world to be a mother and, this year, is reported as the worst place to be a child.

"Women came in on donkey carts or motorbikes after being in labor for several days," she said. She remembers performing ten C-sections in one weekend resulting in only two live babies. Another weekend, she admitted 25 children, mostly for malaria. Five died between the minutes after admission to the next morning.

"Although I loved being in Niger in many ways, I also remembered feeling broken afterwards from seeing so many children die from infectious diseases and malnutrition," she said.

At that time, her experience in Niger led her to take a short break from full-time medicine to pursue other interests, namely studies in philosophy, theology, Greek, and Church history for two semesters at Augustine College in Ottawa, Canada. She described it as a beautiful ecumenical experience of continued encounter with God, which resulted in her being received into the Church as a Ukrainian Catholic — an Eastern Catholic rite — on Holy Thursday three and a half years ago.

"I was already a baptized and faithful Christian so in some ways, although very different from how I was raised or where I expected to go, it was the fulfillment of my baptism," she said.

Now, her ability to receive the Sacraments helps to restore her sense of peace and ally the "aching grief of so much wrong with the world," she said. "My participation in the sacramental life has allowed me to deepen in my faith and has strengthened my journey with the Lord."

Most recently, Dr. Gilbert went to rural Cameroon with Mission Doctors Association, the nonprofit that trains and sends U.S. Catholic physicians to serve people of all faiths in some of the most under-served areas of the world. There she served at the Catholic mission hospital of St. Martin de Porres.

"I loved experiencing the rhythm of life of this hospital and the ability to bridge the connection between physical and spiritual health, by being able to provide medicine alongside prayer with patients and families," she explained. "In the very center of the hospital grounds was a chapel for daily Mass in which nurses, doctors, lab techni-

cians, patients and family members would all come together to worship the One who truly heals us all, body and soul."

According to Dr. Gilbert, the people she served in Cameroon, as well as those she served in other impoverished countries, were always incredibly grateful for the medical attention they received as it was not lost on them the sacrifices the health care workers were making to serve their village or town.

"Even when there was nothing more that could be done or when someone would die despite our best efforts, there was such a kindness and gratefulness that was always surprising to me," she said. "Many simply trusted in the will of God and clung to their hope and faith in Christ, even in times of sorrow. Others seemed to experience hopelessness at first, but were encouraged by the care and concern of the hospital staff, nurses and physicians."

Her mission-integrated approach to medicine is evident in her new position as Clinical Assistant Professor for Via Christi's Family Medicine Residency Program. She looks forward to connecting medical students and residents with tropical medicine rotations, as well as assisting with the International Family Medicine Fellowship from which she graduated. She will continue to serve locally and overseas on medical missions as she can, but also has a new found passion — to empower others to fulfill their own vocation in medicine in whatever way they are called to serve.

"Doing mission work is perhaps one of the most fulfilling ways of using the gift of medicine," she said. "There is such a liberating and humbling joy because we find that we can no longer depend on ourselves but rather we must depend more fully on the Lord. It also allows us working in health care to give to others without receiving anything tangible in return, to offer ourselves in a unique way to those who often have much less than we do. Medical missions opens our eyes to see Christ not only in our neighbor next door, but also in our neighbor around the world. I think we become more aware of the plight of the sick, the poor, the marginalized, and more eager and able to respond to His call to love as He loves."



THE CMA: "IRON SHARPENING IRON"

In line with her mission, Dr. Lisa Gilbert sees the CMA as instrumental in strengthening her vocation. "I deeply appreciate having other like-minded physicians as encouragement, support and to challenge me in this vocation," she said. "This organization acts as 'iron sharpening iron' as we all become increasingly fit for service to Christ and to our neighbor — here or abroad."



Haiti Draws CMA Members to Medical Mission

By
RENEE FOSS



CMA MEMBER AND NURSE RUTH JOYCE HAS SERVED IN MEDICAL MISSIONS TO HAITI FOR THE PAST SEVEN YEARS.

IT MAY SEEM CURIOUS THAT IN THE FACE OF GREAT suffering, Ruth Joyce, a nurse and member of the Allentown Guild of the CMA, continues to go to Haiti on medical mission year after year. Since her first visit to Haiti in 2010, she has returned a total of eight times to the poorest country in the Western Hemisphere with plans to make another trip in November.

Why does she keep doing it? Because she loves Jesus through the people of Haiti. She recounted the day that a Haitian convicted her on this point.

“A man approached me, and I thought he just wanted to practice his English,” she recalled. “He asked, ‘You love Jesus?’ I said, ‘Yes,’ and smiled. He repeated his question and my reply was the same. He then stated, ‘You love Jesus and you *will* come back.’ These people have found a place in my heart and the need there is unbelievable. They truly appreciate that you come to serve.”

For Joyce, the people are the heart of the mission. She described them as a people of great faith who pray and participate in the Holy Sacrifice of the Mass so earnestly — Sunday Mass is the highlight of their week and lasts three hours. They have helped her faith by teaching her to trust in God, she said. “They have so little and need so much — hope and faith is what gets them through the day.”

Like Joyce, Dr. Bruno Schettini, the president of the Allentown Guild and Region II Director for the CMA, has experienced a transformation of self since going to Haiti in 2015.



“It has made me a better person in general and given me a sense of gratitude. I appreciate blessings in life that I have taken for granted,” he explained. “The people of Haiti have taught me to be a more sensitive physician.”

Dr. Schettini along with Joyce and the rest of the 14 member team — consisting of doctors, nurse practitioners, nurses, a pharmacist and nonmedical staff — were sent to Haiti by St. Joseph the Worker Parish in Orefield, Pennsylvania, where they ran a makeshift clinic from a church basement. Over one half ton of medicine and equipment was carried by the team in checked luggage.

The level of destitution became overwhelmingly evident to the team as they traveled through Delmas, the second poorest district in Port-au-Prince, which is characterized by open ditch sewage, collapsed buildings, and tented communes, as well as walled compounds lined with concertina

wire, trash piles and animals wandering the streets.

They spent eight-hour days at the clinic for four days seeing hundreds of patients. They began each day with prayer, and in the evening, when they returned to the rectory compound of Ss. Simon and Jude Parish where they stayed, they had a spirituality program that helped them unpack their experience in light of the Gospel. Meanwhile, their home parish held perpetual Eucharistic Adoration and interceded for the team and their work. This nightly fellowship and spiritual sustenance from their home parish was vital for the team, as the immense suffering they encountered while serving people at the clinic was difficult to endure alone, Joyce said.

Dr. Schettini saw 200 patients during his mission to Haiti — for many it was the first time in their life that they

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DEACON DR. BRUNO SCHETTINI, THE PRESIDENT OF THE ALLENTOWN GUILD AND REGION II DIRECTOR FOR THE CMA, WENT ON MISSION TO HAITI IN 2015, WHERE HE REALIZED THE NEED FOR BOTH PHYSICAL AND SPIRITUAL HEALING.



The conference concluded with a banquet dinner and keynote speaker Chris Stefanick.

Medicine at the Service of Marriage & Family

By
MICHELLE STANFORD, M.D.

THE CATHOLIC MEDICAL ASSOCIATION'S 86TH Annual Education Conference drew over 700 people to Denver, Colorado in what many attendees called up-lifting and thought-provoking. Under the patronage of The Holy Family and Saint John Paul II, who visited Denver in 1993 for World Youth Day, the conference was a tremendous success.

The conference theme, "Medicine at the Service of Mar-

riage and Family: Transforming the Culture with Truth and Love" was inspired by St. John Paul II's 'Letter to Families,' which set the tone and topics for the speaker sessions.

The conference began each day with a Rosary led by the medical students, the future leaders of the CMA. Following the Rosary, the Holy Sacrifice of the Mass was celebrated. Then attendees gathered to hear talks which provided guidance on how to apply Catholic teachings to marriage and family care, how to improve the care of individual patients, and how such care ultimately strengthens families and communities.

New this year were the breakout sessions each afternoon

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Conference Chair Dr. Michelle Stanford with CMA Episcopal Advisor Bishop James D. Conley



Fr. Leo Patalinghug gives a cooking demonstration.



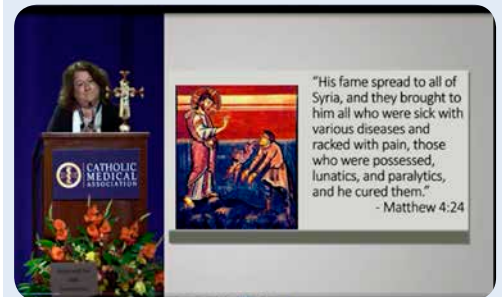
Speaker Sr. Teresa Auer, O.P., Ph.D.



CMA members Dr. Diane Gowski and Father Scott F. Binet



Attendees enjoying the exhibits.



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that featured speakers from the CMA “family,” who are living the association’s vision by “inspiring physicians to imitate Jesus Christ.” From Drs. Parker and McGovern’s enthusiastic session about how getting involved in the CMA can help prevent physician burnout to Sister Marysia Weber’s eye opening talk on the impact of cell phone use and how it alters the brain, attendees had a wide array of sessions to choose from.

The conference ended with The White Mass held at the breath-taking Cathedral Basilica of the Immaculate Conception, which celebrant and CMA Episcopal Advisor Bishop James Conley described as the “Jewel of the Rocky Moun-

tains.” Afterwards, attendees gathered for a final banquet dinner and keynote address by internationally acclaimed speaker and author Chris Stefanick, who set everyone on fire with his engaging presentation. He challenged his listeners to live by three simple phrases, “please, thank you, and I’m sorry” to transform daily interactions with others, giving and garnering respect for all people.

The level of excitement was palpable as participants returned to their homes, families, parishes and professional lives renewed and reinvigorated to continue the difficult work of healing the culture one patient at a time.

CMA 2017 CONFERENCE: A TIME OF REVIVAL

By
TUCKER BROWN
CMA STUDENT SECTION PRESIDENT

THE CMA CONFERENCE IS ALWAYS A TIME OF revival for me. It is a coming together of old friends, a gathering of many humble and ardent servants of Christ, and a great witness of hope and joy. Out of countless gifts that came through the conference, I would like to highlight just two: the inspiration that came seeing the vitality of the CMA, and the call to follow Christ's example in all that we do.

I remember attending the first breakout session given by Drs. Tom McGovern and Mike Parker. It covered a great variety of subjects from remedies for physician burnout to an abbreviated history of the life of the CMA. What I found most fascinating was the recent history which is marked by tremendous growth. In a time when many medical societies are losing members, the CMA has grown by more than 20% over the last several years. We have also seen the establishment of the Student Section (of which I am a thankful member), the Resident Section, and the annual CMA Medical Student and Resident Boot Camp all within the last six or seven years. The rise of state directors, regional directors, and even a state society within the national CMA demonstrate increased stability and overall strength of the organization. And what's more, we are even getting our hands into TV and Radio! It is truly an exciting time to be involved with the CMA.

With all of this roused passion and energy, we must be sure to ground ourselves in the firm "why" and the clear "how" that God gives through Himself. Father John Ehrich summoned us to do so in his talk "Cultivating a Healthy



Society." His words regarding the reality of sin and suffering in our world were sobering, but at the same time the hope and mercy of Christ were ever present. In one of the most powerful moments of the conference, he demonstrated Jesus' approach to the woman caught in adultery as a model for us as followers of Christ, as Catholic physicians. There were three steps, and the order is important. First, Jesus defends the woman as she is about to be stoned for her sin. Second, He encounters her, loves her, and shows her mercy. Finally, after defending this woman wounded by sin and giving His love, he reveals to her the truth: do not sin anymore. What an incredible message to us who serve many wounded men and women in our ministry of healing.

I pray that God fuels the fire He enflamed in us during the conference, and that we would strive to ever more fully follow the example He has given us in our day to day lives with our families, friends, and of course our patients.

Co-Presidents of the Society of Saints Cosmas and Damian Receive Top Honors

By
E. WESLEY ELY, M.D., M.P.H.
PRESIDENT, NASHVILLE CMA GUILD

It speaks volumes for us as Catholics at a secular university when Catholic medical students are recognized with the school's top honors. That is what happened at Vanderbilt

Medical School, when it gave its top two awards for the entire 2017 graduating class, to co-Presidents Drs Kate Callaghan and Sam Gridley Haley of the CMA Student Section, the Society of Saints Cosmas and Damian.

Dr. Kate Callaghan won the second highest honor, the Leonard Tow Humanism in Medicine Award, which recognizes the graduating student who demonstrated, according

to his or her classmates, both clinical excellence and outstanding compassion in the delivery of care and respect for patients, their families, and health care colleagues. Kate graduated Summa Cum Laude from Notre Dame University, and she took a gap year to work with Dorothy Day's Catholic Worker movement before coming to Vanderbilt in 2013. She is now starting her Family Practice residency at Memorial Hospital in South Bend, Indiana.

Her roommate, Dr. Sam Gridley Haley, received the top scholar award, referred to at Vanderbilt as the Founder's Medal. The award was endowed by founder Cornelius Vanderbilt in 1877, and has been granted for 140 years to the school's top scholar. Sam is a graduate of Harvard University, and was an invaluable leader in the Society of Ss. Cosmas and Damian, as



well as in her outreach to students in the LGBT community with compassion and care. She recently married her husband, David, in a beautiful Catholic wedding.

The Nashville Guild continues to work closely with the student guild, and together are forging alliances with the Protestant student group Medical Christian Fellowship, routinely co-hosting events both on campus and in the

community. Recent endeavors included medical student formation panel discussions; book reviews of titles such as "When Breath Becomes Air;" and speaker events with pro-life lawyers discussing abortion litigation, capital punishment, and prison reform. Lastly, we are blessed that three of the four upcoming Chief Residents in Medicine are Catholic and active participants in our CMA events.

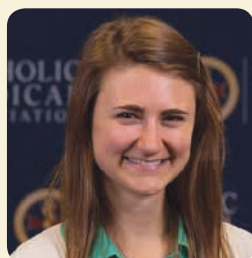
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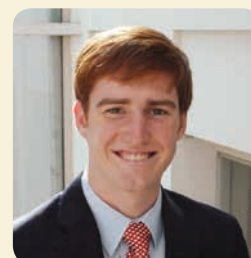
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of Saints Cosmas and Damian
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REJUVINATED BY MEDICAL MISSIONS

By
BRIAN BAMBERGER, M.D.

MEDICAL MISSIONS HELP ME TO RECONNECT to why I went into medicine in the first place.

Medicine has always been a ministry to me. The decision to go to medical school was borne out of my time as a lay campus minister as well as time spent as



CYVADIER, HAITI

both an AmeriCorps and lay Capuchin volunteer with outreach to the homeless in soup kitchens and free clinics. But, that ministerial mission is often forgotten — almost lost — in my day to day work as a combined Internal Medicine and Pediatrics resident. There is always another admission, another discharge summary, another order,

another noon conference, another clinic day. With so many requirements and commitments that pull us in different directions, the patient in front of us almost loses their personhood becoming just another encounter to close.

Medical missions allow me to reconnect to the ministry of medicine. I am there for the patients and only them — no “milestones” to achieve, no billings to create. Cut off from smartphones and EMRs, it allows the time to reflect on the patients I encounter — a luxury in residency training. In the poor, we can see the face of Jesus. In the midst of poverty, we can see the blessings each of us have received.

I am fortunate to work in a residency program at a hospital where Franciscan Sisters still have a marked presence. We participate in their



DR. BAMBERGER WITH THE LITTLE GIRL THAT PROFOUNDLY TOUCHED HIS HEART — SHE LOST HER MOTHER AT THREE MONTHS OLD AND IS BEING RAISED BY HER 15-YEAR-OLD AUNT.

mission of “serving with the greatest care and love,” and in so doing, they support and allow resident physicians to complete international medical missions for up to a month every year of residency. My second year, I spent a month working in a hospital in northeastern Ghana; that was my first international mission and an experience that left a profound impression. This past May I was fortunate enough to spend two weeks with an organization known as the Friends of the Children of Haiti. The organization hosts two-week clinics every two months in Cyvadier, Haiti providing care for both children and adults, who often walk for over a day to attend. At the May Clinic, we provided medical, dental and surgical services to over 2,500 Haitians.

Haiti is a country of paradoxes. The beauty of the coast is juxtaposed with abject poverty and a lack of infrastructure to provide even basic sanitation and transportation. Yet, the people are warm and inviting. Mothers would dress their children in the best clothes they owned when they came to our clinic — most of the time, you could tell these same clothes had been donated to the island. Our interpreters would joke with us and tell us their stories — and, by the end of the clinic, we regarded them as friends. Some of the nurses, pharmacists, and doctors have been going annually to the clinic for over a decade — their friendships run deep.

I was particularly impacted by the children I saw in Haiti. They are vulnerable. They are small, often helpless, and totally depended on others for survival. It is written in our DNA to help and love children. This instinct transcends time, place and culture. It is easy to love the children of Haiti. I saw many children — some doing well, some struggling to survive in this resource poor country. Some were reticent during my clinical examination. Others smiled and laughed as I made noises and faces as I do in the States, which is the joy of every pediatrician, and which I count as my often hard earned pay. Two children



THE MAY CLINIC IN CYVADIER, HAITI

tugged at my heartstrings. Both were malnourished — one due to physiology, the other due to circumstance. The first was a 15-month-old with a heart defect and likely Trisomy 21, who barely gained two pounds in over a year of life. The second child lost her mother at three months of age and was being cared for by her 15-year-old aunt; that aunt tried to provide as best she could, but the child was severely malnourished. I gave the best medical treatment that I could there. Yet, my heart was so heavy knowing that, had these children been born in a resource rich country, their clinical outcome would have likely been markedly different — with pediatric subspecialists able to correct this child’s heart defect and social service organizations able to provide supplemental food for that child before she became malnourished. I gave them each an extra silly face and an extended hug — my feeble attempt to provide something extra, in the wake of this harsh reality.

My medical mission to Haiti moved me; the children I cared for left a mark on my heart. The mission rejuvenated me and reconnected me to our shared ministry of caring for the sick. I came back to the States — to my hospital and clinics — with a renewed focus: being with my patient in every moment.

2017 Resident Section Leaders



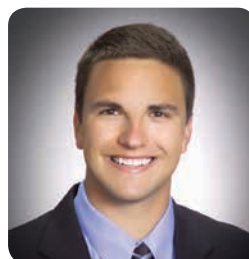
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The Sacred Liturgy Conference



PHOTOS BY MARC SALVATORE

By
NADIA SMITH

THE 5TH ANNUAL SACRED LITURGY CONFERENCE was held July 12–15 at Sacred Heart Catholic Church in Medford, Oregon, where 400 people, including several CMA members, gathered for a three-day immersion in the Church's sacred liturgy and its living musical heritage.

During the sold-out conference, attendees were taught about the deeper meaning of the Eucharistic sacrifice, how to chant the Ordinary of the Mass, and experienced the healing power found in the three forms of the sung sacred liturgies: the Extraordinary Form Solemn Pontifical High Mass; Pontifical Mass in the Ordinary Form; and the Requiem Mass. Raymond Leo Cardinal Burke; Archbishop Alexander K. Sample of Portland; Archbishop Salvatore Cordileone of San Francisco; and former CMA Episcopal Advisor Bishop Robert F. Vasa of Santa Rosa celebrated the liturgies, and were among the speakers at the conference. The lectures were focused on the conference's theme "The Voice of the Bridegroom."

"The liturgy is the meeting between God and man. The greater our understanding of the liturgy, the more deeply we participate, the more the healing and transforming graces

flow to us and to the world," said Dr. Lynne Bissonnette-Pitre, CMA member and organizer of the conference. "The Eucharist is the divine prescription for healing through communion with the Divine Physician."

As physician and psychiatrist, Dr. Bissonnette-Pitre has given her professional life to the art of healing, and has been deeply aware of the healing power of the Eucharist — especially of the Sung Gregorian Liturgy — which is why she began the annual conferences five years ago. She is also the director of the Schola Cantus Angelorum, a women's Latin choir formed in 2007 as a response to then Pope Benedict XVI's request for liturgies to be celebrated with the beauty and solemnity of the traditional Gregorian chant. They offer the chant for the conference's liturgies.

The 2018 Sacred Liturgy Conference will feature CMA Episcopal Advisor Bishop James D. Conley of Lincoln, Nebraska. The conference will be held June 27–30 2018 in Salem, Oregon with 12 scheduled lectures to cover aspects of the conference's theme, "The Transfiguration in the Eucharist."

According to Dr. Bissonnette-Pitre, the conference is open to anyone interested in the treasures of the Catholic liturgy and promises to be intellectually, liturgically, and spiritually enriching.

Registration will open in January; please visit sacredliturgyconference.org to register.

CMA's Latest Book

Catholic Witness in Health Care: Practicing Medicine in Truth and Love

By
JOHN M. TRAVALINE M.D.,
LOUISE A. MITCHELL

CATHOLIC HEALTH CARE IS ABOUT ETHICS BUT also “ethos” — not only what we should not do but a vision for what we should do with love. The issues it faces do not just concern academic bioethicists — they concern every faithful Catholic doctor, nurse, practitioner, and even patient. Modern medical practitioners on the ground, day-in, day-out, wrestling with medical moral matters, witnessing what is happening in American medicine today, while also striving to witness to

their Catholic faith in living out their medical vocation — these are the primary authors of this unique book, and these are the readers it hopes to serve.

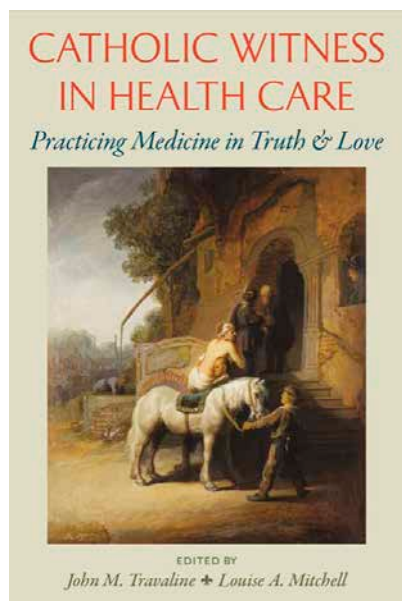
Catholic Witness in Health Care integrates the theoretical presentation of Catholic medical ethics with real life practice. It begins with fundamental elements of Catholic care, touching upon Scripture,

moral philosophy, theology, Christian anthropology, and pastoral care. The second part features Catholic clinicians illuminating authentic Catholic medical care in their various medical disciplines: gynecology and reproductive medicine, fertility, pediatrics, geriatrics, critical care, surgery, rehabilitation, psychology, and pharmacy. Part three offers unique perspectives concerning medical education, research, and practice, with an eye toward creating a cultural shift to an

authentically Catholic medical ethos.

Readers of this book will learn essential elements upon which the ethics of Catholic medical practice is founded and gain insights into practicing medicine and caring for others in an authentically Catholic way.

Dr. Travaline and Ms. Mitchell are the editors of the book.



2018 EVENTS SAVE THE DATE

► January 19:

March for Life
(Washington, DC)

► January 27:

March for Life West Coast (San Francisco, CA)

► March 20:

Walk for Life Northwest (Spokane, WA)

March in your white coat on above days with other CMA members!

► April 5-10:

Pilgrimage to Our Lady of Guadalupe (Mexico)

► June 18-24:

Medical Student & Resident Boot Camp (Mundelein, IL)

► June 21-24:

Mid-Year Leadership Training (Mundelein, IL)

► September 20-22:

87th Annual Conference (Dallas, TX)

Nashville Guild's New Chaplain

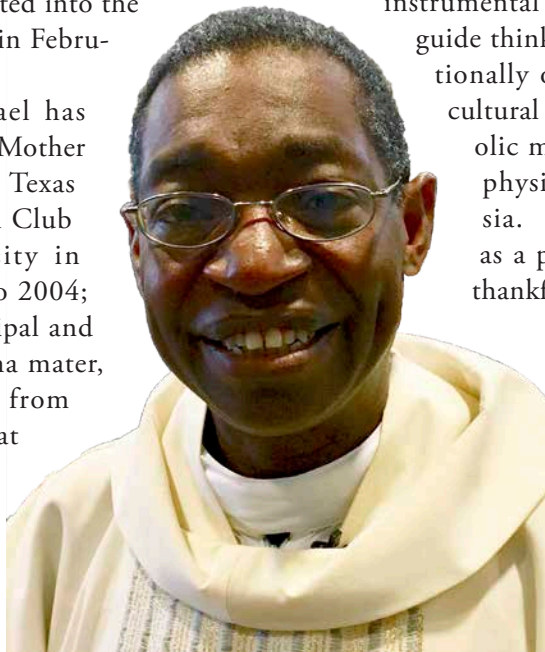
By
DR. WES ELY
PRESIDENT

THE NASHVILLE GUILD HAS LONG AWAITED TO BE assigned a priest to serve as their formal chaplain. That wait is over as they welcome Fr. John Raphael, a native of New Orleans, Louisiana, as their new chaplain. He was ordained a priest of St. Joseph's Society of the Sacred Heart (SSJ) on May 20, 1995 and was incardinated into the Diocese of Nashville, Tennessee in February of 2017.

Since ordination Fr. Raphael has served as assistant pastor of Our Mother of Mercy Church in Beaumont, Texas from 1995 to 1999; as Newman Club chaplain at Howard University in Washington, D.C. from 1999 to 2004; and as assistant principal, principal and president of his high school alma mater, St Augustine, in New Orleans from 2004 to 2011. While serving at St. Augustine High School, Fr. Raphael earned a Masters in Catholic Educational Leadership at the University of San Francisco. Since August of

2012, Fr. Raphael has served as chaplain at St. Thomas West Hospital in Nashville, Tennessee. In August of 2014 he completed four units of CPE and he was granted board certification by the National Association of Catholic Chaplains in October of 2015. Fr. Raphael serves on the ethics committee and as an ethics consultant at St. Thomas West Hospital.

Bridging his knowledge of philosophy, theology, humanism, and bedside clinical experience as a hospital chaplain, and now diocesan priest, Father Raphael is instrumental as a speaker and author in helping guide thinking locally, nationally, and internationally on complicated and timely secular cultural issues of the day surrounding Catholic moral teaching on end-of-life issues, physician assisted suicide and euthanasia. As an outgrowth of his evolution as a priest and bedside chaplain, he has thankfully become integrally involved with the Catholic Medical Association, and in 2017, with the blessing of Bishop David Choby, he assumed the position of Chaplain of the Nashville Guild of the CMA. Perhaps of note is that he is an avid cyclist and a great Cajun chef who makes a mean gumbo.



NASHVILLE GUILD CHAPLAIN FR. JOHN RAPHAEL, SSJ.

St. Louis Guild Honored with the 2017 Outstanding Guild Award

By
NADIA SMITH

THE ST. LOUIS GUILD OF THE CATHOLIC Medical Association was the recipient of the 2017 Outstanding Guild Award. The Guild President David J. Stansfield, D.O. accepted the award on behalf of the members at the recent CMA conference held in Denver.

At the request of the Archbishop of St. Louis, Rev. Robert J. Carlson, the Guild provided him with invaluable support concerning serious medical ethical issues he had to confront in the Archdiocese.

Thanks to the faithful and tireless work of the Guild, Archbishop Carlson was able to address several concerns voiced in the Archdiocese regarding the use of aborted fetal cell lines in immunizations, and provided him with advice on a proper Catholic response to those concerns. Additionally, the Guild provided guidance to the Archbishop regarding the care and treatment of patients with gender dysphoria that remained faithful to Catholic moral teaching.

“One of our Catholic pediatric hospitals was involved in hormone treatment to induce sterilization, to arrest puberty and also surgery for sterilization with oophorectomy, orchiectomy and hysterectomy for the purpose of gender transition,”



CMA PRESIDENT DR. MARIE-ALBERTE BOURSIQUOT PRESENTS THE OUTSTANDING GUILD AWARD TO GUILD PRESIDENT DR. DAVID STANSFIELD.

The Catholic Medical Association presents the 2017
Outstanding Guild Award
to the
St. Louis Guild
of the Catholic Medical Association
for Its Exemplary Efforts in Prayer, Education and Public Awareness

This 9th Day of September, 2017

W. Boursiquot
President



and hysterectomy for the purpose of gender transition,” explained Dr. Stansfield. “If this weren’t bad enough, SSM Health Systems — a multi-state health system in the Midwest — had enacted a policy recommending treatment options for gender dysphoria in adolescents and adults which was not in keeping with the ethical and religious directives for Catholic health care services.”

Around the same time as these two hospital system policies were taking shape, a new ordinance was proposed by the Board of Alderman urging the City of St. Louis to make illegal psychiatric treatment for gender dysphoric individuals who wished to become comfortable with their biological assigned gender instead of going through with hormone treatments, Dr. Stansfield explained.

“This St. Louis board bill would have made it very difficult for a proper Catholic approach in the psychiatric realm to help these individuals,” he said.

For that reason the St. Louis Guild is prepared to stand against the bill once it is reintroduced to the Board of Alderman in the coming weeks.

As more of these medical ethical issue arise, the St. Louis Guild will continue to be a beacon of scholarship and a champion for an authentically Catholic way of practicing medicine.



Continued from p7

had been seen by a physician. He noted that they dressed better than many patients he has seen in the U.S. because “they have a sense of gratitude that this is a special occasion.”

Dr. Schettini, who is also a permanent deacon, was called upon by a Missionary of Charity to baptize a dying five month old baby boy — a humbling moment of grace that showed him the need for both physical and spiritual healing.

Joyce considers her work in Haiti as the best nursing she does all year. She encourages others to do a medical mission, if possible.

“The medical mission experience in a third world country is such a different work day. You have the opportunity to use your skills and innovation to ... make a life and death difference for the poorest of the poor,” she said.

“[The Haitian] people have found a place in my heart and the need there is unbelievable. They truly appreciate that you come to serve.”

— RUTH JOYCE, RN

“You will see the face of Christ in your patients.”

Dr. Schettini agreed. He does not regret for a moment accepting Joyce’s invitation to join the Haitian medical mission trip and noted that part of the CMA’s mission is “to evangelize

other health care workers — and this can only be done when we are available to, and supportive of one another.” He stated how important it is to realize “that the medical profession has been based on a mission to serve, to heal and to comfort” and that doing a medical mission is a way to “respond to opportunities to practice medicine in its purest sense.”

If you are interested in learning more about the Haiti medical mission, please contact Ruth Joyce, RN at rmj520@gmail.com and visit <http://haitimission.weebly.com>.



PHOTOGRAPH BY NINARAS, DISTRIBUTED UNDER A CC BY-SA 4.0 LICENSE

Nairobi, Kenya

Continued from p3

bring the poor of Nairobi close to Him as well. I will never forget going with the sisters to visit families in makeshift houses made of corrugated metal scraps. I'll never forget how neat, clean and tidy they kept their hovels. They were proud and honored to host a sister and a priest in their home.

There are doctors, dentists, nurses, and other medical professionals, as well as teachers and ordinary families, who choose to spend time working alongside the Missionaries of Charity, in Nairobi, in Calcutta, and elsewhere. Their work has profound impact on the lives of the very poor: they provide simple surgeries or procedures, or medications unavailable among the very poor, or simple treatment of difficult diseases, to those who might otherwise die from easily curable illnesses. To those who suffer from more grave problems, like HIV, medical missionaries often provide some modicum of treatment they might not ever otherwise obtain.

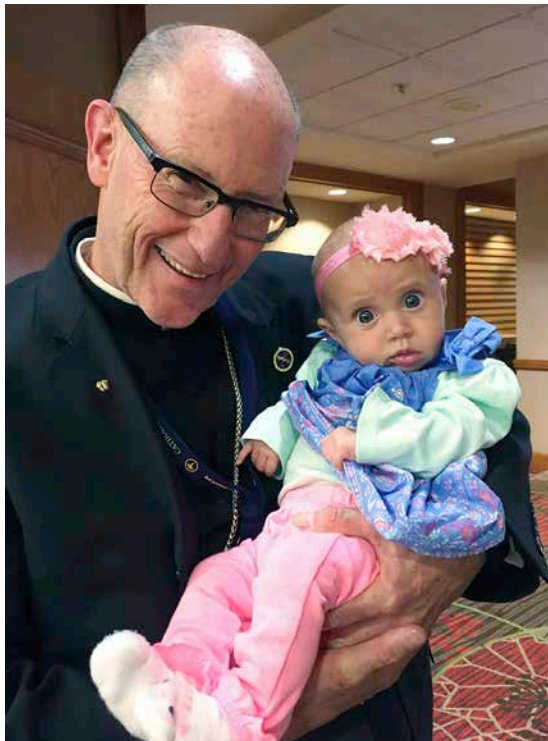
I left Nairobi knowing that I could never do enough to solve the complex problems of global poverty. But I also left knowing that the Lord had called me to visit the sick, and feed the poor, and clothe the naked, and I had tried to do

that. I left knowing that I needed to use the opportunities given to me in this country in order to maintain and support the dignity of the very poor around the world.

Most importantly, I left Nairobi, like many people do, having been transformed. I left with a deeper desire for solidarity with the poor. I left with a deeper desire to join people in their suffering — to love, as best I could, with the love of Jesus Christ.

Mother Teresa often said that each of us could “find Kolkata all over the world if you have the eyes to see.” This is, perhaps, the most lasting fruit of missionary work among the very poor — transforming our sight, to help us see the need for the love of God — the loneliness, illness, and sin — among the people we encounter in our ordinary lives. Not all of us have the opportunity to serve the very poor in some far-flung locale. But all of us can find those who are longing for God's love in our midst — those in need of generous and charitable service. May we pray to have sight to see, to find our own Calcutta, and to respond as missionary disciples of Jesus Christ.

**The spelling of Calcutta was changed to Kolkata in 2001, although much of the world retains the British spelling of Calcutta.*



First CMA Baby

Drs. Paul and Amber Day met a few years ago through the CMA Boot Camp and the rest, as the saying goes, is history. Their story was featured in the first issue of *The Pulse of Catholic Medicine* that was released in the fall of 2015. The couple's marriage has been blessed with their first child, daughter Margaret Louise Day — more affectionately known as “Greta” or the “first CMA baby” — born May 7, 2017. Greta is pictured with her favorite bishop, Bishop James Conley, the Episcopal Advisor of the CMA.



Baltimore Guild White Mass

The Baltimore Guild-Catholic Medical Association celebrated their annual White Mass in honor of St. Luke, the patron of physicians, on Sunday October 8, 2017. The Mass was celebrated by Archbishop William E. Lori, S.T.D. at the Basilica of the National Shrine of the Assumption of the Blessed Virgin. Attendees included physicians, medical students, nurses, and other health care professionals.



Buffalo Guild White Mass

The CMA Buffalo Guild celebrated their annual White Mass on the Feast of Our Lady of Lourdes Feb. 11, 2017 with medical students, physicians, and nurses in attendance. The Mass was concelebrate by Bishop Richard J. Malone and retired Bishop Edward Kmiec at St. Joseph Cathedral.



Conference Chair Award

Dr. Michelle Stanford received the Conference Chair Award in grateful appreciation of her outstanding leadership and service to ensure the success of the 86th Annual Educational Conference. The conference was held in Denver, Colorado on September 7-9, 2017.



Legion of the Honor Humanitarian Award

The Chapel of Four Chaplains and its Foundation presented the Legion of Honor Humanitarian Award (posthumously) to Fr. Angelo Giuseppe Roncalli, who later went on to become Pope Saint John XXIII, for his exemplary service as an Army Medic and Military Hospital Chaplain in World War I. Members of the Catholic Medical Association received the award on behalf of the recipient on Sept. 23, 2017 in Philadelphia, PA.

Serving Families through Medicine

Today's world has left many wounded physically, spiritually and emotionally. It is easy to get lost, but the CMA is helping many return to peace and wellbeing.

Your support of the CMA helps to restore hope and bring joy. Whether it is through the media, working to change policies, educational events, evangelizing health care, forming a new generation of leaders or raising awareness on important issues, the CMA is making a difference and re-establishing joy.

Ours is a profound joy that goes deeper than a smile; rather it lights a fire within, bringing peace to the soul. We have all experienced that kind of joy. Now is the time to share it with others.



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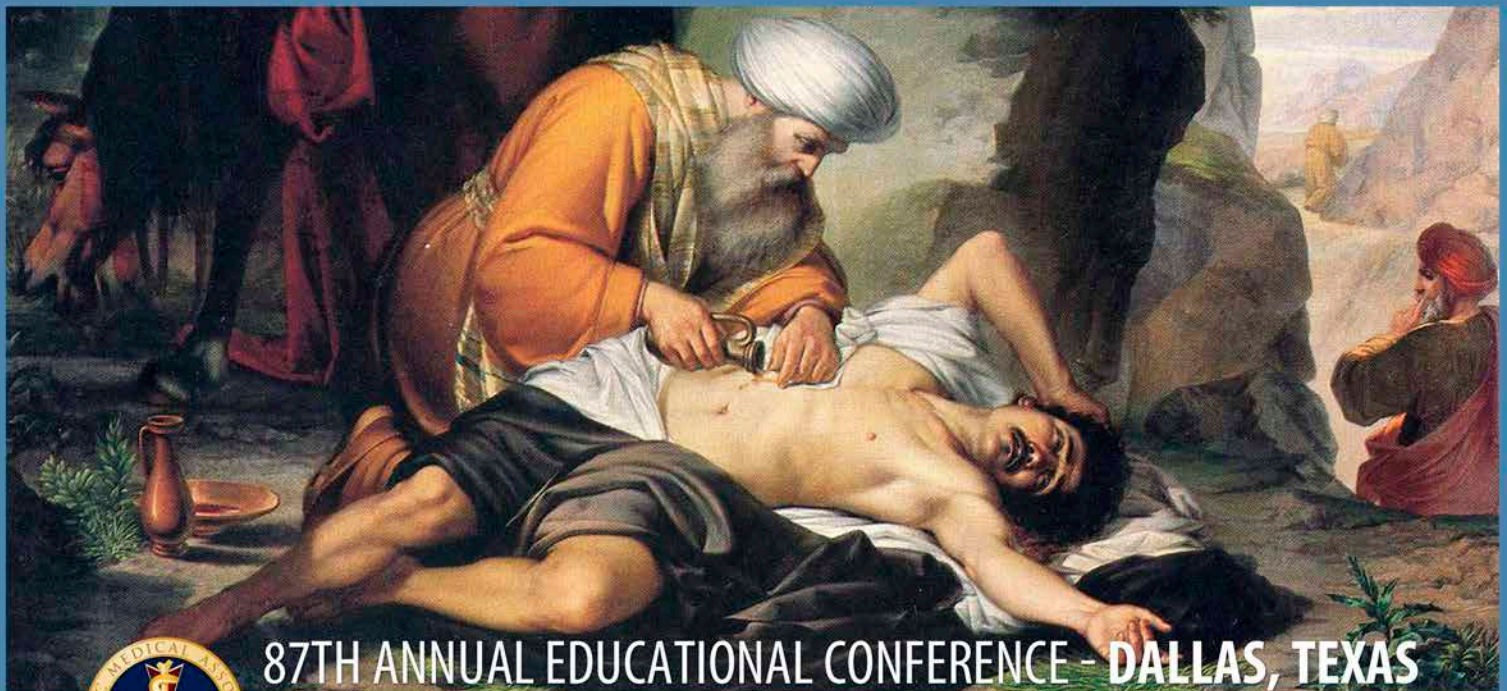
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87TH ANNUAL EDUCATIONAL CONFERENCE - DALLAS, TEXAS

September 20-22, 2018