Translational Science Building is rising before our eyes. We are going ahead with our expansion of clinical beds. We will move forward," he says.

Berk, an accomplished cyclist, was injured May 30, 2009, during a ride in the hills near his house on Canandaigua Lake in the Finger Lakes region of upstate New York. A car forced him to swing wide and leave the paved road. When he got off the road, a tire blew out and he went over the handlebars of his bicycle. He heard the crack of his neck and he felt his body go numb.

"Knowing what I had done, at that moment I told myself, if I got through this and afterwards if I did not need a ventilator but I was able to move in a wheelchair on my own, that would be okay," he says.

Berk underwent surgery to stabilize his neck at the Medical Center. He spent 20 days on a ventilator, and a total of 101 days at the Kessler Institute in New Jersey, which specializes in spinal cord injuries.

"I have encountered so many wonderful caregivers," he says. "If something felt really good, I would tell them that I really appreciated their taking extra time. That interaction, that communication, really makes job satisfaction much better for the caregiver. We need to change our dynamic and make sure that there is time for the interaction to occur. I hope we can find ways to legitimize this as part of the way we operate."

When he returned to Rochester from New Jersey in September, Berk began working on Medical Center projects but devoted his afternoons to rehabilitation therapy.

While he continues to use a motorized wheelchair, Berk has made remarkable progress. He can stand, do squats, and walk with assistance. He can feed himself. He can brush his teeth. His left arm has recovered more strength and flexibility than the right. As of this winter, he couldn't transfer from his chair to a bed, but he expected to be able to do that when he builds up strength in both arms.

Only minimal sensation has returned. His right side has much more sensation than his left, but he describes the sensation as "patchy and not normal." By touch alone, he can't tell the difference between fabrics—between a terrycloth towel and smooth cotton pants. His stamina has returned, and he keeps a very busy schedule.

"There's a lot of progress, but it's always too slow," Berk says. "As long you continue to progress, you have to keep pushing ahead. I am counting on continuing to progress."

Berk wants to apply his personal experiences as a patient to improve clinical care at the Medical Center through "quality, safety, care, and courage."

"It is a great opportunity to make this an even better place for patients and providers," Berk says. "That's a key message: I'm not just doing this for patients but also for providers—not just for those who have direct contact with patients but for everyone who works here. Everyone who works here is part of a health care organization and they are here in part because they want to do good for people. So we should be able to improve job satisfaction across the whole institution. That's the caring part. It's as much about caring for each other as it is about caring for our patients." @

*Michael Wentzel is the editor of* Rochester Medicine.

## SCHOOL OF MEDICINE & DENTISTRY Mark Taubman Becomes Dean

The former chair of the Department of Medicine who served as acting CEO of the Medical Center for nine months is the new dean of the School of Medicine and Dentistry.

Mark Taubman, who came to the Medical Center as chief of the cardiology unit in 2003, is the school's 10th dean. Effective March 1, the appointment follows this winter's announcement that Bradford Berk '81M (MD/PhD) is returning as CEO of the Medical Center after suffering a serious spinal cord injury last spring.

"Mark is the best possible choice for dean," Berk said of Taubman's appointment. "He is a physician-scientist who is active in the laboratory yet possesses a broad institutional view. As an active cardiologist, he also understands the challenges of practicing medicine."

As chief of cardiology, Taubman was the guiding force behind the expansion of cardiac patient care services, faculty recruitment, strengthening treatments for those with heart arrhythmias and heart failure, adding new preventive cardiology programs, such as the women's heart program, and forging strong regional services. Taubman



DEAN: A noted cardiologist and medical education leader, Taubman is the 10th dean of the medical school.

also served as director of the Aab Cardiovascular Research Institute, which he helped Berk to found.

Taubman became chair of the Department of Medicine and the Charles E. Dewey Professor of Medicine in May 2007. As chair, he directed the Medical Center's largest single department, overseeing a \$150 million budget and more than 1,000 faculty and staff in 10 units devoted to patient care, research, and education. He named division chiefs, including general medicine, cardiology, hematology-oncology, endocrinology, and infectious disease.

In 2006, Taubman was named editor-inchief of Arteriosclerosis, Thrombosis and Vascular Biology, one of five international medical journals published by the American Heart Association, and the leading journal in the field of vascular biology.

A graduate of New York University's medical school, he interned at Peter Bent Brigham Hospital before completing his residency and cardiology fellowship training at the Brigham & Women's Hospital. Taubman has held academic appointments at Harvard Medical School, Children's Hospital Boston, and Mt. Sinai School of Medicine. Prior to being recruited to Rochester, he was director of cardiovascular research at Mt. Sinai.

Elizabeth McAnarney, the chair emerita of pediatrics, served as interim dean since June, when former dean David Guzick became senior vice president for health affairs at the University of Florida and president of the University of Florida health system.