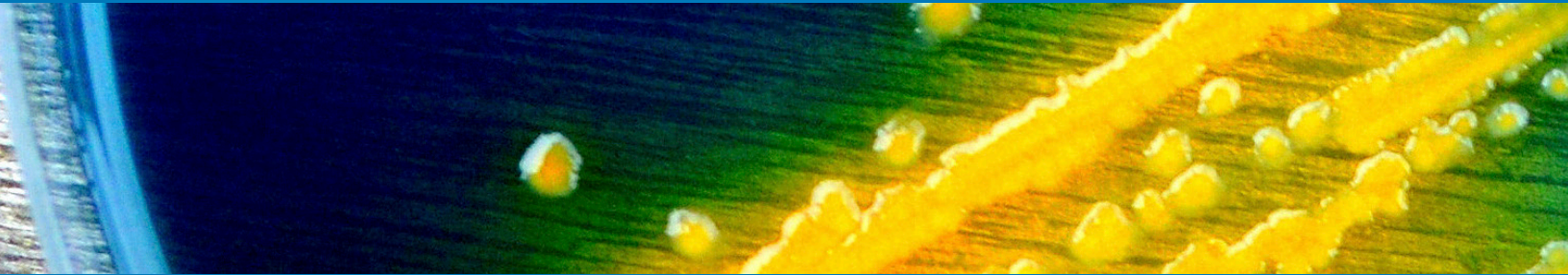


ANNUAL REPORT 2014



Infectious Diseases Society of America

Education & Research Foundation

ANNUAL REPORT 2014

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Barbara E. Murray, MD, FIDSA
Foundation Chair

Dear Friends,

By tradition, inaugural statements are aspiring and visionary. I hope this first annual report for the IDSA Education and Research Foundation will be no exception. We are proud of the work of the Foundation, and we believe that its future—and the future of its awards, fellowships and other initiatives—is both assured and bright.

The Foundation marks its 13th anniversary this year, yet we know that the success of its programs is measured not in years but in the progress made in service to the ID profession and the greater community.

Our goal is singular and far-reaching: to help ID physicians and scientists—in all stages of their careers—to shape their futures and the future of our specialty. The stories of achievement in this report illustrate how our programs have created paths for these worthy men and women.

After more than a decade of accomplishment, it's fulfilling for me to consider what the Foundation will do in the years to come. With support from you and the greater ID community, the future promises even more exciting opportunities for the profession and for medicine.

We are most grateful for the sponsorship and collaboration of our partners, donors and the many IDSA members whose commitment to the Foundation allows us to serve the next generation of ID specialists.

The story of the Foundation's significant contributions to the field of ID has not yet been fully told. With your continued investment in and support for the Foundation, we will be able to change lives and support those stepping into the forefront of patient care, research, prevention and public health.

Thank you for your continued support of and interest in the Foundation. I hope you join us in our optimism for the future of ID, and in our work to address today's most pressing global concerns. This is only the beginning; with your donation and support we can pursue our core mission with vigor and imagination, today and for years to come.

Sincerely,

A handwritten signature in black ink that reads "Barbara E. Murray". The signature is written in a cursive, flowing style.

Barbara E. Murray, MD, FIDSA

THE GLOBAL THREAT OF INFECTIOUS DISEASES

Worldwide, infectious diseases are the leading cause of death of people under the age of 60.

As of October 2014, there have been more than 850 laboratory-confirmed cases (including more than 300 deaths) worldwide of a new MERS-CoV reported to the World Health Organization (WHO).

Infectious diseases cost the United States more than

\$120 billion EACH YEAR

Source: Trust for America's Health report Outbreaks: Protecting Americans from Infectious Diseases, December 2014

EACH YEAR

On average, **62 million** Americans — about **20 percent** of the population — get influenza each year and more than **250,000 people** are hospitalized.¹

Worldwide annual epidemics are estimated to result in about **3 million to 5 million** cases of severe illness, and about **250,000 to 500,000 deaths**.²

1. Source: Trust for America's Health report Outbreaks: Protecting Americans from Infectious Diseases, December 2014

2. Source: WHO



Over **2 million** pre-schoolers, **35 percent** of seniors and a majority of adults do not receive all recommended vaccinations.

Source: Trust for America's Health report Outbreaks: Protecting Americans from Infectious Diseases, December 2014



Over **2 million** Americans fall sick from antibiotic-resistant bacteria and more than **23,000** die from those infections.



Antibiotic resistance costs the U.S. an extra **\$20 billion** in direct medical costs and at least **\$35 billion** in lost productivity.

WHO's 2014 report on global surveillance of antimicrobial resistance revealed that antibiotic resistance, across the world, is putting at risk the ability to treat common infections in communities and hospitals. Without urgent, coordinated action, the world is heading towards a post-antibiotic era, in which common infections and minor injuries, which have been treatable for decades, can once again kill.

Approximately **1 million** people contract HIV every year.



Source: Trust for America's Health report Outbreaks: Protecting Americans from Infectious Diseases, December 2014.

There are some **5.5 million** Americans with Hepatitis B virus (HBV) or Hepatitis C virus (HCV).



Worldwide, there are approximately **35 million** people currently living with HIV. Most people living with HIV or at risk for HIV do not have access to prevention, care and treatment.

Source: UNAIDS GAP Report; 2014

Globally, **400 million** people live with chronic hepatitis B or C infection.

Source: WHO

EBOLA

There were

26,593 CASES

of Ebola worldwide and

11,005 DEATHS

as of May 6, 2015.

Source: WHO

10,000 people inside the United States were diagnosed with TB disease in 2013.

63%
of these cases occurred in those born outside the US.

An estimated **11 Million** Americans have "latent" TB infections.

Source: Trust for America's Health report Outbreaks: Protecting Americans from Infectious Diseases, December 2014

In 2013, **9 million** people in the world fell ill with TB and **1.5 million** died from the disease.

Source: WHO

INTRODUCTION



NOW MORE THAN EVER

For more than a decade, the IDSA Education and Research Foundation has had as its mission the goal of improving health by promoting excellence in patient care, education, research, public health and prevention related to infectious diseases. Today, that mission feels more urgent than ever. Infections are at the forefront of medical news almost every day, be it the Ebola virus, influenza, antibiotic resistance or the measles. Old infectious diseases are coming back—or never quite leaving—while new diseases emerge and spread swiftly across the globe. The public's interest in ID is growing in response to the weight of all this news, and policymakers look for answers from within our ranks.

The philanthropic arm of the Infectious Diseases Society of America (IDSA), the Foundation is uniquely positioned to support the IDSA mission at this moment in history. Its innovative and targeted programs serve the very ID specialists who will be called upon to address—and solve—today's challenges and those in the future.

The Foundation supports a range of programs, awards, fellowships and scholarships designed to enhance the research and educational development of ID specialists throughout their careers, with a particular focus on attracting the best and brightest medical students and residents to the field.

More than that, though, the Foundation has the power to touch lives. Past recipients describe the profound way that their fellowships and awards have changed their careers, opening up new vistas and allowing them to explore new research opportunities. Moreover, senior ID specialists who share their experiences as mentors describe the sense of well-being and accomplishment in giving back to the organization and the profession.

The Foundation is exceptionally proud of its core programs, which have funded

research fellowships and awards for hundreds of medical students, fellows and young scientists over the last decade. They are a testament to the talented young people they serve and to the generosity of the Foundation's donors. Those programs include the following:

- The Medical Scholars Program is at the center of the Foundation's mission. The program offers scholarships to dozens of medical students each year, giving them a first-hand look at the challenges and opportunities of working in infectious diseases. The program is especially popular because it affords medical students a chance to work with an IDSA member or fellow as a mentor. (Read more about the program on p. 5.)
- Together with our partner, the National Foundation for Infectious Diseases, the Foundation supports the Joint Research Awards, providing Postdoctoral Fellowships and Young Investigator Awards to promote research in ID by promising young scientists. (Learn more about the awards on p. 13.)
- The HIV Medicine Association Minority Clinical Fellowship enables underrepresented minority physicians to gain HIV experience and expertise in a clinical setting post-residency. The goal is to increase the number of African American and Latino physicians who have the expertise and the commitment to provide clinical care to HIV-positive patients from minority communities. (Learn more about the fellowships on p. 9.)
- Naturally, the IDWeek Mentorship Program has proven a major success in its first year. Launched in 2014, the program brought dozens of senior ID specialists together with their younger peers. The week provided opportunities for mentorship and networking through one-on-one interactions between leaders in

the field and fellows, residents and medical students during IDWeek. (Learn more about the program on p. 17.)

Other important Foundation initiatives include the following:

- The Center for Global Health Policy promotes evidence-based U.S. action on global HIV/AIDS and tuberculosis by drawing on the expertise and knowledge of the members of IDSA and the HIVMA. *Science Speaks*, the Center's popular blog, is a highly respected source of information, news and analysis on tuberculosis and HIV/AIDS.
- In 2014, the Center began offering Ebola Travel Grants to clinicians traveling to Africa. These travel grants are designed to help offset the myriad of costs ID specialists face when volunteering to work on the Ebola outbreak. (Read more about the program on p. 21.)
- Our Hepatitis C Knowledge Network is another example of how the Foundation tackled education initiatives. Monthly, hour-long webinars educated IDSA members on the current recommended practices to treat and manage patients infected with the hepatitis C virus (HCV) and were made available via the website as podcasts.

The Foundation remains dedicated to its core mission while also seeking new ways to make our organization even stronger and more relevant. By strengthening mission areas where we have the greatest impact, we believe that the Foundation can better develop careers, promote research and disseminate knowledge about infectious diseases.

“People don’t really understand the complex field of infectious diseases. Mention it and people think antibiotics and hand washing. In my mind, infectious disease is the frontier of human health.”

— Dr. Erin Steinbach
2008 Medical Scholars Program Awardee

MEDICAL SCHOLARS PROGRAM

2





Erin Steinbach, PhD
2008 Medical Scholars Program Awardee

Medical Scholars Program

A DEFINING MOMENT

Erin Steinbach's exploration of the rich and complex interactions between the human immune system and viruses, and how they can change each other, was a profound moment in her medical studies. In fact, you could call it a defining one.

"Immunology was not something really on my radar when I started school," says Steinbach, who is in her eighth and final year of her MD/PhD program at the University of North Carolina School of Medicine in Chapel Hill. "I was really interested in understanding the nitty-gritty of how viruses work. I was very focused on viruses and what they did and how they were put together."

Today, Steinbach, 32, is applying for Internal Medicine Residency programs with the intent of specializing in allergy and immunology. It was the experiences during her Medical Scholar Program tenure that exposed her to the world of immunology and how immune systems are integral to protecting humans from microbial threats.

"The impact of the award was to broaden my horizons in the field of

infectious disease," says Steinbach, who has served as co-president of the Infectious Diseases Interest Group at UNC. "It really gave me the first glimpse into infectious disease and human health and how I could use my basic science knowledge and love for lab research."

Steinbach used her award to fund a summer research project, under the mentorship of Mark Heise, a UNC School of Medicine professor. She studied the mosquito-borne Ross River Virus, intrigued by the characteristics that allow it to evade the host immune system and thus cause disease. Later, she shared her findings at the UNC John B. Graham Student Research Society Research Day and was awarded "Best Basic Science Poster." Moreover, she was able to attend case conferences and journal clubs with ID physicians to discuss her results.

"The summer rotation typically means you're in a lab mostly working on a specific project and immersed in the science," says Steinbach, a Minnesota native. "The Medical Scholars Program allowed me to have more interaction

with ID physicians and have broader exposure to what it would be like to be an ID physician."

Steinbach believes the IDSA Education and Research Foundation's work and its grant programs are essential for future scientists and clinicians in the field. "The Foundation allows students to get exposure to careers in ID. It promotes scientific research," says Steinbach. "It is critical to the development of future ID physicians and for the continued research striving to understand host-microbial relationships."

As she looks to her future, Steinbach sees ID playing a key role in her career due to the enormous overlap between ID and immunology, especially in terms of how the specialties interact and complement each other. "I am very much interested in the intersection of microorganisms and infectious disease and host immunity," says Steinbach, "and how that interaction shapes the human immune system and disease states."

ABOUT THE MEDICAL SCHOLARS PROGRAM

Among the many responsibilities of the IDSA Education and Research Foundation is to attract the best and brightest medical students to the field of infectious disease. By offering scholarships to medical students in U.S. and Canadian medical schools, the Foundation is able to give students the much-needed opportunity to explore their interests in the ID subspecialty as they consider next steps in their careers.

Established in 2002, the Medical Scholars Program has provided awards to more than 500 medical students interested in the ID subspecialty. The idea was to give students a first-hand look at the challenges and opportunities of working in ID.

The awards allow the selected students to pursue independent clinical or research activities outside their institutional programs while also

exploring the breadth of the ID field. Students can submit a wide range of projects for consideration, including clinical research, international health, laboratory research, prevention and epidemiology.

Each Medical Scholar Program scholarship recipient receives \$2,000. The Medical Scholars Program is supported by member donations to the Foundation.

2014 MEDICAL SCHOLARS PROGRAM AWARDEES

Breona Barr, Wake Forest School of Medicine, Winston-Salem, NC

"Implementation of Oral and Self-Collected Rectal Swabs for *N. gonorrhoeae* and *C. trachomatis* Detection as a Component of Local Health Department Outreach Testing," Mentor: Laura Bachmann, MD, MPH, FIDSA

Nicolas Berlon, Duke University School of Medicine, Durham, NC

"Type, Quantity, and Prevalence of Phenol Soluble Modulin Gene Products in Geographically Matched MRSA Isolates from Patients with Endocarditis, Hospital/Ventilator Acquired Pneumonia, and Complicated Skin and Soft Tissue Infection," Mentor: Vance Fowler Jr., MD, MHS

Tyler Burnett, University of Nebraska Medical Center, Omaha, NE

"Community Viral Load as a Biomarker for Targeted Prevention in Nebraska," Mentor: Uriel Sandkovsky, MD, MS

Sydni Coleman, University of Cincinnati College of Medicine, OH

"Identifying the Demographics of the HCV Epidemic among Adolescent and Young Adult Intravenous Drug Users through a Syringe Exchange Program," Mentor: Judith Feinburg, MD, FIDSA

Jonathan Dyal, Johns Hopkins University School of Medicine, Baltimore, MD

"Seroepidemiology of Zoonotic Disease in Hoima, Uganda," Mentor: Joshua Rhein, MD

Rebecca Edwards, Northwestern University Feinberg School of Medicine, Chicago, IL

"Entry and Immunomodulation: The Potential Dual Roles of the HVEM Receptor in Ocular Herpes Simplex Virus 1 Infections," Mentor: William Muller, MD, PhD

Dora Friedman, University of California, San Francisco, CA

"A Comprehensive Survey of Microbiology/ Infectious Diseases Curricula among All U.S. Medical Schools," Mentor: Brian Schwartz, MD

Matthew Givens, University of North Carolina, Chapel Hill, NC

"Development of a Phage Display System for Analysis for Strain-Specific Immunity to Plasmodium Vivax," Mentor: Jonathan Juliano, MD, MSPH, DTM&H

Maurice Hajjar, The Warren Alpert Medical School of Brown University, Providence, RI

"Morbidity and Mortality of Hospitalized HIV-Infected Adults in the Era of Highly Active Antiretroviral Therapy at a Teaching Hospital in Accra, Ghana," Mentor: Awewura Kwara, MD, MBChB, MPH

Rachel Hensel, Emory University School of Medicine, Atlanta, GA

"Blood Glucose Levels, Diabetes Mellitus, and Latent Tuberculosis Infection," Mentor: Russell Kempker, MD, MSc

Christopher Hergott, Perelman School of Medicine at the University of Pennsylvania, PA

"Non-Steroidal Anti-Inflammatory Drugs (NSAIDs) as a Novel Intervention for Influenza-Induced Pneumococcal Pathogenesis during Nasopharyngeal Carriage," Mentor: Jeffrey Weiser, MD, FIDSA

Daniel Huck, Cleveland Clinic Lerner College of Medicine at Case Western Reserve University, Cleveland, OH

"The Role of HIV and Auto-Antibodies among Patients with Rheumatic Heart Disease: A Case-Control Study," Mentor: Robert Salata, MD, FIDSA

Abby Johnson, University of Texas Southwestern Medical Center, Dallas, TX

"Household Observation of MRSA in the Environment," Mentor: Stephanie Fritz, MD, MSCI

Raaka Kumbhakar, Columbia University College of Physicians and Surgeons, New York, NY

"Evolving Epidemiology of 2009 H1N1 Influenza in Adult Inpatients from 2009 to Present at Columbia University Medical Center," Mentor: E. Yoko Furuya, MD, MSc

Jacob Lemieux, Harvard Medical School, Boston, MA

"Evolutionary Dynamics and Natural Selection in *B. microti* through Whole-genome Sequencing of Clinical Infections," Mentor: Eric Rosenberg, MD, FIDSA

Julia Liebner, Case Western Reserve University School of Medicine, Cleveland, OH

"Provider Performance of Routine HIV Testing in an Urban Safety Net Hospital System," Mentor: Ann Avery, MD

Kelsey Loeliger, Yale University School of Medicine and School of Public Health, New Haven, CT

"Understanding Why HIV-Positive Patients Eligible for Antiretroviral Therapy Fail to Initiate Treatment: A Qualitative Study in KwaZulu-Natal, South Africa," Mentor: Sheela Sheno, MD, MPH

Brandon Maust, University of Washington, Seattle, WA

"Impact of *Pneumocystis jirovecii* Infection in NUCU Infants," Mentor: Lisa Frenkel, MD, FIDSA

Hong Loan Nguyen, The Pennsylvania State University College of Medicine, Hershey, PA

"Comparison of Pro-inflammatory Activity of Hemozoin from Different Malaria Species," Mentor: Jose Stoute, MD

Aaron Richterman, Perelman School of Medicine at the University of Pennsylvania, Philadelphia, PA

"Determining the Potential Pool of HIV-positive Organs in a Major Urban Center," Mentor: Emily Blumberg, MD, FIDSA

Patrick Sanger, University of Washington, Seattle, WA

"Evaluation for the Clinical Validity and Utility of Patient-Reported Data Collected by a Novel Post-Discharge Wound Tracking mHealth Application," Mentor: Paul Pottinger, MD, FIDSA

Daniel Sedhom, Albany Medical College, New York, NY

"Utilization and Knowledge of HIV Testing in Adolescents," Mentor: Roberto Santos, MD, MSc

Daniel Silva, Boston University School of Medicine, MA

"Social Determinants of Prevention of HIV/AIDS & HIV/AIDS-Associated Complications," Mentor: Jesse Clark, MD

Madeleine Sowash, Columbia University College of Physicians and Surgeons, New York, NY

"Whole-Genome Sequencing of Carbapenem-Resistant *Klebsiella pneumoniae* Bloodstream Isolates from a Tertiary Care Hospital," Mentor: Anne-Catrin Uhlemann, MD, PhD

Hansel Tookes, University of Miami Miller School of Medicine, Miami, FL

"Cost of Hospitalizations Related to Injection Drug Use at Jackson Memorial Hospital (Miami, Florida)," Mentor: Susanne Doblecki-Lewis, MD

“The preparation and the knowledge you get is invaluable. There is always more need for research but we need a lot of primary care HIV specialists. **This is basically the best opportunity to do that.**”

— Dr. Alisson Sombredero
2012 HIVMA Minority Clinical Fellow

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HIVMA MINORITY CLINICAL FELLOWSHIP





HIVMA Minority Clinical Fellowship

Alisson Sombredero, MD
2012 Fellowship Awardee

A FELLOWSHIP BRINGS COMMITMENT

When Alisson Sombredero, MD, looks around her in Oakland, California, she sees a lot of need. She also sees a lot of opportunity for connection and collaboration between patients and doctors, and hospitals and clinics.

If she is on the front lines of HIV treatment in the United States, it's a role she has gladly embraced, especially since she completed her 2012 HIVMA Minority Clinical Fellowship. "It's great to have one year dedicated to HIV care, working in connection with agencies that specialize in treatment," says Dr. Sombredero. "You get a broad knowledge, and I don't think you would get that breadth of knowledge without this kind of opportunity. With the ID fellowship, I had exposure to HIV patients and so many aspects of HIV medicine."

Dr. Sombredero's fellowship took place at the University of California in San Francisco (UCSF) with mentoring and clinical instruction from Monica Gandhi, MD, MPH, and it was combined with an appointment at the East Bay AIDS Center (EBAC) in Oakland, with mentoring from Christopher Hall, MD.

"The preparation and the knowledge you get is invaluable," says Dr. Sombredero. "There is always more need for research, but we need a lot of primary care HIV specialists. This is

basically the best opportunity to do that. It also gave me a lot of training and a foundation in knowing how to deal with very sick patients in the outpatient setting."

Today, Dr. Sombredero is focused on helping minorities obtain culturally-sensitive medical treatment. She tirelessly divides her time between three HIV clinics in Oakland where her patients are mainly Latino immigrants living with HIV. At the EBAC and Highland Hospital HIV clinics, she cares for patients in an outpatient environment and she practices inpatient HIV medicine as a hospitalist at Alta Bates Hospital.

"It's great to have one year dedicated to HIV care, working in connection with agencies that specialize in treatment."

— Dr. Alisson Sombredero

Dr. Sombredero earned her medical degree from the Universidad de la Sabana School of Medicine in Bogota, Colombia and completed a clinical internship in HIV medicine in Spain. She returned to Colombia, serving as a physician in the rural outposts of Tumaco and Cali. Dr. Sombredero completed her residency training at Highland Hospital in Oakland.

For Dr. Sombredero, her interest in HIV was fostered by an intimate moment with two patients in Colombia. "I was in my rotation in internal medicine, and I had to give the news of a positive diagnosis to the previously uninfected partner in a gay couple. I remember thinking, 'if it was me in that situation, I would be so angry.' When I went into the room to give them the news, they didn't get angry. They were hugging and crying and promising to take care of each other. I was touched."

What has become clear in all her work in underserved communities is the need for additional education and outreach around HIV/AIDS. Both in her fellowship and during her residency at Highland Hospital, Dr. Sombredero saw how a lack of HIV awareness and a misunderstanding of medications led to poor health outcomes. She is especially impassioned about the need to have Spanish-speaking physicians to serve Latino communities. "What we can do now by teaching residents is to give them the education they need so they can screen and prevent and educate their patients about the importance of early diagnosis and the better outcomes that result," she says.

ABOUT THE HIVMA MINORITY CLINICAL FELLOWSHIP

The IDSA Education and Research Foundation HIVMA Minority Clinical Fellowship program supports African American and Latino physicians in gaining HIV clinical experience working with medically underserved patient populations. The goal of the program—which is administered by the HIV Medicine Association—is to boost the population of minority HIV physicians and strengthen the commitment to provide clinical care to HIV positive patients in minority communities.

The fellowships are granted to support one-year of HIV clinical training to up to two fellows per year. Grants are

made to the institution to support a stipend of \$60,000 plus additional funding to cover fringe benefits for one year. An additional \$10,000 is paid to the institution to offset administrative costs and to provide for additional educational opportunities.

Applicants must identify an HIV clinical program associated with an academic institution and a mentor to oversee their clinical experiences. They also are required to submit a training curriculum developed with their mentor. In addition, applicants must demonstrate their intent to establish

their practice in the U.S. and provide care to underserved populations.

During the fellowship year, fellows must work in a clinical setting with a large minority patient population in the U. S., manage at least 30 HIV patients over the course of their clinical training experience, in both inpatient and outpatient settings, and engage in a mix of didactic and clinical experiences designed to provide the fellow with expertise in the longitudinal care of HIV-infected patients and treatment of common co-morbidities and co-infections, such as hepatitis C, substance use and mental illness.

HIVMA MINORITY CLINICAL FELLOW



Stella Safo, MD, MPH
Montifiore Medical Center,
Bronx, N.Y.

Dr. Safo received her degree in medicine from Harvard Medical School and a master of public health degree from the Harvard School of Public Health in 2011. She finished her internal medicine residency in primary care and social medicine at Montefiore Medical Center in 2014. Dr. Safo's interest in HIV medicine began in college, when after her freshman year she volunteered at a summer camp for inner-city families with members living with HIV and felt a strong connection to the participants' life stories and experiences. Dr. Safo sought hands-on clinical training in HIV care through the HIVMA Minority Clinical Fellowship. Her goal is to become an HIV primary care clinician in the inner city or a similar community where HIV incidence is high among minority populations and she can help address an unmet need for care.

Mentor:
Peter Selwyn, MD

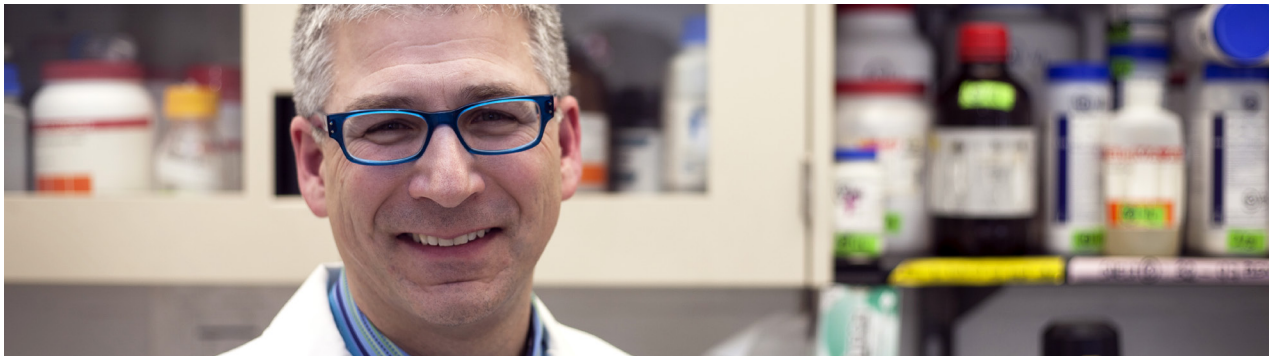
“In an environment where we face growing antimicrobial resistance and ongoing emerging infectious threats, we must continue to recruit, mentor and promote ID physicians who can creatively develop innovative approaches to the diverse issues that we face.”

— Dr. Joshua Nosanchuk
Past Joint Research Awards Recipient

JOINT RESEARCH AWARDS

4





Joshua Nosanchuk, MD, FIDSA
Past Program Awardee

Joint Research Awards

PAYING IT FORWARD

By providing financial support and access to resources for young scientists at the start of their careers, the IDSA Education and Research Foundation can be a powerful tool to laying the foundation for and facilitating the growth of outstanding physician-investigators.

“My academic career would have been drastically different without my IDSA Fellowship in Medical Mycology, which allowed me to stay in Arturo Casadevall’s laboratory to develop my basic science research program to the point where I could successfully compete for an NIH KO8 grant,” says Joshua Nosanchuk, MD, FIDSA, assistant dean of student affairs and professor in the Departments of Medicine (Infectious Diseases) and Microbiology & Immunology at Albert Einstein College of Medicine in New York.

“Similarly, my transition to independence and subsequent receipt of an NIH award RO1 was facilitated by the support afforded by the IDSA Vaccine Young Investigator Award,” adds Dr. Nosanchuk, who was awarded the Pfizer Pharmaceuticals-Roerig Division Fellowship in Medical Mycology, 1997-1999, and the Wyeth Vaccine Young Investigator Research Award, 2004-2006.

“There are so few other foundations that are funding investigators and making the commitment to research. But it is still harder and harder for physician-investigators to get funding.”

— Dr. Joshua Nosanchuk

The Joint Research Awards, co-sponsored by the IDSA Education and Research Foundation and the National Foundation for Infectious Diseases (NFID), are provided to support research by promising young investigators who may not be able to find funding from other avenues.

To pay the opportunity forward, Dr. Nosanchuk was a member of the Joint Research Awards Committee for the IDSA and the NFID from 2005 to 2013, and he served as chair of the panel from 2008 to 2010. “We do a great job recruiting talented people to go into infectious diseases,” says Dr. Nosanchuk. “There are so few other foundations that are funding investigators and making the commitment to research. But, it is still harder and harder for physician-investigators to get funding.”

After his own positive experiences in the lab, and under the guidance of dynamic mentors, Dr. Nosanchuk has worked hard to provide similar opportunities for young scientists in his own labs so they can position themselves to compete for larger grants and to maintain their research. “In an environment where we face growing antimicrobial resistance and ongoing emerging infectious threats, we must continue to recruit, mentor and promote ID physicians who can creatively develop innovative approaches to the diverse issues that we face,” says Dr. Nosanchuk.

Dr. Nosanchuk says that many medical students are primed for a career in ID, if they’re only given the chance to explore the option early in their professions. “I think that getting people interested in infectious diseases has to start in medical school,” says Dr. Nosanchuk. “When people are coming into medical school, the majority of their individual interactions up to that point are with their annual physical or when they are sick with an ear or sinus infection. Many of these diseases that kids get are in their minds, and they’re very ripe to engage on the facts of infectious diseases. It’s what they know from childhood.”

ABOUT THE JOINT RESEARCH AWARDS

The Joint Research Awards are offered by the IDSA Education and Research Foundation and the National Foundation for Infectious Diseases (NFID). By co-sponsoring awards, the non-profit organizations hope to expand the awareness of the awards among the

research community and to attract the best possible candidates every year.

The objective of the awards is to support needed research by promising young researchers who may not otherwise find funding as federal and

other institutional research support becomes more difficult to obtain.

There are several joint grants awarded each year; for 2015, the program includes: The ASP-IDSA Young Investigator Award in

Geriatrics, sponsored by The Atlantic Philanthropies (USA) Inc. and the John A. Hartford Foundation, provides funding for young investigators who develop and implement a basic, clinical or health services research project focused on a geriatric aspect of infectious diseases. The two-year award of \$200,000 is broken down into a \$150,000 research grant from National Institute of Aging and \$50,000 career

development award from IDSA, AAIM and ASP.

A second award, the Pfizer Young Investigator Award in Vaccine Development, is sponsored by Pfizer, Inc. This award provides funding for outstanding research in vaccine development, either through clinical or laboratory investigation. The two-year award is for \$60,000 or \$30,000 per year.

A previous award was the Merle A. Sande/Pfizer Fellowship Award in International Infectious Diseases. The award encouraged young physicians interested in international medicine. The award supported important clinical research in infectious diseases and/or HIV/AIDS conducted in a resource-limited setting.

2014 AWARD WINNERS

Pfizer Young Investigator Award in Vaccine Development

This award provides funding for outstanding research in vaccine development, either through clinical or laboratory investigation, to a candidate who demonstrates commitment to a career in vaccinology.



Scott A. Smith, MD, PhD

Dr. Scott A. Smith, assistant professor in the Division of Infectious Diseases at Vanderbilt University Medical Center, obtained his PhD in microbiology and immunology at the University of Louisville in 2002 and received his MD in 2006. He completed his residency in internal medicine at Vanderbilt University Hospital, followed by a fellowship in infectious diseases. Dr. Smith's research goal was to generate a novel panel of naturally occurring human anti-chikungunya virus monoclonal antibodies to dissect the determinants of human antibody-mediated protection, fully characterizing each potentially neutralizing antibody both functionally and genetically and to use this information for an effective chikungunya vaccine that could enhance the induction of protective neutralizing antibodies while reducing the potential risk for the development of polyarthralgia.

Merle A. Sande/Pfizer Fellowship Award in International Infectious Diseases

This previous award encouraged young physicians interested in international medicine. The award supported important clinical research in infectious diseases and/or HIV/AIDS conducted in a resource-limited setting.



Mary Prah, MD

Dr. Mary Prah is a pediatric infectious disease fellow at the University of California, San Francisco Benioff Children's Hospital. She received her medical degree from the University of Minnesota and completed residency in pediatrics at the Ann and Robert H. Lurie Children's Hospital of Chicago/Northwestern University. Dr. Prah's research investigated the immunologic consequences of prenatal exposure to malaria using samples and data obtained from a randomized trial of chemoprevention during pregnancy and early childhood in Tororo, Uganda. She assessed the relationship between in utero exposure to malaria, the frequency and suppressive function of T cells, cytokine production and the cellular immune response to malaria in neonates. Demonstration of fetal immune tolerance to malaria would support the adoption of improved strategies to combat childhood malaria and influence vaccination strategies.

“It’s a great way to get to know people who are leaders in the field and spend several days learning from them. That’s really the whole point of a conference. It’s to showcase your work, network and learn.”

— Dr. Andrej Spec
2014 IDWeek Mentorship Program Mentee

IDWEEK MENTORSHIP PROGRAM





Andrej Spec, MD
2014 Program Mentee

IDWeek Mentorship Program

A PASSION FOR THE MYSTERY

For Andrej Spec, MD, infectious disease is not only a career, it's a passion, a chance to solve patient health mysteries and unearth remote but meaningful disease connections.

An infectious disease fellow at the Washington University School of Medicine, Dr. Spec chose ID after his surgical rotation in his third year of medical school. At the time, he realized that all the diseases he was completely fascinated by happened to be infections. The die, as they say, was cast.

"I loved figuring out the incredibly complex underpinnings of what's actually happening in the patient, which is very different than in other fields where you see the same syndrome 100 times and apply the algorithms of patient management guidelines," says Dr. Spec, who was born in Yugoslavia and grew up in Chicago. "It's a chance to be Sherlock Holmes, a chance to hunt down leads and figure out the tiny hints that change everything."

So, it made sense that when he was paired for IDWeek's mentorship program with Carol A. Kauffman, MD, a professor at the University of Michigan Medical School and chief of the Infectious Diseases Section at the Veterans Affairs Ann Arbor Healthcare System, he was hoping for someone who shared his passion for ID. Luckily, he found it, and he describes it today as "one of the singularly most valuable experiences of my career."

"She was wonderful to have as a mentor. It's such a great way to get to know people who are leaders in the field and spend several days learning from them," says Dr. Spec, 31. "That's really the whole point of the IDWeek conference. It's to showcase your work, network and learn. And the best part

"It was a nice way to meet another person who does the work, someone I hadn't had a chance to meet before, but had admired for a long time."

— Dr. Andrej Spec

of the mentorship program is that she and I have stayed in touch afterward and still have a valuable relationship."

Dr. Spec says his own interests tend toward fungal infections—an interest of Dr. Kauffman's as well. "The people who do that are few and far between. You don't get to know that many of them in general. It was a nice way to meet another person who does the work, someone I hadn't had a chance to meet before, but had admired for a long time," Dr. Spec says.

Dr. Spec says ID is an intimate enough field that he might have eventually met Dr. Kauffman later in his career, but not in such a favorable way. "Ultimately, if you spend a lot of time in the field, you probably would meet the person who was your mentor, but this accelerates it greatly," says Dr. Spec. "It gives you an opportunity to speak with someone who knows the field and to form a relationship, and if you're lucky, they introduce you to other people in the field."

ABOUT IDWEEK MENTORSHIP PROGRAM

The IDSA Education and Research Foundation launched the IDWeek Mentorship Program in 2014 to create an opportunity for medical students, residents and fellows to closely interact with leaders in their respective areas of investigation or career interest.

While the program's ultimate goal is to foster careers in ID it also allows mentors and mentees to attend IDWeek sessions together, facilitating opportunities for networking and collaboration. Both mentors and mentees describe the informal nature of the week's design as the highlight of the program.

Networking began the first day of IDWeek with a meet-and-greet lunch, after which the mentors and mentees got together for events such as symposia, named lectures, Posters in the Park and other networking events. Many mentor-mentee pairings have kept in contact and initiated collaborative activities and projects.

Mentorship categories included antimicrobial resistance, bacterial infections, clinical practice (non-research), fungal infections, global

health (including systems-based research), HIV/AIDS and other sexually transmitted infections, TB/mycobacterial infections, transplant,

tropical and travel medicine, viral infections (non-HIV) and viral hepatitis.



Thomas Fekete, MD, FIDSA
2014 Program Mentor

A LOVE OF TEACHING

When Thomas Fekete, MD, was given the opportunity to serve as an IDWeek mentor, his response was swift and affirmative. As an active member of the Foundation Board and a dynamic and engaging teacher, he saw the program as a win-win.

“It is a terrific program with so many opportunities for all the parties, both formal and informal,” says Dr. Fekete, section chief of infectious diseases and a professor of medicine at Temple University. “And it was so rewarding and energizing for me to interact with these people who are keen to learn.”

Yet, Dr. Fekete’s passion for teaching wasn’t always so fully realized. In fact, he originally did not seek an academic career at all or, for that matter, a career in medicine.

In the 1970s, Dr. Fekete was bobbing along in college without a specific plan for the future. He loved science and eventually chose biology as his course of study. “My parents are both doctors,” explains Dr. Fekete, “and so I applied to medical school and hoped I wouldn’t get in.” Yearning to get back to biology, Dr. Fekete soon discovered the specialty of ID—microbiology for doctors—and looked for opportunities to work in the clinical setting.

Chatty and affable, Dr. Fekete found the field fascinating. ID was certainly a match for his inquisitive nature while the lack of procedures appealed to him. It was the opportunity to interact with his patients that drew him the most. The level of communication the specialty required aligned with the high value he put on human interaction.

Dr. Fekete has embraced his role as a mentor and teacher. “When I initially thought about academic medicine, I thought about research, but I never found firm footing there. I didn’t know about all the ways that you can apply your medical knowledge so that when you delve into people’s lives, learn about what they do, their hobbies and pastimes, you can make a real difference in your patients’ outcomes. It’s pure gold.”

Similarly, the activities at IDWeek allowed for the chance to exchange experiences in a deep and meaningful way. Dr. Fekete, who is also a professor of microbiology and immunology, is pleased with the Foundation’s success in bringing people to the specialty of ID.

“The really egalitarian nature of mentoring is wonderful. The flow and the flavor of what the learners picked up—the respect that we have for each other—really set up a good model of our style, of who we are and what we value,” he says.

Dr. Fekete applied his philosophy of teaching to his mentor experience at IDWeek. Rather than asking the types of questions that might come up in an interview, Dr. Fekete probed for common interests and guided the conversation to share personal and professional experiences as a basis for individualized advice. “I expand teaching from the conventional notion,” he says. “It’s not only one-directional, and it doesn’t only happen when you say that you’re teaching. What happens in the ‘moment’ can be ten times as valuable as a formal lecture or PowerPoint presentation.”

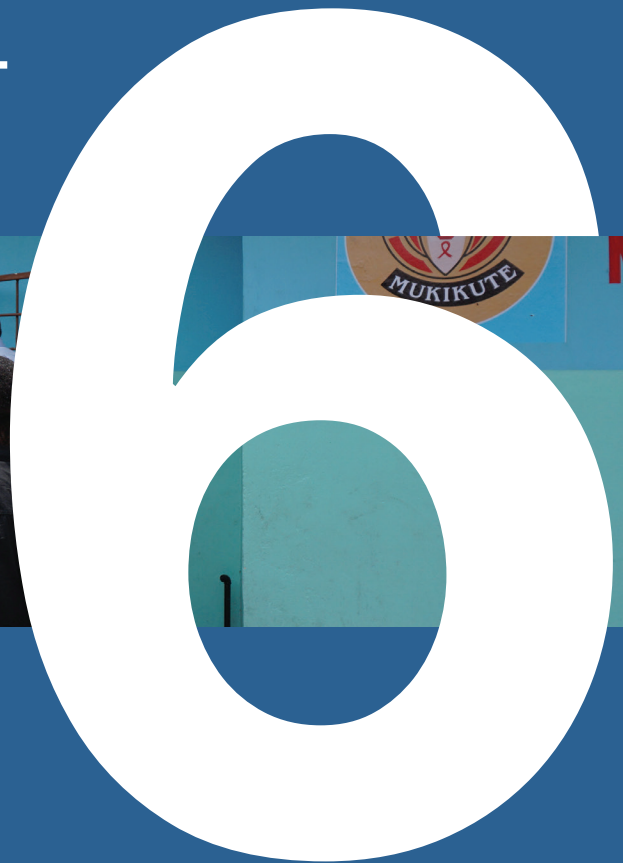
“The really egalitarian nature of mentoring is wonderful. The flow and the flavor of what the learners picked up—the respect that we have for each other—really set up a good model of our style, of who we are and what we value.”

— Dr. Thomas Fekete

“ . . . there was no better way for me to get an honest glimpse of what is going on with PEPFAR than to go to the country with a non-governmental host who made sure we spoke to all types of groups with all kinds of perspectives on the program, the epidemic and the transition to country ownership.”

— Senate staff member and participant 2014 Congressional Staff Delegation visit to Zambia and South Africa.

CENTER FOR GLOBAL HEALTH POLICY





Center for Global Health Policy

The Center for Global Health Policy (the Center) is a forward-looking organization of physicians and scientists promoting the effective use of U.S. funding to address the global HIV/AIDS and tuberculosis (TB) epidemics.

The dramatic and laudatory increase in the last decade in the number of persons receiving treatment with life-extending antiretroviral therapy (ART) is being threatened by a growing worldwide problem with TB, including a rising incidence of strains that are resistant to the available anti-TB drugs, and a steady surge of new HIV infections.

In response, the IDSA Education and Research Foundation and the HIV Medicine Association (HIVMA) established the Center in October 2008 with funding from the Bill and Melinda Gates Foundation. Since 2012 the Center has received funding from Capital for Good. Overseen by a Scientific Advisory Committee composed of leading physicians and scientists with expertise on global HIV and TB, the Center's multi-dimensional mission is to serve as a critical clearinghouse of information for policymakers, federal agencies, non-governmental organizations and

the media. Access to reliable, evidence-based input and guidance from IDSA/HIVMA physician scientists and other professionals allows the Center to advocate for the best use of U.S. funding.

One of the Center's chief avenues for sharing information is through its highly respected *Science Speaks* blog, which provides IDSA physician members, global health advocates and other readers with relevant and timely blog posts, including those from important international meetings. The blog has proved to be essential reading for physicians and scientists worldwide and for staff at international organizations, such as the World Bank and the World Health Organization.

The Center also serves an important convening role. It organizes visits by U.S. policymakers to federally funded HIV and tuberculosis research and program sites in developing countries. In 2014 the Center hosted a congressional study tour to Tanzania and in previous years has hosted tours to Zambia, Kenya and South Africa, to educate policymakers about the value of the U.S. investment in global HIV and TB programming and research and development.

"It was very beneficial to see exactly what kinds of programs the U.S. government is supporting and the types of challenges we are facing in combatting HIV and TB," responded one of the congressional staff. "It was helpful to learn that programs aren't solely focused on one disease but instead that they help treat and prevent HIV, TB and other diseases together."

The Center's mission extends into policy-making and strategy, allowing it to work closely with members of Congress and their staffs as well as federal agencies, non-governmental organizations and foundations. It provides guidance and responses to requests for draft legislation, fact sheets and other information.

Additionally, Center staff members play important roles in key worldwide health coalitions—the Global AIDS Policy Partnership, the TB Roundtable and the Global Health Technologies Coalition. Through these coalitions, Center staff provide counsel to campaign partners and participate in a number of HIV and TB educational meetings with staff from relevant organizations.



Carol Harris, M.D.
Ebola Grant Awardee

GLOBAL CENTER—EBOLA SERVICE GRANT

When the IDSA Education and Research Foundation announced its service grant program for IDSA members volunteering to help Ebola patients in West Africa, it was good news for Carol Harris, MD.

“First and foremost, it validated that this was a good thing to do,” says Dr. Harris, who is a professor of clinical medicine in the Department of Medicine (Infectious Diseases) and assistant professor of Pathology at Albert Einstein College of Medicine of Yeshiva University in New York. “Here was a major organization in our country representing ID that was saying, ‘This is something we have to be involved in.’ I was so proud.”

The \$2,500 IDSA Education and Research Foundation grants were designed to compensate IDSA members for expenses from volunteering in West Africa or attending Ebola training courses in the United States, including lost income as well as costs of travel, inoculations, malaria prophylaxis and other medications for the trip.

Dr. Harris went to Liberia in November 2014 for a six-week stay.

Sent for a week of training in Monrovia, Liberia, where the U.S. military had built a training center, Dr. Harris and other international health care workers practiced with protective equipment and learned treatment protocols to care safely for Ebola patients. “They had Ebola survivors come in and act as patients,” she says. “It was a privilege to be working with our military and those survivors.”

Dr. Harris then went to an Ebola Treatment Unit run by the International Medical Corps in Bong, Liberia for three weeks where she saw between 35 and 40 confirmed Ebola patients during her stay. “It was completely and utterly different from anything I’ve ever done,” she says. “The focus goes against your training, your passion and your academic philosophy. The focus is on you and your team members, and not the patients. If we couldn’t take meticulous care of

“The focus goes against your training, your passion and your academic philosophy—If we couldn’t take meticulous care of ourselves and our team members, then we would not be able to take care of our patients.”

— Dr. Carol Harris

ourselves and our team members, then we would not be able to take care of our patients.”

Returning from Africa to the United States, Dr. Harris was quarantined in her home for 21 days and emerged with a clean bill of health. She hopes that more ID specialists will make the trip to West Africa, when the need is there, and says the call to help is woven deeply into the ID profession. “My experience there,” she says, “was an awesome privilege.”

EBOLA SERVICE GRANTS FOR IDSA MEMBERS VOLUNTEERING IN WEST AFRICA

The Center provides service grants for IDSA members volunteering in West Africa to contain the spread of the Ebola outbreak through treatment of patients or by training health care workers in the affected countries. Established in late 2014, the program, which is ongoing, provided 11 grants

to eligible health care workers by the end of the year.

Each grant of \$2,500 is meant to offset costs volunteers incur by traveling to West Africa or attending the U.S. Centers for Disease Control and Prevention training course or a

comparable course. Volunteers are working with government-affiliated organizations and non-governmental organizations including Médecins Sans Frontières (Doctors Without Borders), Partners in Health, International Medical Corps and Heart to Heart International.

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Eliot W. Godofsky MD, FIDSA
Foundation Supporter

IDSA EDUCATION AND RESEARCH FOUNDATION, A NO-BRAINER

For Eliot W. Godofsky, MD, FIDSA, knowledge translates into support when it comes to the good work of the IDSA Education and Research Foundation.

A frequent and passionate supporter of IDSA, with both time and donation, Dr. Godofsky also gives generously to the Foundation because he believes in its mission and recognizes the value of its fellowships and grants in building the next generation of ID specialists.

“When asked to donate to the Foundation, I suspect that some people wonder where their money would go,” says Dr. Godofsky, who is chief operating officer, physician and principal research investigator at Bach & Godofsky, in Bradenton, Florida. “I believe it is spent wisely on behalf of our Society and on behalf of our field. If more people knew that, they would pay more attention to the work of the Foundation and they would conclude, like me, that it’s a no-brainer to support its work.”

Quite simply, Dr. Godofsky believes the Foundation holds the key to the future of infectious disease. “I don’t mean to sound corny, but young people really are our future, and helping to nurture young ID physicians and scientists and medical students should be a priority for us,” adds Dr. Godofsky, who received IDSA’s Watanakunakorn Clinician Award in 2014.

Dr. Godofsky says the IDSA Education and Research Foundation’s programs, especially the Medical Scholars Program and the Minority Clinical Fellowship, have special meaning for him because he, too, benefited from a fellowship early in his career—a fellowship that changed his life.

“I don’t mean to sound corny, but young people really are our future and helping to nurture young ID physicians and scientists and medical students should be a priority for us.”

— Dr. Eliot W. Godofsky

“I thought I was going into oncology when I was a medical student,” Dr. Godofsky recalls. “I received an American Cancer Society scholarship to go to Sloan Kettering. While I was there, I had to pick a specialty at the hospital and I picked infectious diseases, and after that rotation, my career choice was a done deal. I so appreciate the importance of that exposure. You can be a medical student or resident at a program that may not have ID as a signature program. These fellowships stir up scientific curiosity and, hopefully, give exposure to infectious disease at an important moment.”

Dr. Godofsky, who primarily does clinical research in hepatitis C, is especially gratified by the Foundation’s programs supporting the Hepatitis C Knowledge Network, which has become a critical clearinghouse of information for physicians trying to keep up with changes in the field. “This has been an excellent way to educate the infectious disease community about the fast changing practice of hepatitis C,” says Dr. Godofsky.

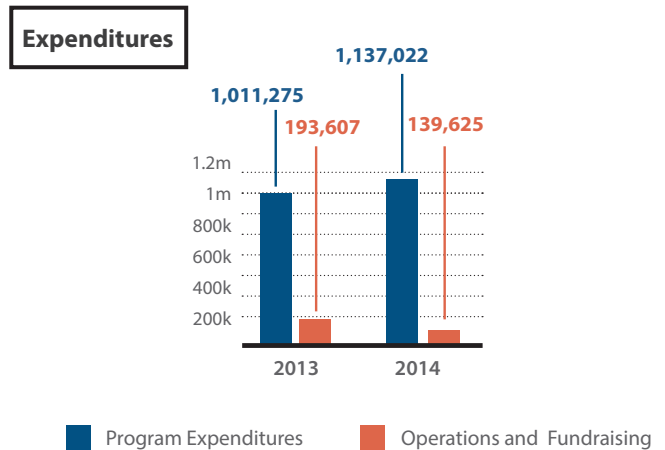
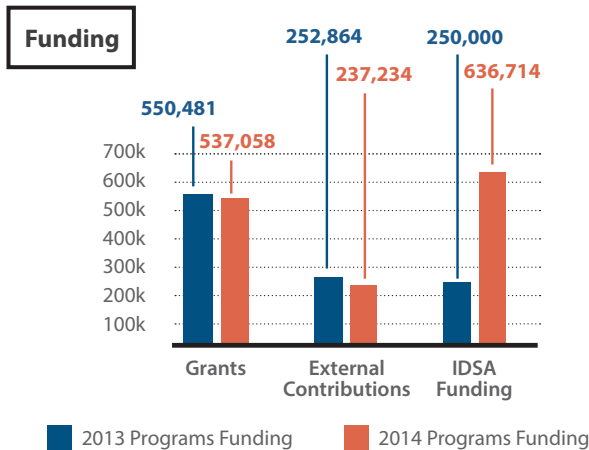
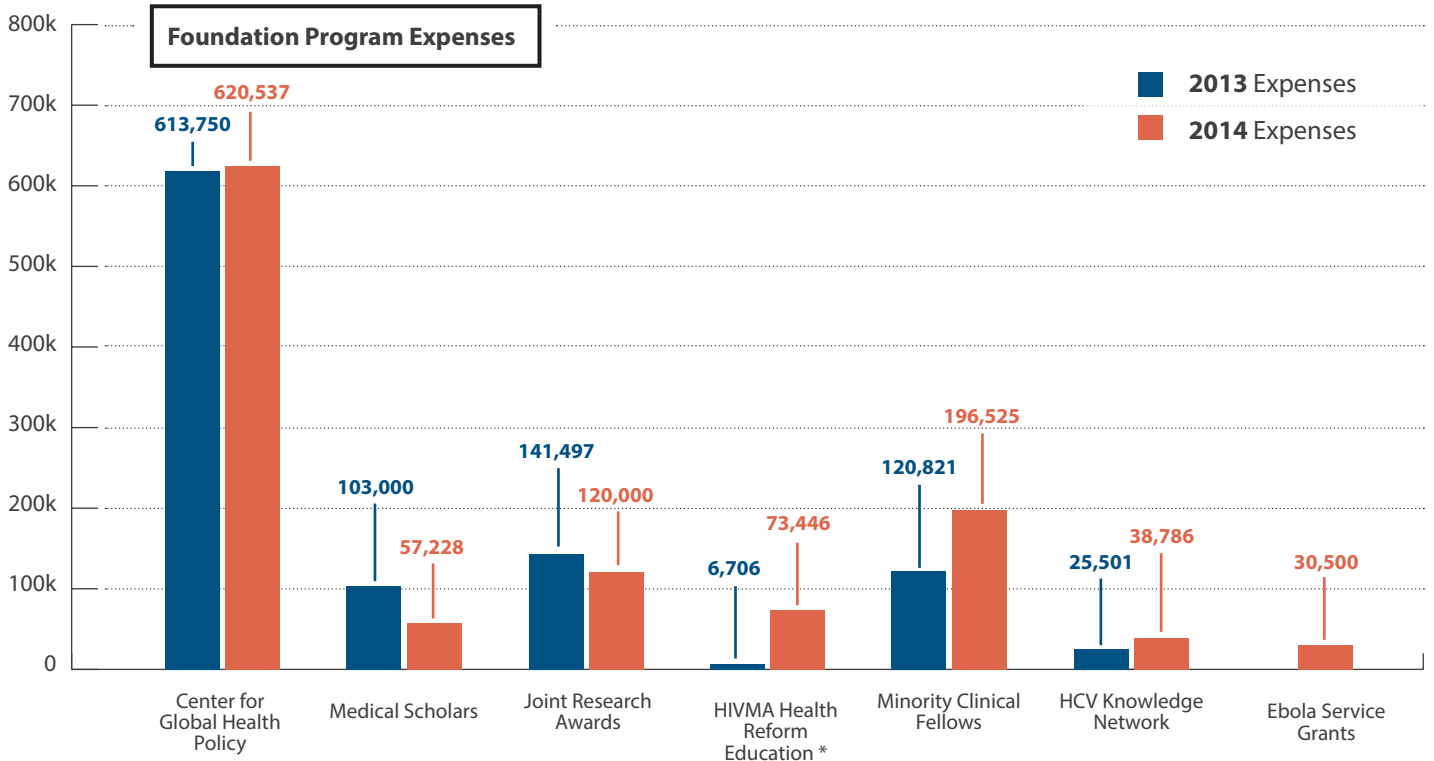
The IDSA Education and Research Foundation provides numerous fellowships, scholarships and awards to students, residents, fellows and infectious diseases specialists with the intention of attracting the best and brightest to the field of infectious diseases, and supporting those in the field.¹ In recent years the Foundation has added educational programming for members and mentoring programs for medical students, residents

and fellows. The Foundation relies on support from members, non-members and organizations to offer such scholarships and programming.

The financial overview of the Foundation for 2013 and 2014 is presented below. The charts present expenditures for programming and operational support and revenues from grant proposals, donations and funding from IDSA.

The Foundation is dedicated to effectively and efficiently using its resources, striving to spend very little on operational support with an emphasis on programming. The Foundation will continue to build on generous support from both members and non-members in order to continue providing for infectious diseases research and education.

1. The Center for Global Health Policy is the Foundation's largest program, focusing on ensuring key decision-makers are well-informed about the world's leading infectious disease killers: HIV/AIDS and tuberculosis. The Center receives the majority of its funding through a grant from Capital for Good.



* Funding supports projects for the following year.

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