INFECTIONOUS DISEASES SOCIETY OF AMERICA FOUNDATION

ANNUAL REPORT 2016

TREATING INFECTIOUS DISEASES

SAVING LIVES
<table>
<thead>
<tr>
<th>Table of Contents</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Message From The Foundation Chair</td>
<td>2</td>
</tr>
<tr>
<td>Message From The Chief Executive Officer</td>
<td>3</td>
</tr>
<tr>
<td>Your Investment at a Glance</td>
<td>4</td>
</tr>
<tr>
<td>Mary Millard: Survivor Defies All Odds</td>
<td>6</td>
</tr>
<tr>
<td>Treating the Patient</td>
<td>9</td>
</tr>
<tr>
<td>Inspiring the Next Generation</td>
<td>11</td>
</tr>
<tr>
<td>Nurturing Our Workforce</td>
<td>15</td>
</tr>
<tr>
<td>Protecting the Future Of ID</td>
<td>19</td>
</tr>
<tr>
<td>Impacting Public Health</td>
<td>21</td>
</tr>
<tr>
<td>Brianna Strand: A Legacy of Courage</td>
<td>24</td>
</tr>
<tr>
<td>Finding New Discoveries</td>
<td>27</td>
</tr>
<tr>
<td>Fighting Stigma</td>
<td>29</td>
</tr>
<tr>
<td>Financial Stewardship</td>
<td>30</td>
</tr>
<tr>
<td>Building a Legacy Through Giving</td>
<td>31</td>
</tr>
<tr>
<td>Donors</td>
<td>32</td>
</tr>
<tr>
<td>Board of Trustees and Staff</td>
<td>34</td>
</tr>
</tbody>
</table>
“Her enthusiasm became infectious”

– Ryan Westergaard, MD, PhD, MPH
2016 HIVMA Medical Students Program Mentor
Message from the Foundation Chair

Dear Colleagues,

If I had to choose a single moment to best exemplify the work of the IDSA Foundation in 2016, it would be the meet-and-greet luncheon that brought together our established ID specialists with their young mentees during IDWeek. Always a lively and enriching event, the gathering illustrated the generosity and spirit of our profession—and it gave us a chance to see the faces of ID’s future.

Mentoring plays an important role in all our lives, whether you’re being mentored as an early career physician or serving as a mentor years into your career. In the IDSA Foundation 2016 Annual Report, you’ll read profiles of our talented colleagues, and learn how mentoring has impacted their career both professionally and personally.

Like you, I fondly remember my first mentor, Dr. Marvin Turck, who opened the door to the field of ID during my medical training at the University of Washington. A thoughtful and inspiring professor and clinician, he influenced many of the choices I would make in the early days of my career.

The mission of the foundation has always been to provide career development opportunities, support education, and help to fund ID research. Toward that goal, we have actively supported awards, fellowships, scholarships and, of course, mentorships.

For us, 2016 was a year of building on successes. We continued to strengthen our support for medical students and residents seeking to enter ID. In addition, we doubled down on our financial assistance for early career investigators. Read on to learn more about what made 2016 a fruitful year for the Foundation.

“My challenge to IDSA members is to support the work of the Foundation and engage early career physicians in their training.”

Your commitment to our mission will not only help to ensure the future of our profession, but it will also provide the support our fresh talent will need to become the future leaders of ID.

Warmest Regards,

Johan S. Bakken, MD, PhD, FIDSA
IDSA Foundation Chair and IDSA Immediate Past President
Dear Friends,

Let me start off by saying, thank you!

As I celebrate my first year as CEO of the IDSA Foundation, I am extremely grateful and impressed by the ongoing commitment of the thousands of ID physicians, scientists, and supporters—all of whom have had a tremendous impact on the field of ID and on the millions of people who are afflicted by infectious diseases every year.

Founded in 2001, the IDSA Foundation is the Society’s charitable arm, committed to providing career development opportunities, supporting education, and helping to fund ID research. This report focuses on the power of our programs and their ability to harness the energy and passion of our medical students, residents, and fellows, and help them turn their aspirations into reality.

All of us are vulnerable to infectious diseases, from drug-resistant superbugs to the next influenza pandemic. That’s why now, more than ever, there is a critical need to continue to attract more brilliant minds to the field of ID as these health professionals will be the drivers of scientific discoveries, the leaders of public health programs throughout the world, and the astute clinicians on the front lines providing life-saving care.

As we look back on 2016, one thing remains clear: mentorship continues to be a critical entrée into the field of ID, benefiting both the mentee and the mentor, ultimately helping to influence the next the generation of ID leaders.

From conquering smallpox to transforming HIV into a manageable disease, no other subspecialty has had as profound an effect on human health. ID professionals have developed life-saving vaccines, provided leadership on antimicrobial resistance, and been on the frontlines of outbreaks such as Ebola and Zika. When the next challenge arises, ID professionals will take it on.

The future is bright and the progress we make will have everlasting impact. Our success continues because you made that possible. THANK YOU.

Sincerely,

Christopher D. Busky, CAE
Chief Executive Officer
IDSA Foundation
This is a pivotal time for the field of infectious diseases. Emerging infections, novel influenza viruses, antimicrobial resistance, and old threats like HIV and tuberculosis make communities throughout the world more vulnerable than ever before. These challenges demand resourceful and knowledgeable ID clinicians and scientists who can respond to these ongoing threats.

The IDSA Foundation helps build the next generation of ID specialists who will respond to these very threats. Through education, research, and career development, the Foundation seeks to prevent, treat, and eradicate infectious diseases.

Our efforts are working. In 2016, there was a 41 percent increase in residents and medical students who attended IDWeek and a 76 percent boost in participation in the IDWeek Mentorship Program. Even more striking was a 163 percent increase in mentor volunteers.

Meanwhile, new multi-year research opportunities have been created, research funding has expanded, and the number of fellowships awarded has increased three-fold.

As ID continues to evolve, it will be necessary to expand programs that produce future ID specialists whose knowledge and skills will be used to treat patients, and save lives.
Because of Your Support the Foundation Was Able to...

- **41%↑** increase resident and medical student attendees at IDWeek
- **3X↑** increase the number of fellowships awarded in the HIVMA Clinical Fellowship program
- **76%↑** increase fellows, residents, and medical students participating in IDWeek Mentorship Program
- **16** award medical students scholarships to conduct research with a mentor in the new, multi-year HIVMA Medical Students program
- **3X↑** increase the number of fellowships awarded in the HIVMA Clinical Fellowship program
- **37%↑** increase scholarships to medical students through the Medical Scholars program
- **$70,000** offer new research funding to young investigators
Mary Millard’s life was turned upside down on September 28, 2014. Prompted by an unusual incidence of atrial fibrillation, Mary was taken to the ER. With her loving husband by her side, Mary learned she had an aortic aneurism, a collapsed aortic valve and an enlarged aorta. In a matter of hours, Mary found herself faced with a major surgery.

“It all happened so fast,” recalls Mary. “Before all this, I had an amazing life. I’d never even been really sick or even had to take medication. I enjoyed a healthy and active lifestyle. I loved taking my dog out for long walks. I was happily married to a man that I adored. I was even pursuing a master’s degree and looking forward to a possible career change. Then, suddenly I was facing death.”

Just hours after arriving to the ER and shortly before her surgery, Mary suffered cardiac arrest and almost died. In order to keep her alive, doctors placed Mary on extracorporeal membrane oxygenation (ECMO), a form of life support which bypasses the heart and lungs by using tubes and external machinery to oxygenate the blood.

Although in critical condition most of her stay, she survived after three long and painful weeks in the hospital. She was slowly becoming stable enough to be considered for release 10 days after the open heart surgery when she suddenly developed a fever. Soon,
doctors discovered she had contracted *Pseudomonas aeruginosa* (*P. aeruginosa*), a rare and difficult infection to treat. The bacterium had attached itself to the artificial parts put into her body during the surgery and had formed a biofilm.

The infection also caused her to go into acute septic shock. For the next month, confined to her hospital bed, Mary was often intubated and in a medically induced coma.

Recovery was not easy. Mary had to learn to walk and use her hands again. Even after her release, Mary’s life would never be the same. “I recall leaving the hospital confused and with no real understanding of the severity of what I had experienced,” says Mary. “I thought the infection would go away and I would be able to move on completely.”

“It was with the help of my ID specialist, Dr. Vance G. Fowler, that I was able to understand more about my *P. aeruginosa* infection and that I could expect to take medications for the rest of my life.” *P. aeruginosa* is known to be resistant to many standard antibiotics, and Ciprofloxacin is the only oral antibiotic that could be used for her treatment, and it would only be able to contain her infection as it is not a cure.

“I really appreciate the relationship that I have with Dr. Fowler. I think it has been integral to my journey to recovery,” says Mary. “Since developing this infection, my life has changed drastically. I once had a career I loved, but I am unable to work due to frequent hospitalizations and my need for follow-up care. The healing process has been very difficult on me and my family. I am not nearly as active as I once was. Due to the septic shock I can’t go for runs or long walks with my dog, as I experience painful numbness in my feet when I am on them my for more than a few minutes at a time. I am also not allowed to drive due to side effects of the Cipro.”

Despite her challenges, Mary believes she has been the recipient of excellent care from her Infectious Disease (ID) doctor. The two share a unique patient-doctor relationship. According to Mary, “Dr. Fowler often reminds me that we are a team. I am confident that he has my best interests at heart, and he is very transparent about my care. He listens to me and takes my concerns seriously, and considers what I say before determining my treatments.”

Mary believes that other patients could benefit from a relationship like theirs. “I think it’s important that doctors listen to the concern and needs of their patients.” For students who are considering a career in medicine, Mary really encourages them to consider the field of infectious disease, a field that is fast paced and ever changing. “I hope that medical students never forget that there is a human face to medicine, and that there are human lives that will be impacted by what they do!”

Mary is also a positive force and health advocate. “I want to find ways to encourage people who are in the midst of their own battles with sickness. I often speak publicly about hospital infections, blog and discuss research and latest treatments on my Facebook page.” Though her medication leaves her fatigued, she has considered swimming for a low impact workout and looks for other ways she can remain active.

And while Mary’s challenges are not over, she, her husband, and her doctor together are learning each day how to be better advocates for her in order to ensure she continues to have the best possible treatment, and they all remain hopeful about her future—together.
If specializing in ID means getting to work every day with people like my mentor and his patients, the decision isn’t going to be that difficult.”

Vanessa Kung, PhD
2016 HIVMA Medical Students Program Mentee
Dr. Kung credits her interest in ID to an undergraduate experience in Uganda.

“I shadowed primary care providers and community health workers” she says. “A lot of their work involved fighting infectious diseases, which are leading causes of death in areas of extreme poverty.”

While in graduate school she began working in Dr. Ryan Westergaard’s clinic and was inspired by how he took care of patients.

“He and his team care for people in really challenging psychosocial situations, with extraordinary thoughtfulness and dedication,” she says. “Getting to see them work with patients expands the boundaries of what I view as possible components of medical care, and then as necessary components of medical care.”

She applied for the HIVMA Medical Students Program to work with Dr. Westergaard and learn more.

“Both his clinical practice and his research focus on caring for underserved populations, including the urban poor and prison populations. I respected his research approach, which included close collaboration with communities, and being committed to understanding what the community needed from the community’s perspective.”

The two-year HIVMA award program allows her to develop deeper relationships with patients, which she describes as “a real joy.”

The experience has given direction to her career path, she says. “If specializing in ID means getting to work every day with people like my HIVMA mentor and his patients, the decision isn’t going to be that difficult.”
If they are interested in our field, we want to capture that enthusiasm and help them see how a career in infectious diseases could be a good fit for them.”

Ryan Westergaard, MD, PhD, MPH
2016 HIVMA Medical Students Program Mentor
INSPIRING the next generation

For Ryan Westergaard, MD, PhD, MPH, assistant professor of infectious disease at the University of Wisconsin-Madison School of Medicine and Public Health, his curiosity for the field of ID began as a young man. He was intellectually and morally aware of the social determinants of health, yet it wasn’t until he became a medical student that he saw how his interest in medicine could be combined with social justice and infectious diseases.

His current research projects involve intervention to improve quality and continuity of care for HIV patients with a focus on caring for underserved populations, including the urban poor and prison populations. According to Dr. Westergaard, “when you train for so long to work in a certain field, your career becomes more than just a job. That’s why I think it’s important to provide the next generation of ID physicians with hands on training and mentoring opportunities.”

“You can’t learn career development from a textbook,” says Dr. Westergaard.

For him, mentorship includes exposing a medical student to the ways in which others have balanced their career, family life and role as a citizen.

Vanessa Kung, PhD, who is enrolled in the medical school’s Medical Scientist Training Program, was a graduate student in a protein chemistry lab when she approached Dr. Westergaard about his work in HIV medicine and asked if she could shadow him.

Dr. Kung spent the first six months working in Dr. Westergaard’s research group, analyzing epidemiological data and communicating with the Centers for Disease Control and Prevention. The experience gave her a new set of research skills, he says, “and allowed her to see how science is used in the realm of public health and in a clinical setting.”

“The HIVMA Medical Student’s Program has been good for both Vanessa and me,” says Dr. Westergaard. “I think it’s a way to give students an extra nudge toward feeling welcomed into a field and encouraged when they have a professional organization behind them. And it’s a reminder to the mentors that we’re investing in the next generation of HIV physicians.”

Ryan Westergaard, MD, PhD, MPH
“The close one-on-one mentorship has been important to my early growth as a researcher in medical school and instilled in me a passion for addressing health disparities.”

– 2016 HIVMA Medical Student Program Awardee
I like how multifaceted ID is — It is a broad field and interfaces with every other medical specialty.”

Bryna Harrington
2016 IDWeek Mentorship Program Mentee
Having taken full advantage of every IDSA Foundation program for medical students, Bryna Harrington, a MD/PhD student at the University of North Carolina, is exploring the various career paths available in ID.

“There are so many routes you can take that can land you a fulfilling career, and it’s nice to hear about those,” says Harrington. As part of the IDWeek Mentorship Program, Harrington was paired with James M. Hughes, MD, FIDSA, professor of medicine and public health at Emory University. Dr. Hughes was also paired with an ID fellow from Duke University, Jessica Seidelman, MD. The mentor and his two mentees became fast friends as they attended IDWeek sessions and lunches together.

“Everybody felt like they had something to contribute to the relationship,” says Harrington. Dr. Hughes is well-known in the field of infectious disease and is also a former IDSA President. Jessica is currently going through her ID training and thinking about junior faculty positions. According to Harrington, “for me it was helpful to hear about a career in ID from someone who is in the fellowship stage and from someone like Dr. Hughes who is so well regarded in the field.”

While she won’t choose her medical specialty until 2019, Harrington is drawn to the field of ID.
“

I left IDWeek feeling even more empowered and excited for my future as an ID provider! Thank you.”

– 2016 IDWeek Mentorship Program Awardee
“Even one influential experience, no matter how brief, can change the trajectory of someone’s career.”

Ravi Jhaveri, MD, FIDSA
2016 IDWeek Mentorship Program Mentor
PROTECTING
the future of ID

Ravi Jhaveri, MD, FIDSA cares for children with all kinds of infections but has a special interest in children with viral hepatitis. His research interests include infants and children with hepatitis B and C, management of fever illnesses in young infants, and improving outcomes for children with infectious diseases.

When the chance came for Dr. Jhaveri, an active IDSA member and Foundation donor, to volunteer as a mentor, he saw it as an opportunity to give back to his profession and pay forward all the time spent and good advice he received during his career.

Dr. Jhaveri was matched with Ibukun Akinboyo, a pediatric infectious disease fellow from Johns Hopkins University School of Medicine. He saw this role as offering her career advice and networking opportunities, with an open invitation for career guidance down the road, if she should need it. During the course of ID Week, they had lunch together, met several times, and touched base with colleagues whom he invited to meet with Dr. Akinboyo because of their shared interests.

Even one influential experience, no matter how brief, can change the trajectory of someone’s career. “Mentoring may only require a minimum amount of time and effort, but it’s the most meaningful thing we can do,” he says.

“If there’s no one here to take over tomorrow, the field dies. It’s part of our obligation to give back.”

Ravi Jhaveri, MD, FIDSA
In HIV medicine, you not only provide care to your patient, but you become involved in the community and impact public health.”

Cynthia Snider, MD
2004 Medical Scholars Program Awardee
Like many established ID specialists, Dr. Cynthia Snider’s passion for a career in infectious diseases was intensified during early research assignments. For Dr. Snider, it was her hands-on experience in Uganda working with HIV-positive patients in the field and later in Bangladesh with malnourished infants with enteric infections.

Her Uganda research also gave her a chance to work side-by-side with her mentor, AIDS pioneer and past IDSA President, Merle A. Sande, MD, FIDSA at the Infectious Disease Institute (IDI) at Makerere University. IDI provides critical medical care in Africa and has trained more than 19,000 health workers from Uganda and 27 other African countries.

“Not only did my experience during medical school in Uganda confirm my love for infectious diseases but also HIV medicine and global health.”

“I’ve gravitated toward the field of infectious diseases because there are so many interesting tropical illnesses where you see a great deal of collaboration between various groups of providers as well as researchers,” says Dr. Snider. “Not one group can understand everything. These collaborative efforts bring together different specialties and treatment modalities to help patients.”
“Without the IDSA Foundation Medical Scholars Program, it would not have been possible for me [to take part in the study]; It was an experience I will not forget.”

– 2016 Medical Scholars Program Awardee
Brianna Strand loved three things in life: her animals, her family and her Seattle Seahawks—and not necessarily in that order. For Brianna, it was love that defined her brief but impactful life, and not the cystic fibrosis she was born with or the intractable lung infections that marked her final weeks and days.

“Brianna was the family’s spirit coach, and she drilled all of us in the importance of living in the moment, dressing up, having snacks and just having a great family time,” recalls Nick Strand, her husband since 2011.

During her junior year at Washington State University, where she studied animal science and zoology, Brianna felt her lungs weren’t responding to her regular antibiotic treatments. Paul Pottinger, MD, an Associate Professor of Medicine, Division of Allergy & Infectious Diseases at the University of Washington (UW) and an IDSA member, was called in to find out why.

After culturing her lungs, he discovered Mycobacterium abscessus, the hospital-acquired infection (HAI) that usually causes minor skin infections, but in patients with lung diseases can be more critical. Under Dr. Pottinger’s care, Brianna began a combination of two to three antibiotics a day to address her lung infection. For the next five years, they negotiated the skirmishes of living with CF and abscessus—all the while knowing that
Brianna could not qualify for a lung transplant or likely be able to have children until the infection was defeated.

“Dr. Pottinger was a lifeline,” recalls Nick, noting that the doctor was as committed to Brianna’s quality of life as her physical health. “He was almost a best friend to her. He would meet with us as a family, bringing all of us together with Brianna, to talk about what needed to be done. There are not enough nice things we can say about him.”

Maybe it was destined then that Brianna would take her hard-earned knowledge of medicine and pay it forward. During her treatment, Brianna would make regular trips to visit with first-year UW medical students. She would tell them what it was like to be a patient, stress the importance of treating the person as well as the illness, and recount how her health was seriously weakened by an antibiotic-resistant infection.

“I’ve known Brianna for 10 years, she has been my wife and best friend,” says Nick, “and from the very beginning she always wanted to do whatever she could to speak for those who couldn’t.”

Brianna proved an inevitable choice to become an ambassador about the dangers of antibiotic resistance and the necessity of having more physicians choose ID as a career path. For Brianna, ID advocacy was very personal. She refused to accept that other people would face the same challenges she experienced due to antimicrobial resistance, and she knew it would require a national commitment to combat ID and to create new and more effective antibiotics.

IDSA asked Brianna to join five luminaries—physicians and government agency leaders—to speak on its behalf at a Congressional Briefing on Antibiotic Resistance in Washington, D.C., in March 2017. The U.S. Senate briefing was sponsored by the U.S. Stakeholder Forum on Antimicrobial Resistance (S-FAR), a national organization of partners led by IDSA, to combat the rising threat of antimicrobial resistance. Brianna visited congressional offices and met with lawmakers, recounting her story and urging them to take action on antimicrobial resistance.

“She had a desire to influence really good things in a great way,” says Brianna’s father Jim Oas. “The congressional briefing was the coup de grâce to everything she had done before that, to do something really important and bigger than she was.”

That bigger-than-life quality made her a great public speaker for IDSA, of course, and the light at the center of every crowded room. It also was at the core of her determination to fight off what Dr. Pottinger described as the “superbug” in her lungs.

“Her superpower was her ability to battle a superbug,” says Nick. “That was Brianna. Why make it easy, let’s go with the big guns. Here we are living life like it’s normal, but her body was completely at war.”

Brianna died four days shy of her 29th birthday on May 7, 2017, as her body could no longer fight her antibiotic-resistant infection. But, still, the battles—and her legacy—continue.

Her efforts on behalf of ID will persist, both in her stirring story about the dangers of antimicrobial resistance and in the medical students she inspired through her grace and bravery. “I know medical students have to follow their hearts,” says Jim. “But if they really want to see the difference they can make, they’ll find it in ID.”

In March 2017, the U.S. Senate briefing was sponsored by the U.S. Stakeholder Forum on Antimicrobial Resistance (S-FAR), a national organization of partners led by IDSA, to combat the rising threat of antimicrobial resistance. Brianna visited congressional offices and met with lawmakers, recounting her story and urging them to take action on antimicrobial resistance.

“She had a desire to influence really good things in a great way,” says Brianna’s father Jim Oas. “The congressional briefing was the coup de grâce to everything she had done before that, to do something really important and bigger than she was.”

That bigger-than-life quality made her a great public speaker for IDSA, of course, and the light at the center of every crowded room. It also was at the core of her determination to fight off what Dr. Pottinger described as the “superbug” in her lungs.

“Her superpower was her ability to battle a superbug,” says Nick. “That was Brianna. Why make it easy, let’s go with the big guns. Here we are living life like it’s normal, but her body was completely at war.”

Brianna died four days shy of her 29th birthday on May 7, 2017, as her body could no longer fight her antibiotic-resistant infection. But, still, the battles—and her legacy—continue.

Her efforts on behalf of ID will persist, both in her stirring story about the dangers of antimicrobial resistance and in the medical students she inspired through her grace and bravery. “I know medical students have to follow their hearts,” says Jim. “But if they really want to see the difference they can make, they’ll find it in ID.”
Sometimes I feel like I’m an anthropologist studying different tribes and having to understand them. You need to have a pathogen’s eye view of the world.”

Joanna Schauenman, MD, PhD
2015 ASP-IDSA Young Investigator Award in Geriatrics
A scientist and budding immunologist, Joanna Schaenman, MD, PhD, has been applying the common sense approaches she uses in the laboratory to the problems associated with organ transplantation and infection in elderly patients.

“My research is most pressing for older patients because of their increased risk of death from infection,” says Dr. Schaenman, an assistant clinical professor in infectious diseases at the University of California, Los Angeles (UCLA) Health Sciences. “If we find something that helps elderly patients, the same tool could also be applied to younger patients. I really think it’s a very big need in the field to address customization of immune suppression. My personal goal is to put myself out of business by decreasing infection.”

“The older patient has less resilience and ability to recover,” she says. “They have a very severe hospital course and sometimes progress to death, and a similar patient who is younger would go on to recover. But then we also see older patients have fewer long-term infection problems than some younger patients.”

With the upward age ceiling for transplant candidates going into the 80s, Dr. Schaenman says improving the mortality and morbidity of elderly transplant candidates is essential. At UCLA, she serves as a consultant on the inpatient transplant infectious diseases service and also has a weekly outpatient clinic.
"This is not a field you can walk into haphazardly. The fellowship gives you a running start and a boost so you can continue to live your dream."

Maya Green, MD, MPH
2011 HIVMA Clinical Fellow
FIGHTING stigma

For Maya Green, MD, MPH, providing care for her HIV-positive patients is as much about fighting stigma about HIV and AIDS as attending to medical diagnosis and treatment.

“I treat stigma, which is a very critical problem when it comes to HIV,” says Dr. Green. “Stigma is an infectious disease of the mind. It consumes you and kills more people than HIV could ever do. We can only treat stigma through education. Stigma is the disease. Education and awareness is the vaccination.”

Dr. Green is the founder of HIV Real Talk, a community-based HIV screening and prevention project in high-risk communities. In 2015, the Illinois Jaycees selected Dr. Green as a recipient of its Outstanding Young Persons of Illinois award for her humanitarianism and volunteer leadership.

Dr. Green recommends the HIVMA Clinical fellowship to colleagues who are not trained in infectious diseases and are seeking to get hands-on training in HIV medicine. “I am thankful for the Fellowship because you need to know the lingo to be impactful in this field. This is not a field you can walk into haphazardly. The fellowship gives you a running start and a boost so you can continue to live your dream.”
Financial Stewardship

The IDSA Education and Research Foundation carefully facilitates the charitable contributions we receive from our generous supporters. In fact, nearly 90 percent of all contributions go directly to support our education, research and career development efforts.

Thanks to the support of kind donors like you, the Foundation continues to provide numerous fellowships, scholarships and awards to students, residents, fellows and infectious disease specialists with the intention of attracting the best and brightest to the field of infectious disease, and supporting those in the field.

The financial overview of the Foundation for 2016 is presented below. The pie charts present the expenses and revenues for the Foundation and may not be consistent with financial statements, which must be based on generally accepted accounting principles (GAAP).

---

### 2016 Revenues

- IDSA: $631,958
- Individuals: $207,491
- Grants: $395,500
- Other: $3,265

Total: $1,238,214

### 2016 Expenses

- General and Administrative: $17,090
- Career Development: $521,650
- Fundraising: $172,112
- Research: $321,738
- Education: $206,180

Total: $1,238,770
When Anne Gershon, MD, FIDSA, a past president of IDSA, is asked about why she is a financial supporter of the IDSA Foundation, her answer is simple. It’s a way of giving back to the organization that has been so influential to her career.

“Many of us are so busy and work all the time because that is what we think is our main activity in life. The one thing we can always do is to make financial sacrifices, thereby missing frivolous things we might like for ourselves and give from our wallets,” adds Gershon.

Dr. Gershon, Professor of Pediatric Infections Diseases at Columbia University College of Medicine, says ID specialists should think even more broadly about their financial legacy to the field, and bequeath a donation to the foundation in their wills.

“Including money in our wills to help our profession is something to keep in mind,” she says. “It’s another way we can give back.”

In Dr. Gershon’s estimation, one of the most important issues the Foundation is championing today is devising ways to ignite the interests of medical students to the field.

“I was a medical student at Cornell in the early 1960s, at a time when students had contact with germs like TB and plague in the microbiology lab,” she says. “You really have these things right up close and personal, and it gets very exciting. Being in that atmosphere at such an early stage in my education was a major reason that I went into infectious disease.”

“Education is one of the founding principles for IDSA and it’s one of the things that always attracted me to the organization,” says Dr. Gershon.

Equally important to Dr. Gershon is the Foundation’s commitment to providing access to mentorship opportunities, which she believes are critical for young people interested in medicine. “It’s the people who you interact with who are so important,” she says. “The Foundation looks for ways to foster opportunities for young people to interact with today’s leaders in the field. When you’re young, you can’t come up with that yourself.

Anything the Foundation can do with having young people interact with the giants of ID, I’ll put my money behind that.”
Board of Trustees

Johan S. Bakken, MD, PhD, FIDSA, Chair  
St. Luke’s Hospital, Duluth, MN

Janet A. Englund, MD, FIDSA, Vice Chair  
Seattle Children’s Hospital  
Seattle, WA

Larry K. Pickering, MD, FIDSA, Secretary  
Emory University School of Medicine  
Atlanta, GA

Helen W. Boucher, Treasurer  
Tufts Medical Center  
Boston, MA

William G. Powderly, MD, FIDSA  
President of IDSA  
Washington University School of Medicine  
St. Louis, MO

Paul G. Auwaerter, MD, MBA, FIDSA  
Johns Hopkins University School of Medicine  
Baltimore, MD

Cynthia L. Sears, MD, FIDSA  
Johns Hopkins University School of Medicine  
Baltimore, MD

Angela M. Caliendo, MD, PhD, FIDSA  
Brown University/Rhode Island Hospital  
Providence, RI

Henry F. Chambers, MD, FIDSA  
University of California, San Francisco  
San Francisco, CA

Thomas Fekete, MD, FIDSA  
Temple University Medical School  
Philadelphia, PA

Lawrence P. Martinelli, MD, FIDSA  
Covenant Health  
Lubbock, TX

Daniel P. McQuillen, MD, FIDSA  
Lahey Hospital and & Medical Center  
Burlington, MA

Thomas A. Moore, MD, FIDSA  
IDC of Kansas  
Wichita, KS

Trish M. Perl, MD, MSc, FIDSA  
UT Southwestern Medical Center  
Dallas, TX

Joel E. Gallant, MD, MPH, FIDSA  
Southwest CARE Center  
Santa Fe, NM

Christopher D. Busky, CAE  
Chief Executive Officer  
IDSA Foundation  
Arlington, VA

IDSA Foundation Staff

Simintha Esson  
Chief Development Officer  
IDSA Foundation  
Arlington, VA

Albert Bond  
Development Manager  
IDSA Foundation  
Arlington, VA
THANK YOU
Your support enables us to impact lives.