

SUNDAE SCHOOL: Several times each summer, DHMC sponsors ice-cream socials that are open to all employees. Even better than the ice cream (with all the fixings) is the fact that it's scooped up by the institution's senior leaders.



abate the hazard, noted Leifer. “Frankly,” explained Sargent, “the reason I became interested in lead poisoning is because it wasn’t a problem that I could solve in the office. I was frustrated by it. These kids would get lead poisoning, I’d send them back out to the house, they’d get poisoned again. I knew that there had to be a bigger solution

to this. I wanted to make a difference in a bigger way than I could in the office.”

Linked: “The big picture,” he added, “is that lead poisoning is a public-health problem . . . and it is inextricably linked with corporate behavior, the legal system, and the political system. . . . Neil’s taught me that.”

JENNIFER DURGIN

Novello keynotes Women in Medicine conference

To those who live with glass ceilings, let’s start teaching them how to throw stones!” challenged Dr. Antonia Novello, former U.S. surgeon general and the keynote speaker at Dartmouth Women in Medicine, a conference held this spring.

Women have come a long

way since Elizabeth Blackwell became the first female physician in the U.S. in 1849 (and since her sister Emily was rejected by DMS, in 1852, on the basis of her gender).

But still more needs to be done before women achieve true equality with their male colleagues, Novello insisted. “We must demand that women be encouraged by schools, propelled into academic excellence by universities, recognized by their male counterparts, and appointed to positions of distinction—on their merit—equal to those of men.” Novello, the first woman and first Hispanic surgeon general, is currently health commissioner of New York State.

Passion: Inspired by Novello’s passionate talk, the nearly 150 attendees, mostly women, went on to participate in sessions on such topics as career strategies, leadership skills, burnout, mentoring, and personal/professional balance. Among the 25 presenters at the day-and-a-half-long conference were a career development coach, a medical historian, DMS faculty members and alumni, spouses of female physicians, and even a current DMS student.

Career development and executive coach Janet Bickel, a former executive at the Association of American Medical Colleges, counseled participants on ways to recognize and develop leadership skills and to achieve success in their careers.

But attendees were also cautioned to avoid letting their jobs

Former combat pilot is still in the hunt for excitement and challenge

“I’m kind of into the danger and excitement sorts of fields,” says Dr. Elizabeth Weber, chief resident in orthopaedics at DHMC. One could also add “male-dominated” and “fiercely competitive” to her list of adjectives. Before medical school, Weber spent six years in the Air Force, three of them as a combat pilot. And as of June, she’ll be only the third woman to complete DHMC’s orthopaedics residency.

Exciting: “You may have some ideas about what you want to do, both in medicine and in the military, when you start,” Weber explains, “but if you tend to be a competitive person—which I am—then you very quickly figure out what’s the most prestigious and exciting thing to do.” Weber was the only woman in her pilot training class of 60 and one of only about 20 who graduated. While in the Air Force, she flew all over the world, transporting generals and dignitaries on Lear jets and then, during the Gulf War, flying combat missions on KC-135s, which are used to refuel other planes in flight.

“I think the biggest problem with being a woman in the Air Force . . . was [when] we were based in Riyadh, Saudi Arabia,” during the Gulf War, says Weber. As commander of a combat plane, she was responsible for her craft and crew, but she couldn’t perform many of her duties because of Saudi attitudes toward women. “They wouldn’t give me gas because women can’t talk to men there,” Weber recalls. “It’s one thing not to respect a gender because that’s the way you

were brought up, but not to respect the rank of a military officer . . . it was very bothersome.”

She hasn’t encountered any such obstacles at DHMC. “My peers in this program are absolutely amazing,” she says. “They are well-spoken, articulate, smart, fun, funny . . . just a great group of guys. I haven’t felt any animosity about my gender.” She does admit that at times “it’s a little socially challenging.” But challenge is clearly what Weber thrives on. Come July, she’ll be starting a new challenge—a pediatric orthopaedics fellowship in Australia. J.D.



Weber, with a T-38 during her pilot training in the 1980s.