

A Tribute to Jack Rodnick

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Family medicine lost one of its most likeable, dedicated, and energetic leaders on January 26, 2008. Jonathan (Jack) Rodnick, MD, died suddenly while running on the beach in paradise—the island of Kauai. Born on the 4th of July, Jack was 65. His death came as a shock to all who knew him because he always seemed so alive.

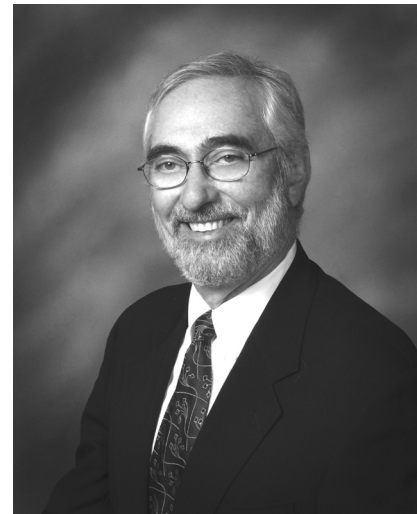
Jack graduated from medical school at the University of California, Los Angeles in 1968, did his internship at San Francisco General Hospital, and worked in rural Alaska before completing his family medicine residency at the University of Vermont. Later, Jack served as chair of the Department of Family and Community Medicine at the University of California, San Francisco (UCSF) for 14 years, building it from a small faculty to one of the top departments in the county.

Jack's early academic career began in Santa Rosa, Calif, where he taught in the family medicine residency program, serving as the tuberculosis medical officer for Sonoma County, working in community clinics. I will never forget going with Jack to a community clinic in Guerneville during my student rotation in 1974. Jack introduced me to what real community medicine was about. He introduced me to the "Common Health Club,"

a group of activated people taking charge of their own health, 1970s style. Naturally, the group sought out Jack as their medical advisor. I am blessed that I had a continuous friendship with Jack for 34 years. To a degree I will never fully comprehend, he molded me into the family physician and person that I am.

Jack was the 15th president of STFM (1987–1988), and promoting high-quality research in family medicine was his primary focus. His commitment and service to STFM never stopped, and right up to his death he edited the "International Family Medicine Education" column in *Family Medicine*. He was also the editor of a special issue of *Family Medicine*, published in 2007 as part of an international effort on global health that involved more than 235 medical journals around the world.

Jack's work in international health led STFM to select him as STFM's representative to the World Organization of Family Doctors (Wonca) in 2007, and his strong interest in family medicine in developing countries will be greatly missed. Working closely with the American Academy of Family Physicians (AAFP) on its international activities, he recently made a trip to Albania. In the 1980s, Jack helped Japan develop postgraduate programs in family medicine and did the same in China during the 1990s. This decade, his work extended to other countries in Asia and Africa.



Jack Rodnick, MD

Jack was an outstanding clinician and scholar. He loved to write important articles and dedicated himself to writing at least two every year. His article on HIV testing in the November 2007 *American Family Physician* is a great example.¹ His articles on international issues in family medicine gave us insights into the world. Jack was often ahead of the timely issues of the day, writing about computers and electronic health records in the 1980s and how to make managed care work for family medicine in the early 1990s. He would also write about the clinical articles that changed his practice. At the time of his death, Jack had just begun a term as the chair of the AAFP Commission on Science. And through all of this, he never stopped caring for patients.

Jack's personal life was every bit as rich as his professional one. A devoted husband and father, Jack's wife Judy would often light up a room with him. I will never forget Jack's 65th birthday party last July 4 in San Francisco at a hotel with a band, friends from all over, and hours of expressions of love and admiration.

Jack was a legendary outdoorsman, taking multiple hikes and backpack trips every year. For more than 30 years, Jack would lead a 7–8 day trip in the high Sierra Nevada with a group of old friends from Santa Rosa and professional colleagues. Every year was a new adventure, meticulously planned for many months. I had the pleasure of going on about 10 of these trips, and for me and my sons, they are a highlight of our lives.

There is a lesson in Jack's death for all of us in medicine. Knowing Jack as a consummate teacher, I believe he would want me to share this. Jack had a congenital bicuspid aortic valve. Over the years, he developed aortic stenosis, and his valve was being closely monitored. There was a growing recommendation that Jack have his aortic valve replaced, and restrictions were being put on him, such as the altitude at which he should backpack. Jack put off having the surgery. Jack's wife related to Roger Sherwood that he did not want to go on warfarin (Coumadin) for the rest of his life, fearing the risk of bleeding. Unfortunately, aortic stenosis is notorious for causing sudden death during exercise, and patients should be urged to have valve replacement surgery when the time is right. Most likely,

Jack's aortic valve caused his untimely death.

Jack, maybe this is the way you wanted it—a sudden and painless end while running in paradise. We all miss you enormously, and for so many of your friends and colleagues, our lives have a vacancy without your friendship, your leadership, and your warmth and support. You are the greatest role model in so many ways and one of the nicest people we will ever know.

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REFERENCE

1. Rodnick JE. The CDC and USPSTF recommendations for HIV testing. *Am Fam Physician* 2007;76:1456, 1459.