Greetings from the Program Director

Dear Colleagues,

I have been reminded on multiple occasions, more than I care to admit, that I needed to write something for our newsletter. To say I’ve put it off is an understatement. In fact, I was so convinced I had written (and submitted) something, I spent time, also more than I care to admit, looking for the article. Which of course I couldn’t find. My avoidance is not because there is nothing to share or I have nothing to say –I’m sure my coworkers can attest to that. But rather I dreaded trying to distill it down to the space allotted. I’ll do my best to share the highlights and keep the commentary minimal.

There is a theme to the updates i.e. growth. Thanks to continued commitment from the School of Medicine and Public Health, the Department of Pediatrics, the Waisman Center and the MCHLEND program, the MGCS has continued to grow in class size, in available leadership, and in opportunities offered.

Updates

• We are up to eight students for a total of 16. It may not sound like a lot but, as with children, the difference is exponential not just additive. The excitement and energy is palpable!

• Not only has our class size increased, but so have the number of genetic counselors and therefore supervisors and possible rotation sites. We are lucky to include the Marshfield Clinic as an away site for GC II in the incoming class. Thank you to Anna Cisler MS CGC (University of MI-Ann Arbor, Class of 2010), for helping us with this endeavor.

• Our leadership team now includes not only myself, but also an assistant director (Laura Birkeland MS CGC; Class of 2007), our medical director, Liz Petty, MD, a clinical education coordinator (Ashley Kuhl MS CGC; Class of 2013) and a research coordinator (April Hall PhD MS CGC, IUPUI; Class of 2013). Talk about energy!

Continued on page 2
Welcome to UW-Madison

This fall, 2019, we welcome eight new genetic counseling students: Sarah Choi, Carly Eichten, Paige Erickson, Keith Franke, Jennifer Meyer, Rachael Shilbauer, Katie Tobik, and Zarif Zaman. All come with a wide array of experiences and exposures that, we are sure, will set them up as fantastic GC students. An exciting change for this incoming class is that one student, Jennifer, will be our first student to complete the Marshfield Experience. This opportunity allows Jennifer to complete her first year of course and clinical work here in Madison, but starting the summer of her second year, she will live in Marshfield, Wi. Her clinical experiences will include working alongside the fantastic team of geneticists and genetic counselors with the Marshfield Clinic Health System and she will complete her coursework remotely.

This past year, two new genetic counselors joined UW Health. Peter Levonian has taken the reigns as the new Director of Genetic Counseling Services where he will help promote and advocate for genetic counselors. Alex Cummings has taken on the newly developed and much needed role of Lab Genetic Counselor within the UW Health lab. Both are fantastic additions to the team!

Lastly, we have reached the end of our self-study year and will soon submit our re-accreditation application to ACGC. That process, as always, has been a growth experience. The year included hundreds of hours of work, countless discussions with stakeholders, dozens of written reports and tables completed. This effort included our leadership team and many others who deserve a public thank you:

- Jessica Tarnowski and Sara Heineman for their help assessing student and alumni satisfaction
- Christina Zaleski for getting the perspective of our incredibly valued clinical supervisors
- Kim Anderson for assessing the satisfaction of our amazing instructional staff
- Krista Redlinger Grosse for reviewing the breadth and depth of our clinical and counseling curriculum and Greg Rice for doing the same for our medical genetics and related content didactic curriculum
- April Hall and Liz Petty for assessing the relevance and rigor of the research curriculum

- Sherryl Pertzborn for guiding us through the strategic planning process which Monica Marvin attended to give an outside perspective
- And, last but not least, Laura Birkeland and Ashley Kuhl for their work with multiple committees and keeping me sane throughout.

For those of you who know what 5th Wednesday is, there is one on July 31st. That means Terrace Time for sure!!!

Take care…..and enjoy!

—Casey
Prospective genetic counseling students have a lot to accomplish before they even begin to apply to graduate school. In addition to the “easy” things (e.g. earning stellar grades and learning about the profession), it is virtually necessary that applicants have experience with advocacy work. Yet, what does advocacy look like? A few of our current 2nd year students share with us their experiences and how it helped each one not only be a competitive applicant but ultimately a better genetic counselor.

Madi Hankins:
Prior to coming to UW Madison, I volunteered as an in-person crisis counselor for the Trauma Intervention Program (TIP) in San Diego, CA. The mission of TIP was to offer care and support to families actively undergoing emotional trauma or loss. This was one of the most rewarding, and also challenging, experiences I’ve had. I am so thankful for the ways in which it prepared me to be a genetic counselor. Because a family’s trauma had often occurred no more than an hour prior, I frequently had very little, and at times incorrect, information on the situation in which I was involved. Having to walk into an emergency scene, quickly assess the situation and the client’s emotional state or needs, and then taking tangible steps to assist them required very methodical action, but at the same immense flexibility. I have found both of these skills to be incredibly helpful as I’ve waded into the world of genetic counseling when I balance seeing patients with diverse and unique needs, yet within the context of appointment timeframes and conveying vital information. Unfortunately, sometimes on TIP calls there was not much I could do for families except to listen to them talk about their loved one. TIP taught me that the one thing I can always offer is presence, and that empathetic and supportive presence is powerful. This is probably my favorite takeaway from my experience, and one that I will certainly take with me through my life and particularly in my genetic counseling practice.

Tina Bouril:
Before applying for graduate programs, I volunteered as a helpline counselor at the Dane County Rape Crisis Center here in Madison, WI. Working overnight shifts with a partner 2-3 times a month, I answered calls from survivors of sexual violence as well as friends or family members of survivors. Depending on the caller, sometimes it was important to provide immediate crisis counseling and talk through tough emotions before making a plan of next steps. Other times, my role was primarily as a resource and information provider. One of the most important skills I gained from my volunteer experience was the ability to provide support to survivors while emphasizing the control they had over how they wanted to proceed in their healing process. Similarly, genetic counselors often provide information and psychosocial support to patients in a non-directive manner in order to facilitate autonomous and informed decision-making. I know that the valuable counseling skills I learned through my volunteer experience will serve me well as a practicing genetic counselor in a clinical setting.

Karina Kidd:
Among the many requirements for genetic counseling applicants is experience with advocacy. Advocacy can give an applicant exposure to working with different types of people and a taste of what it’s like to deal with people in crisis situations. I began my own advocacy journey long before I knew what genetic counseling was. In high school, I volunteered with Special Olympics and several outreach groups that worked with kids with special needs. I accompanied differently abled youth on community activities and weekend camping experiences in the summer. These experiences gave me an appreciation for the day-to-day life of these families. It also gave me exposure to rare genetic disorders like Fanconi anemia and Angelman syndrome that I otherwise would not have heard of. Years later, as I started to contemplate a career change, I was drawn to the role genetic counselors can have in the lives of families similar to the families I knew. At this point, I decided to refresh my application with some new advocacy experiences to supplement what I’d already done. I was interested in gaining a new perspective into an aspect of healthcare I didn’t know much about namely hospice care. After a year in the genetic counseling training program, I now see that the mission of hospice very closely mirrors many of the tenants of genetic counseling – patient resiliency, patient autonomy and dignity, and family-centered care. I continue to volunteer with hospice in my free time, providing companionship to patients who have accepted palliative care. I can see how my advocacy not only prepared me well for the genetic counseling training program, but also continues to shape me into a genetic counselor who is able to sit with people who face difficult decisions and situations.
Virtual Health Experiences by Abi Freeman (2020)

As part of the alternative service delivery rotation in my first year, I had the opportunity to educate high school students about the genetic counseling profession. This was a virtual experience where the lectures were delivered in real time via virtual health technology to students in Kentucky! Together with Kate Stuewe, MS, CGC, I gave a whirlwind tour of genetic counseling: where we might work and what we do in each branch of genetic counseling, giving examples of genetic cases from popular media and more. I described the prerequisites for attending grad school and the importance of advocacy. I offered some conversational back-story about my and my classmate’s journeys to genetic counseling. Then came the fun part! We played “guess the disease”, “real-life case stories” and “pedigree mysteries” in order to engage the students in the excitement of genetic counseling. I was so grateful for the chance to push beyond my comfort zone and gain quality experience in education and outreach with supervision and support from an experienced counselor! Thanks, Kate!

Outstanding Supervisor Award

Each year, the Association of Genetic Counseling Program Directors (AGCPD) presents the Outstanding Supervisor Award to one supervisor per program to recognize the invaluable contributions clinical supervisors make to genetic counseling student training. Graduating students from each program submit award nominations to their program directors, including a statement to support their nomination and evaluate to what extent the supervisor has demonstrated published genetic counseling supervision competencies. Each program then selects one award winner, and awardees are recognized at the National Society of Genetic Counselors’ annual meeting and on the AGCPD’s website. We are lucky to have a fantastic group of clinical supervisors at UW-Madison who are valued and appreciated; the nomination process was no easy feat. We are pleased to announce the winners for both 2018 and 2019.

Christie Turcott – 2018 recipient

A consistent theme among students was that Christie Turcott’s “enthusiasm for genetic counseling, as well as supervising students, created...an uplifting and positive atmosphere.” She was noted as having a strong ability to establish a supervisory relationship through which students are both supported and challenged. She provides constructive feedback that promotes student growth, excellent learning opportunities while maintaining high quality patient care, and ultimately she serves as excellent example of what a genetic counselor should be. As noted by one student, “Christie is amazing to watch with patients, and every day I hope I can emulate the positivity and compassion she brings to each interaction with patients and peers.”

Ashley Kuhl – 2019 recipient

Students spoke of Ashley Kuhl’s supportive and holistic approach to supervising. She is interested in not just what a student is doing in a clinical rotation, but rather how they are doing overall. She embraces a student-centered approach that is positive, motivational, and yet challenges students to explore and develop their own style of counseling. With her one-on-one mentorship style, she provides valuable support to students as they navigate their way through graduate school in areas such as time management, developing a professional style, as well as tackling challenging cases to hone psychosocial skills and exploring ethical issues of genetic counseling. As one student said, “I wish I could nominate Ashley three times, because I think she’s THAT wonderful of a supervisor!”
• **CJ Christian.** Advisor: Laura Buyan Dent, MD, PhD. Incorporating a history of incarceration into Huntington’s disease referrals for genetic counseling

• **Kayla Kolbert.** Advisor: Christine Seroogy, MD. Newborn screening for severe combined immunodeficiency in Wisconsin: results and considerations of the last 10 years

• **Allysa Olson.** Advisors: Elizabeth Petty, MD & Catherine Reiser, MS, CGC. To tell or not to tell: current practices in the use of forward-feeding evaluations as part of the remediation process for genetic counseling students in the areas of academic, clinical and professional development

• **Marlena Orthlieb.** Advisors: Corinne Engelman, PhD, MSPH, Yuetiva Robles, PhD, & April Hall, PhD, MS, CGC. Polygenic risk scores and biomarkers in Alzheimer’s disease

• **Porter Pavalko.** Advisors: Karl Rosengren, PhD & Catherine Reiser, MS, CGC. “For better or for worse?” Disclosure of genetic information within relationships

• **Cory Smid.** Advisors: Richard Pauli, MD, PhD & Peggy Modaff, MS, CGC. Persisting but apparently benign features suggestive of cervical myelopathy in Achondroplasia: Neurologic “leftovers”
JANET WILLIAMS

What have you been doing for the last few years?
About 7 years ago, I moved into a different career path at Geisinger. The move resulted in the acquisition of new research skills with a steep learning curve including putting together a R01 formal research proposal within the first two months, before I had access to my own computer. The research opportunities only blossomed offering the chance to further develop qualitative interviewing and survey development skills. As Geisinger implemented exome sequencing for their biobank participants with return of clinically actionable results, we have been able to evaluate many steps in that process. In addition, I have had the chance to be very involved in the electronic Medical Records and Genomics (eMERGE) a national research consortium, conducting multi-site research into implementation of Genomic Medicine. Most recently, as of the end of 2018, I stepped down from administrative and personnel responsibilities to work on the eMERGE related projects at 25% FTE. Happy (mostly) retirement!!

What was a favorite class and why?
That was 40 years ago, you must be kidding! However, my least favorite was Dr. Deniston’s Population Genetics. Dr. Deniston was a super person, but the class was super hard.

Which UW or UW-Affiliated Clinical Supervisor, Provider or Professor was influential to your success as a GC and why?
There is no doubt that Joan Burns and Dr. Laxova were most influential in my career. Joan and Renata coaxed and guided as much excellence as we could all possibly squeeze out of ourselves. They inspired unrelenting commitment to families grappling with inherited conditions, emphasizing compassion, diligence and respect. I will forever be grateful to Joan Burns for seeing my letter and inviting me to participate in the program. Renata took a small-town WI girl, tried to instill proper scientific writing and got me through my thesis demonstrating that compassion and respect mentioned earlier. I supplied the diligence as best I could.

What is something you have achieved or created in your career for which you are proud?
I am very proud of the work done with patient partners in developing reports to return results of whole genome sequencing. Our patient partners informed the development of an online informational report that returned sequencing results as well as secondary findings related to the initial ACMG list. Patients helped us to design reports that included clear concise language, addressed the sequence findings with definitions, included prognostic information and next steps relative to the results and had links to patient information/support groups.

What advice do you have for the next graduating class?
Listen, really listen to your patients. They will constantly amaze you with their insights. Invite patients to contribute in all improvement projects and to be active partners in research efforts. These efforts will be enhanced with their involvement.

What is a favorite memory from your time with the UW-Madison GC Program?
We had great relationships within our cohort and the students before and after us. There was one cohort before mine and so adding the cohort after, we were the “guinea pigs” of the WI program. My colleagues helped me to maintain my sanity and focus in a personally tumultuous time as I precipitously got married after the first year. My classmates were in our wedding. My husband and I moved to Eagle Heights; I learned to drive a stick shift; and the energy crisis hit, which kept all University buildings at 55 degrees all winter. There was renewed interest in long underwear!

Class of 1979
Spotlight on Alumni

We love hearing from all of our graduates, but we like to put a spotlight on grads from years past to see what they are doing now with their degree in medical genetics.
much that is still foundational to my counseling in sessions, I learned so attending case conferences, or actively sessions through the one-way glass, disabilities. Whether observing regarding physical and developmental many rich training experiences The Waisman Center provided so Program?
your time with the UW-Madison GC What is a favorite memory from your time with the UW-Madison GC Program? The Waisman Center provided so many rich training experiences regarding physical and developmental disabilities. Whether observing sessions through the one-way glass, attending case conferences, or actively counseling in sessions, I learned so much that is still foundational to my teaching and patient care activities. The week-long summer “road trip” through northwestern Wisconsin with Dr. Laxova and team (who can forget the Bolo Inn in Menomonie?) was a unique experience in providing rural outreach genetics services that is still incredibly relevant for those of us who serve families in the mostly rural, western U.S. What was a favorite class and why? My favorite courses were Clinical Genetics with Dr. Renata Laxova and Clinical Cytogenetics with Dr. Gurbax Sekhon. Both were excellent teachers who very skilled in connecting the dots between the science and actual patients. Little did I know that Dr. Sekhon’s course would be so helpful in my first genetic counseling job after graduation, where I was regularly enlisted to help our busy, but understaffed, cytogenetics lab cut (yes, with actual scissors) and assemble large piles of karyotypes. Even today, I continue to see patients in a general pediatric genetics setting serving patients with copy number variants or other rare syndromes that I first learned about in these courses. Which UW or UW-Affiliated Clinical Supervisor, Provider or Professor was influential to your success as a GC and why? I had the privilege of working with so many excellent genetic counselors and clinical geneticists, so I really can’t just choose one. Joan Burns’ heartfelt commitment to training excellent genetic counselors was evident every day. Dr. Laxova had a gift for talking to families about difficult diagnoses. I still love seeing patients with skeletal dysplasias because of Dr. Pauli, and my work-study job as his “library gopher” enabled me to read tons of cutting-edge articles. Don Hadley was masterful in his psychotherapeutic approach with clients and really pushed me to develop greater self-awareness and confidence in this area. Casey Reiser (WiSSP), Christina Palmer (Down syndrome), Paula Feldman (Teratology), Susan Kirkpatrick (Craniofacial), and Lisa Glinski ( Neuromuscular) were so generous in sharing their expertise with students in their respective specialty clinics. What is something you have achieved or created in your career for which you are proud? I’m proud to have contributed to the training of about 200 genetic counseling students since coming to Colorado in 1991. I’ve also had the opportunity to serve in leadership roles for national organizations, including ABGC and AGCPD, and to be involved in various regional and state-level projects over the years. I’m equally proud to still love what brought me to genetic counseling in the first place – helping patients and their families in clinic. What advice do you have for the next graduating class? Become involved with activities that speak to you outside of your “core” job responsibilities. Early in my career, I joined committees through our regional genetics networks, Great Plains and later Mountain States. I met colleagues and consumers from other states and learned so much about healthcare policy, education, and other important “bigger picture” issues. This led to my involvement in other state and national level initiatives. In graduate school, I never pictured myself chairing national committees, speaking to hundreds of genetic counselors at a conference, or serving on advisory boards, but these activities have been some of the highlights of my career. Perhaps best of all, I have made some wonderful friends from around the country who are mentors and a support network. Other comments? For someone who had lived between the extremes of rural Wyoming and the New York City suburbs, Madison was a lovely place to live and study. It afforded a great balance of academics, culture and access to nature. Although I love our mountains and much milder winters in Denver, I have fond memories of summer evenings on the Terrace enjoying beer and pretzels with classmates.

Continued on page 8
CHRISTOPHER HO
What have you been doing for the last few years?
I have just passed 19 years working at Myriad Genetics. Currently I lead our Managed Markets Team working with private and public health insurance organizations ensuring patient access to Myriad’s portfolio of products.
What is a favorite memory from your time with the UW-Madison GC Program?
My favorite memory is also the thing I miss most. Our class of four would gather for “study” sessions on the Terrace, especially in the warmer months. Those sessions were integral in getting all of us through classes.
What was a favorite class and why?
Obviously, cancer genetics must have made an impact on me, since I remain in that area 20 years post-graduation.
Which UW or UW-Affiliated Clinical Supervisor, Provider or Professor was influential to your success as a GC and why?
I have positive memories of everyone on staff at the time, so it’s difficult to single out just one staff member. I’ll point to Joan who did such an amazing job establishing a culture within the program. You always felt as if you were part of a family with everyone vested in your success and well-being.
What is something you have achieved or created in your career for which you are proud?
I have had the privilege to lead teams with a number of people reporting to me over the years. I’m most proud of seeing those people grow in their professional careers and achieve some of their career goals. As someone who leads people, seeing them succeed is the greatest achievement.
What advice do you have for the next graduating class?
We have such a dynamic, evolving field. It is an exciting time to be entering the field of genetic counseling. I encourage new graduates to not be bound by titles, or specific roles. Try to think more expansively. What are the things that you are passionate about and how can you define a job or a role that allows you to do things you love to do more often.
CECELIA COMPTON
What have you been doing for the last few years?
I have been living in beautiful Southeast London, a park away from the prime meridian. In February, I will have been working for the National Health System for 10 years. For the last 6 years, I have been a Clinical Genetic Counsellor at The Southeast Thames Regional Genetic Centre. Recently I was promoted to Principal Genetic Counsellor in Cancer Genetics. On a personal level, we are expecting our first little one in October.
What is a favorite memory from your time with the UW-Madison GC Program?
Sitting in Casey’s rocking chair. It felt so safe and I always knew I had chosen the right program. Oh, and drinks with my classmates on the Union Terrace.
What was a favorite class and why?
Dr. Pauli’s Medical Genetics class. I have never learned and wanted to learn so much. I use what I learned in that class almost daily.
Which UW or UW-Affiliated Clinical Supervisor, Provider or Professor was influential to your success as a GC and why?
Tie between Dr. Pauli and Casey. Dr. Pauli for what I learned from him and Casey for the support she gave us all.
What is something you have achieved or created in your career for which you are proud?
Having certification in the UK and USA and getting a principal genetic counsellor post in a world-renowned teaching hospital.
What advice do you have for the next graduating class?
Stay calm. It is a difficult, but rewarding two years.
Alumni Updates

Please consider sharing professional and personal updates by emailing Laura Birkeland at lebirkeland@pediatrics.wisc.edu

Casey Reiser (1980) has been promoted to full professor (CHS), an accomplishment that is admirable to say the least. Congrats on this wonderful achievement.

Connie Schultz (1994) & Megan Nelson (2010) presented the talk at the 2018 AEC called “Experience with exome-based panel testing for disease with prenatal or neonatal onset”

Kelly Moyer (1996) accepted a new job at University of Texas-Austin, as Director of Genetic Counseling Services at their new Dell Medical School. As she said, “this position will allow me to grow their GC services and staff, and is a faculty position which will give me the support to teach medical students, residents, and fellows. I’ve been teaching students (including GC students) for over 20 years, but this is the first time I was able to obtain faculty status, which I think is an important benefit for GCs who often spend hours each week teaching students, physicians, nurses, etc. about clinical genetics. Faculty positions often offer better pay, benefits, professional development support, and other perks. I am hopeful that more GC positions will include this aspect in the future.”

Stefanie Dugan (1999) and Katie Bergstrom were the only two genetic counselors at the 2019 ASPHO (American Society of Pediatric Hematology/Oncology) Conference in New Orleans, LA this past spring. They co-presented a talk entitled, “Navigating Genetic Testing in the Pediatric Hematology Setting.” Stef also was recently promoted to the Manager of Hematology Genetics with Versiti Diagnostic Laboratories.


Jacquelyn Riley (2001), McKinsey Goodenberger (2008) & Sara Clowes Candadai (2016) were all on the panel for the session at the 2018 AEC called “Professional growth and development for laboratory genetic counselors” which was moderated by Jordan (Elliott) Bontrager (2016)

Beth Wood Denne (2000) has spent the last seven amazing years as the Director of Genetic Counseling Services with Counsyl (now Myriad Women’s Health), but is now starting a new professional chapter in her life as Program Lead of Genetic Counseling & Education with Geisinger National Precision Health.

Amy Roberson (2003) is now working at Mayo Medical Labs, focused on hereditary cancer and somatic oncology assays.

Sara Fisher (2004) took on the role of the Assistant Program Director for the Genetic Counseling Program at University of Nebraska Medical Center. She was quoted in the UNMC newsletter as saying “With this new position, I have the amazing opportunity to work with the UNMC genetic counseling program, which is a partnership between the College of Allied Health Professions and the Munroe-Meyer Institute… I will continue my work with my MMI genetic medicine colleagues in providing extraordinary patient care but will also join the Allied Health faculty as an educator for future genetic counseling colleagues.” What an exciting time for Sara and her group.


We have several graduates working with the Accreditation Council for Genetic Counseling (ACGC). Janet Williams (1979) is the current president, Quinn Stein (2000) and Beth Conover (1985) are both on the nominating committee, with Quinn as the chair. Laura Birkeland (2007) and Dr. Richard Pauli are site visitors and Ashley (Klein) Kuhl (2013) is on the Program Review Committee. Thanks to all for their time and passion for our profession.

The class of 2015 had a reunion to reconnect and show off some homegrown babies! Brianna Nelson, Meghan (Grow) Cavanaugh, Laura (Otto) Rust, Shelby (Sieren) Romoser & Aime Agather
Alumni Posters at AEC 2018

• Jacquelyn Riley (2001): Chromosome 3p inverted duplication with terminal deletion: Second postnatal report with additional clinical features
• Kim Anderson (2009): Implementing Next Generation Sequencing in post mortem cases of sudden cardiac death: A Public Health Laboratory Perspective
• Megan Nelson (2010): Keeping an eye on utilization management: cost reduction of inherited retinal dystrophy genetic testing through the incorporation of CNV detection via Next Generation Sequencing
• Camille Fisher (2017): Do labels matter? Alternative options labeling impacts decision making in non-invasive prenatal screening
• Jonica Richards (2018): Exploring empathy in genetic counseling students
• Sharon Luu (2018): A survey of eating attitudes and behaviors in adolescents and adults with phenylalanine hydroxylase deficiency
• Jessica Tarnowski (2018): Primary care physicians’ perspectives on positive newborn screens for cystic fibrosis: A statewide survey
• Ellen Johnson (2018): Genetic counselors’ perspectives on expanded carrier screening use in assisted reproductive technologies
• Eden Faye (2018): Overlapping phenotypes of spondylometaphyseal dysplasia-Kozlowski type and Charcot-Marie-Tooth disease type 2C secondary to a TRPV4 pathogenic variant
• Amy Donahue (2018): Exploring genetic counseling information needs and information seeking behaviors

Alumni Publications


Your gift to the Genetic Counseling Masters Program Award Fund will help us fulfill our mission of training competent and compassionate genetic counselors who will be lifelong learners and leaders in the field.

This fund was created to support the genetic counseling master’s program. It will provide tuition assistance that will allow students to choose the University of Wisconsin-Madison for their graduate training in genetic counseling.

Genetic counselors help individuals and families sort through critical health issues. In a rapidly expanding field, they play an increasing role in research and public health. The University of Wisconsin-Madison Genetic Counseling Master’s Program is committed to preparing genetic counselors who will help families and help shape the future of genomic medicine.

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