

IN THE HIGH COURT OF NEW ZEALAND
WELLINGTON REGISTRY

CIV-2015-485-235

UNDER The Declaratory Judgments Act 1908 and the
New Zealand Bill of Rights Act 1990

BETWEEN LECRETIA SEALES
Plaintiff

AND ATTORNEY-GENERAL
Defendant

AFFIDAVIT OF KATHERINE TERESA MORRIS
AFFIRMED 19 APRIL 2015

Kelly Latham



Kelly Latham

[Signature]

RUSSELL McVEAGH

A S Butler | C J Curran | C M Marks
Phone +64 4 499 9555
Fax +64 4 499 9556
PO Box 10-214
DX SX11189
Wellington

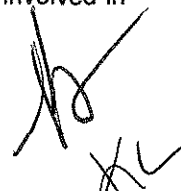
I, **KATHERINE TERESA MORRIS**, surgical oncologist, of Albuquerque, New Mexico, United States of America, affirm:

Introduction

1. I am a surgical oncologist, residing in Albuquerque New Mexico, United States of America. I am also an assistant professor at the University of New Mexico, where I undertake cancer research, treat patients, and engage in teaching medical students and surgical residents.
2. I have been asked to give evidence concerning my experience in dealing with patients' requests under Oregon's Death with Dignity Act 1997 ("DWDA").
3. My professional background includes the following: I am a surgical oncologist who completed training in 2005 after a two year fellowship in surgical oncology at Memorial Sloan Kettering Cancer Center in New York. Prior to that fellowship, I was surgery resident at Oregon Health and Sciences University from 1996-2003. I am currently a Board Certified surgeon who practices in New Mexico. Between 2005 and 2010 I practiced surgical oncology in Oregon. I attach a full copy of my CV as exhibit "KM01".
4. I have reviewed the New Zealand High Court's Code of Conduct for Expert Witnesses and agree to comply with it.
5. I was a plaintiff in *Morris v Brandenburg*. In that case the plaintiffs asked the Court to declare that physicians who provide a prescription for lethal medication to a mentally competent, terminally ill patient, would not be acting illegally.
6. In this affidavit, I address the following questions:
 - (a) my experience prescribing medication under the DWDA;
 - (b) my view of the interaction between palliative care and aid in dying; and
 - (c) my reasons for writing prescriptions for medication under the DWDA.

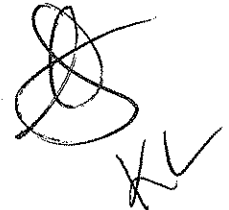
My experience prescribing medication under the DWDA

7. I practised in Oregon between October 2005 through October 2010 prior to moving to New Mexico. During my time in Oregon, I treated hundreds of patients with terminal conditions. I prescribed drugs under the DWDA for two patients. I was the consulting physician in a further two cases. I have had many other discussions with patients about aid in dying that did not lead to a prescription. I believe that is normal. Many patients want to discuss the option, but only a small subset wish to receive a prescription.
8. I was a medical student in Oregon when the DWDA was first introduced. As a surgical oncologist rather than a palliative specialist, or medical oncologist, I had not expected to be particularly involved in



DWDA considerations, except in respect of questions about prognoses. When I was first confronted with that issue by a patient that I had been treating for over a year, I had to do some soul-searching. I spoke with family and friends, and concluded that she was my patient and she wanted my help in prescribing aid in dying, just as she had wanted my help in the initial treatment of her cancer.

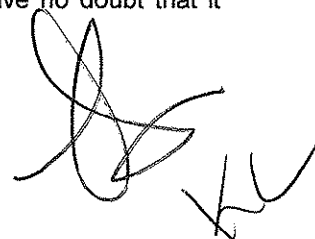
9. In a way, that process reflects what has been happening more generally in Oregon, and now in Washington, Montana and Vermont. A consensus has developed around what constitutes the proper standard of care in these cases, and the medical community has been able to absorb the changes into its ethics. Clinical Practice Guidelines have been developed.
10. Although the DWDA has a set of formal criteria that must be met before a prescription is granted, in my experience there is no "standard" process that patients go through when requesting aid in dying. While the regulatory and ethical standards are present and followed, the manner in which patients approach the subject of aid in dying is as individual as they are.
11. Likewise, the issue can come up at any stage of the treatment programme. However, the prescription cannot be written unless two doctors consider that the patient's life expectancy is six months or less.
12. Once a patient has expressed an interest in obtaining a prescription, the process that I followed was as below:
 - (a) I need to understand what is behind the request. I have a discussion with them about their options. I try to identify whether there are particular symptoms that we are not dealing with, and whether doing so would alleviate the patient's suffering.
 - (b) I talk to them about where the idea is coming from, what is important to them at this stage and what death means to them.
 - (c) I will ask my patients "if I could magically remove this horrible illness and diagnosis from you, would you want to live?" The purpose of this question is to determine whether they are seeking a peaceful way through their dying process, or whether they have some underlying depressive symptoms. Most physicians ask some variation on this question. The discussion on this aspect can be substantial. I would also seek input from other specialists as required.
13. I will also discuss the practicalities with them; the need to make two requests, one in writing and one orally, the need to get sign off from two physicians affirming the patient's terminal diagnosis. I should note that while two doctors are required to sign off the prescription, the decision will be based on input from the entire medical team, just as with other significant medical decisions.



14. When I am satisfied that the patient has completed all the necessary checks and balances, I will write a prescription which is sent directly to the pharmacist. After that, it is up to the patient whether to obtain the drug and whether to take it.
15. In Oregon, over one third of those who receive the prescription do not use it. When I wrote the two prescriptions, I did not know that they would be used. At the time of prescription even my patients were not sure that they would use them. I was very confident that they wanted the prescription, but I could not say whether they would use it. As I have noted, about one third of prescriptions are unused and I do not think that there is any way of knowing who will decide not to use a prescription.

The interaction between palliative care and aid in dying

16. I do not consider there to be a conflict between palliative care and aid in dying. In my view, one does not have to come at the expense of the other. Palliative care is vital and both of the patients I have written prescriptions for also had the benefit of high quality hospice and palliative care. I believe that my experience in this regard is typical. Approximately 90% of those who access aid in dying in Oregon are enrolled in a hospice, and Oregon's palliative care "rating" quickly improved after the law was enacted.
17. One of my patients was so afraid that she was going to end up in a hospital bed, with a catheter, lying there with her family around on death watch that she could not engage with palliative care. Once she knew that did not necessarily have to be the outcome for her she was far more receptive to the palliative care programme. Her palliative care specialists were then able to do an amazing job of keeping her symptoms managed, and she was comfortable in the knowledge that she had another option if she wanted it. I believe that the fact that she had a prescription extended her life span.
18. My other patient was initially reluctant to undergo surgery, because she was concerned about suffering, both during the recovery period, and if her cancer returned. She commented that she had enjoyed a good life and that quality of life was more important to her than quantity. I discussed that, at this time when we had first met, surgery could potentially provide a cure for her. She was highly educated and knew the data on her cancer and told me that she would consider surgery and get back to me with her decision. She decided to have the surgery but also told me at that time that if the cancer returned she would want to consider using the DWDA. I think it is possible, although I do not know, that the fact she knew she had the option of aid in dying if her symptoms became too much for her and there was no chance of cure meant that she was more willing to consider treatment options when the potential for cure was present for her.
19. Both patients told me that having the option was a great comfort, and my observation was that it reduced their anxiety. I remember that the first patient discussed above told me "it's such a relief to know that there's a door that I can open and go through". I believe that that comfort is of material benefit to patients, and I have no doubt that it helped the first patient I described.



Why I have prescribed medication under DWDA

- 20. As I have said, I concluded that it was right to consider patients' requests for prescriptions. My patient's autonomy is fundamental. If they want surgery, I will employ every tool at my disposal. I will willingly operate for 14 hours straight for a patient that wants that. But I have to treat every patient as they present and, for many, what is required is managing a terminal illness where treatment is no longer curative.
- 21. Our role is to help people to live as well as they can for as long as they believe life is worth living. For many, palliative care is a great option. For others, that quality of life is greatly improved by the option of having a prescription for lethal medication available in conjunction with good palliative care. It can give people reasons to live, prolong life and make those last months of life less frightening and distressing.
- 22. In both cases in which I wrote a prescription, my intention - once the statutory steps were satisfied - was to give my patients some control over their condition to alleviate significant distress for them and their families. I believe that one and possibly both lived longer because of the prescription. And they both lived with a better quality of life. It may seem paradoxical, but my experience is that having the drugs available helps patients find reasons to live and extract the most out of the time they have left.
- 23. Of course, at the point of prescription, I know that patients might take the drug that I have prescribed. Both my patients did. But, when I wrote the prescription, I did not know they would take the drugs. Nor did I intend that they would take the drugs. I wanted to improve their quality of life, and I believe that I did so. Whether the drug was taken was ultimately a decision for the patient to make, not for me.
- 24. What I can say is that when each of the two patients did decide to ingest the drugs and die, they died a good death surrounded by loved ones. Their free decision to take the drug, months after I prescribed it, seems to me to be worthy of respect.
- 25. That is why I was prepared to be one of the plaintiffs in *Morris v Brandenburg*. I believe that the option of aid in dying is extremely beneficial for the comparatively small class of patients for whom it is an option and who are interested in accessing that option.

AFFIRMED at Albuquerque, New Mexico,
United States this 14 day of April 2015
before me:



Katherine Teresa Morris


A person duly authorised to administer
oaths in New Mexico

CURRICULUM VITAE

April 28, 2015

KATHERINE T. MORRIS, MD, FACS

Business Address: The University of New Mexico Health Sciences Center
Division of Surgical Oncology MSC 07-4025
Department of Surgery
1201 Camino de Salud
Albuquerque, NM 87131-0001
Telephone: 505-925-0456
Fax: 505-925-0454
E-mail: ktmorris@salud.unm.edu

Specialty Board Certification

Diplomate--American Board of Surgery, (Number 49226), May 2004

National Boards

Diplomate--National Board of Medical Examiners, (Number 40442436), 1997

State Licensure

New Mexico MD2010-0780
Oregon MD 22058 (inactive)
New York 227964 (inactive)

Special Training

Intuitive Surgical DaVinci Robotics Training 2007
Teaching Effectively with Power Point, Office of Support for Effective Teaching sponsored course, University of New Mexico, 2/9/2011
PBL Tutor Training, University of New Mexico, October 9-10, 2012

Education:

1992-1996 Doctor of Medicine
Oregon Health & Sciences University School of Medicine,
Portland, OR
1988-1992 BS in Mathematics with Honors,
University of Washington, Seattle, WA

Fellowships:

07/2003-06/2005 **Surgical Oncology with Hepatobiliary and Pancreas Focus:** Memorial Sloan Kettering Cancer Center, New York, NY
07/1999-06/2001 **Research Fellow:** Oregon Health and Sciences University, Department of Surgery, Section of Surgical Oncology

This is the annexure marked "KM01" referred to in the affidavit of Katherine Teresa Morris affirmed at Albuquerque, New Mexico, United States of America this 19 day of April 2015 before me



Signature *Kelly Latham*
A person duly authorised to administer oaths by the law of New Mexico, United States of America

Internship/Residency:

- 07/2002-06/2003 **Chief Resident, General Surgery:** Oregon Health and Sciences University, Portland OR
- 06/1996-06/2003 **Resident, General Surgery:** Oregon Health and Sciences University, Portland OR

Employment History:

- 12/2010- Assistant Professor, Division of Surgical Oncology, Department of Surgery, The University of New Mexico, Albuquerque, NM
- 3/2007 - 10/2010 Legacy Health System – Medical Director of Hepatobiliary Program
- 10/2005 - 10/2010 Legacy Health System - Medical Director of Cancer Research
- 01/2007 - 10/2010 NW Surgical Oncology, PC – Surgical Oncologist
- 10/2005 – 12/2006 Oregon Surgical Consultants – Surgical Oncologist

Professional Honors and Awards:

- 2014 Elected to Alpha Omega Alpha
- 2012 Gold Humanism Honor Society Induction
- 2012 Erwin W. Lewis Khatali Award for Clinical Teaching
- 2011-2014 University of New Mexico Teaching Award from Residents and Medical Students
- 2009 Portland Business Journal Forty Under Forty
- 2009 Portland Monthly Magazine Top Doctors, Surgical Oncology
- 2001 American Association for Endocrine Surgeons Best Basic Science Paper Resident Award, Atlanta, Georgia
- 2001 Pacific Coast Surgical Society Resident Paper Award
- 2000 Martin Howard Resident Paper Award, Legacy Health Systems, Portland, Oregon
- 2000 Oregon Health Sciences University Alumni Association Resident Paper Award
- 2000 American Radium Society Young Oncologist Travel Grant
- 1999- 2001 Baker-Moseley Award in Surgical Oncology - American College of Surgeons - Oregon Chapter
- 1996 William W. Krippaehne Student of Surgery Award Oregon Health Sciences University
- 1993 Tartar Trust Research Grant, Oregon Health Sciences University
- 1988-1992 University of Washington Presidential Scholarship with full tuition
- 1989 Howard Hughes Research Fellowship, University of Washington
- 1988-1992 Dean's List, University of Washington



Professional Memberships and Activities:

National Societies

Alpha Omega Alpha
American College of Surgeons
American Association for Cancer Research
American Hepato-Pancreato-Biliary Association
Society of Surgical Oncology
American Society of Clinical Oncology
Association for Academic Surgery

Regional Societies

North Pacific Surgical Association
Portland Surgical Society
Western Surgical Society

Ad Hoc Reviewer

Journal of Cancer Research & Therapy
Journal of Surgical Oncology
Annals of Internal Medicine
HPB: Official Journal of the Americas Hepato-Pancreato-Biliary Association

Sessions Moderated:

June 17, 2010 **Moderator:** Cancer Session, Washington/Oregon Chapter for the American College of Surgeons, Sun River, OR

June 19, 2010 **Program Co-Chair:** Breast Ultrasound Course for Surgeons at the Washington/Oregon Chapter for the American College of Surgeons, Sun River, OR

Spring 2007-10 **Member:** Organizing Committee for Legacy Health System Annual Controversies in GI Oncology Course, Portland OR

Community Service

2010 -2007 Volunteer specialty physician Project Access, Multnomah County, OR

9/20/2010 Jefferson Public Radio Interview on the t.r.e.v.a. project (Statewide Tumor Banking initiative), Jefferson County, OR

4/5/2010 Organizing committee and contributor for Cancer Patient and Provider Art Show, Legacy Good Samaritan Hospital, Portland, OR

11/2009 KEX live radio interview on New USPTF Breast Cancer Screening Guidelines

Present-2009 Board Member t.r.e.v.a. Project for Treva Hoffman Foundation

3/10/2009 Fox Portland Affiliate "On the Go with Joe" 5 sequential live segments promoting colon cancer screening in the Super Colon

2/28/2009 Susan G. Komen for the Cure Breast Cancers Issues Conference "Tumor Banking: The Role of Tumor Banking in 21st Century Cancer Research"

9/2008 KATU Portland ABC Affiliate live segment Cancer Research



- 7/11/2008 Invited Column on Cancer Research for Portland Business Journal
- 3/6/2008 KATU Portland ABC Affiliate live segment Pancreatic Cancer
- 3/2006-08 Community Education on Latest Advances in Colorectal Cancer Treatment
Legacy Good Samaritan Hospital, Portland OR
- 2007-06 Undergraduate Pre-Medical School course lecture on Surgical Oncology as a
Career Choice, University of Portland, Portland, OR
- 10/2006 Community Education on Finding Good Information About Cancer on the
Internet, Legacy Good Samaritan Hospital, Portland,OR

Publications:

1. **Morris KT**, Horvath K, Jobe B, Swanstrom L. "Laparoscopic management of accessory spleens in immune thrombocytopenic purpura." Surgical Endoscopy, May 1999; Vol 13(5):520-522.
2. **Morris KT**, Pommier RF, Vetto JT. "Office based wire guided open breast biopsy under local anesthesia is accurate and cost effective." American Journal of Surgery, May 2000; 179(5):422-5.
3. **Morris KT**, Johnson N, Homer L, Walts D. "A comparison of complementary therapy use between breast cancer patients and patients with other primary tumor sites." American Journal of Surgery, May 2000; 179(5):407-11.
4. **Morris KT**, Marquez C, Vetto JT. "Prevention of local recurrence after surgical debulking of nodal and subcutaneous melanoma deposits by hypofractionated radiation therapy." Annals of Surgical Oncology, October 2000; 7(9):680-4.
5. **Morris KT**, Kavanagh M, Standage B. "Use of limited CT scans for diagnosing appendicitis: The real world." Owen Wangenstein Surgical Forum, 2000.
6. **Morris KT**, Johnson N, Dorsey P, Krasikov N, Allen M. "Genetic counseling impacts decision for prophylactic surgery for patients perceived to be at high risk for breast cancer." American Journal of Surgery, May 2001;181:431-433.
7. **Morris KT**, Stevens J, Fletcher WS, Pommier RF, Vetto JT. "Usefulness of preoperative lymphoscintigraphy for the identification of SLN location in melanoma." American Journal of Surgery, May 2001;181:423-426.
8. **Morris KT**, Pommier RF, Morris A, Schmidt WA, Beagle G, Alexander PW, Toth-Fejel S, Schmidt J, Vetto JT. "Usefulness of the triple test score for palpable breast masses." Archives of Surgery, September, 2001; 136(9):1008-1013.
9. **Morris KT**, Toth-Fejel S, Schmidt J, Fletcher WS, Pommier RF. "High DHEA predicts breast cancer cell growth in tissue culture: A renewed role for adrenalectomy." Surgery, December 2001; 130(6):947-53.
10. **Morris KT**, Kavanagh M, Whiteford MH, Hansen P, Deveney K, Standage B. "The rational use computed tomography scans in the diagnosis of appendicitis." American Journal of Surgery, May 2002; 183(5):547-550.
11. **Morris KT**, Vetto JT, Petty JK, Lum SS, Schmidt WA, Toth-Fejel S, Pommier RF. "A new score for the evaluation of palpable breast masses in women under age 40." American Journal of Surgery, October 2002; 184(4):346-347.
12. **Morris AM**, Flowers CR, **Morris KT**, Schmidt WA, Pommier RF, Vetto JT. "Comparing the cost-effectiveness of the triple test score to traditional methods for evaluating palpable breast



- masses." Medical Care, August 2003; 41(8):962-971.
13. **Morris KT**, Song TJ, Fong Y. "Recent advancements in diagnosis and treatment of metastatic colorectal cancer to the liver." Surgical Oncology, November 2006; 15(3):129-134.
 14. **Morris KT**, Busam KJ, Bero S, Patel A, Brady MS. "Primary cutaneous melanoma with regression does not require a lower threshold for sentinel lymph node biopsy." Annals of Surgical Oncology, January 2008; 15(1):316-322.
 15. McLaughlin SA, Wright MJ, **Morris KT**, Sampson MR, Brockway JP, Hurley KE, Riedel ER, Van Zee KJ. "Prevalence of lymphedema in 936 women with breast cancer 5 years after sentinel lymph node biopsy or axillary dissection: I. Objective measurements." Journal of Clinical Oncology, November 2008; 26(32):5213-9.
 16. McLaughlin SA, Wright MJ, **Morris KT**, Sampson MR, Brockway JP, Hurley KE, Riedel ER, Van Zee KJ. "Prevalence of lymphedema in 936 women with breast cancer 5 years after sentinel lymph node biopsy or axillary dissection: II. Patient perceptions and precautionary behaviors." Journal of Clinical Oncology, November 2008; 26(32):5220-6.
 17. Sambasivan C, Deveney K, **Morris KT**. "Oncologic Outcomes after Resection of Rectal Cancer: Laparoscopic versus Open Approach." American Journal of Surgery, May 2010; 199:599-603.
 18. **Morris KT**, Gönen M, Schwartz L, Tuorto S, DeMatteo R, D'Angelica M, Jarnagin WR, Fong Y. "A Simple Measurement of Intra-abdominal Fat Predicts Outcome After Upper Abdominal Surgery." Archives of Surgery, November 2010; 145(11):1069-1073.
 19. Thompson S, Pearson AN, Ashley MD, Jessick V, Murphy BM, Gafken P, Henshall DC, **Morris KT**, Simon RP, Meller R. "Identification of a novel Bim E3 ligase, tri-partite motif containing protein 2, and its role in rapid ischemic tolerance induced neuroprotection." Journal of Biological Chemistry, June 2011; 286(22):19331-9.
 20. Nir I, Wiggins CL, **Morris K**, Rajput A. "Diversification and trends in Biliary tree cancer among the three major ethnic groups in the state of New Mexico." American Journal of Surgery, March 2012; 203(3):361-5.
 21. Pinchuk I, **Morris KT**, Nofchissey RA, Earley RB, Wu JY, Ma TY, Beswick E. "Stromal myofibroblasts induce Th17 during Helicobacter infection and in the gastric tumor microenvironment: A link between infection and carcinogenesis." PLoS One, 2013; 8(1):e53798.
 22. Meller R, Galvern L, Quan-Lan J, Han E, Bauer J, **Morris K**. "A snapshot of cell death and autophagy processing in a liver tumor treated with embolic beads emitting radiation or coated with doxorubicin." JVIR 2013; October 2013; 24(10): 1537-42.
 23. **Morris KT**, Khan H, Ahmad A, Weston L, Nofchissey R, Pinchuk I, Beswick E. G-CSF and G-CSFR are highly expressed in human gastric and colon cancers and promote carcinoma cell proliferation and migration. British Journal of Cancer; (2014), 1-10; DOI: 10.1038/bjc.2013.822
 24. Rajput A, Faizi SA, Nir I, **Morris KT**, Fahy B, Russell J, Wiggins C. Pediatric melanoma in New Mexico American Indians, Hispanics, and non-Hispanic whites, 1981-2009. Am J Surg. 2014 Mar; 207(3): 412-6.
 25. **Morris KT**, Nofchissey RA, Pinchuk IV, Beswick EJ. Chronic Macrophage Migration Inhibitory Factor Exposure Induces Mesenchymal Epithelial Transition and Promotes Gastric and Colon Cancers. PLoS One. 2014 Jun 2;9(6):e98656. doi: 10.1371/journal.pone.0098656.



26. Berry RS, Gullapalli RR, Wu J, **Morris KT**, Hanson JA. Diffuse Glutamine Synthetase Over expression Restricted to Areas of Peliosis in a β -Catenin Activated Hepatocellular Adenoma: A Potential Pitfall in Glutamine Synthetase Interpretation. *Virchows Archiv*, June 2014.
27. Rodriguez RA, Overton H, **Morris KT**. Pancreatic neuroendocrine tumor with splenic vein tumor thrombus: A case report. *Int J Surg Case Rep*. 2014 Nov 18;5(12): 1271-1274.

Abstracts: (Peer Reviewed)

1. **Morris KT**, Horvath K, Jobe B, Swanstrom L. "Laparoscopic management of accessory spleens in immune thrombocytopenic purpura." SAGES, 4th Annual Meeting, Seattle, Washington March 1998.
2. **Morris KT**, Hansen P, Streeter D. "Mathematical Model for Radiofrequency Ablation." American College of Surgeons 33rd Annual Meeting, Oregon Chapter, September 1998.
3. **Morris KT**, Pommier RF, Vetto JT. "Office based wire guided open breast biopsy under local anesthesia is cost effective and accurate." American College of Surgeons, 84th Annual Clinical Congress, Owen H. Wangenstein Surgical Forum, Orlando, Florida, October 28th, 1998.
4. **Morris KT**, Johnson N, Homer L, Walts D. "Complementary therapy use among cancer patients." North Pacific Surgical Association, 86th Annual Meeting, Vancouver B.C., November 12, 1999.
5. **Morris KT**, Pommier RF, Morris A, Fletcher WS. "Phase II trial of hepatic arterial infusion therapy/chemoembolization for colorectal metastases." Pacific Coast Surgical Association, 71st Annual Meeting, San Francisco, California, February 20th, 2000.
6. **Morris KT**, Marquez C, Vetto JT. "Prevention of local recurrence after surgical debulking of nodal and subcutaneous melanoma deposits by hypofractionated radiation therapy." Society of Surgical Oncology, 53rd Annual Meeting, New Orleans, Louisiana, March 17th, 2000.
7. **Morris KT**, Pommier RF, Fletcher WS. "Substantial increase in survival of carcinoid patients with hepatic arterial infusion therapy." American Radium Society, April 2000.
8. **Morris KT**, Kavanagh M, Standage B. "Limited abdominal CT scan to rule out appendicitis: The real world." American College of Surgeons, 86th Annual Clinical Congress, Owen H. Wangenstein Surgical Forum, Chicago, Illinois, October 23rd, 2000.
9. **Morris KT**, Johnson N, Dorsey P, Krasikov N, Allen M. "Does genetic counseling impact decision for prophylactic surgery in patients perceived to be at high risk for breast cancer?" North Pacific Surgical Association, 87th Annual Meeting, Coeur D'Alene, Idaho, November 10th, 2000.
10. **Morris KT**, Stevens J, Fletcher WS, Pommier RF, Vetto JT. "Usefulness of preoperative lymphoscintigraphy for the identification of SLN location in melanoma." North Pacific Surgical Association, 87th Annual Meeting, Coeur D'Alene, Idaho, November 10th, 2000.
11. **Morris KT**, Pommier RF, Morris A, Schmidt WA, Beagle G, Alexander PW, Toth-Fejel S, Schmidt J, Vetto JT. "Usefulness of the triple test score for palpable breast masses." Pacific Coast Surgical Association, 72nd Annual Meeting, Banff, Canada, February 18th, 2001.
12. **Morris KT**, Look RM, Homer L, Arnold K, Purdy C, Walts D, Johnson N. "Randomized controlled trial of venlafaxine versus black cohosh as a treatment for menopausal symptoms in women with breast cancer." Pacific Coast Surgical Association, 72nd Annual Meeting, Banff, Canada, February 20th, 2001.



13. **Morris KT**, Toth-Fejel S, Schmidt J, Fletcher WS, Pommier RF. "High DHEA predicts breast cancer cell growth in tissue culture: A renewed role for adrenalectomy." American Association of Endocrine Surgeons, 22nd Annual Meeting, Atlanta, Georgia, April 30th, 2001.
14. **Morris KT**, Kavanagh M, Whiteford MH, Hansen P, Deveney K, Standage B. "The Limited Abdominal CT Scan in the Evaluation of Appendicitis: ER Diagnosis or Surgical Evaluation?" North Pacific Surgical Association, 88th Annual Meeting, Victoria B.C., November 9th, 2001.
15. **Morris KT**, Lakin P, Deloughery T, Goldman R. "Pulmonary angiography for trauma patients: Not dead yet." Society of Critical Care Medicine, 31st Critical Care Congress, San Diego, California, January 27th, 2002.
16. Cheek J, Lacy J, Toth-Fejel S, **Morris KT**, Calhoun K, Pommier RF, Fletcher WS. "The impact of hormone replacement therapy on the detection and staging of breast cancer." Pacific Coast Surgical Association, 73rd Annual Meeting, Las Vegas, Nevada, February 18th, 2002.
17. **Morris KT**, Johnson NM, Hudson V, Toth-Fejel S, Pommier RF. "Effects of a commonly used phytoestrogen on hormone sensitive breast cancer: An *in vitro* study." Pacific Coast Surgical Association, 73rd Annual Meeting, Las Vegas, Nevada, February 18th, 2002.
18. **Morris KT**, Busam, K, Brady MS. "Primary Melanoma with Regression: Implications for Management." American Society of Clinical Oncology, 2005 ASCO Annual Meeting Proceedings. Volume 23(16S), 7530.
19. Wright M, **Morris KT**, Giron G, Sampson M, Hurley K, Riedel ER, Van Zee KJ. "Patient Precautionary Behaviors and Perceptions of Lymphedema after Axillary Surgery." Society of Surgical Oncology, 60th Annual Cancer Symposium, Washington D.C., March 15-18, 2007.
20. Chen J, Xie Y, Yi X, **Morris KT**, Johnson N, Rogall NK. "Dendritic cells are regulators of breast tumor growth and angiogenesis." American Association of Cancer Research, 100th Annual Meeting, Denver Colorado, April 21st, 2009.
21. Xie Y, Yi X, **Morris KT**, Chen J. "Akt1 regulates melanoma metastasis to lungs." American Association of Cancer Research, 100th Annual Meeting, Denver Colorado, April 22nd, 2009.
22. Sambasivan C, Deveney K, **Morris KT**. "Oncologic Outcomes after Resection of Rectal Cancer: Laparoscopic versus Open Approach." North Pacific Surgical Association, 96th Annual Meeting, Portland, Oregon, November 13th, 2009.
23. Nir I, Wiggins CL, **Morris K**, Rajput A. "Trends of Biliary Tract Malignancies in the State of New Mexico- perspective over 3 decades." Midwestern Surgical Society, 54th Annual Meeting, August 9th, 2011.
24. Mason M, Bruner A, Meisner A, **Morris KT**, Nir I, Wiggins CL, Rajput A. "Distance-to-care: Stage at diagnosis for New Mexico (NM) Residents with Colorectal Cancer (CRC)." American Society of Clinical Oncology: Gastrointestinal Cancers Symposium, San Francisco, California, January 19-21, 2012
25. Han E, Matsen P, Johnson NM, Wagie T, **Morris, KT**. "Pain Pumps in Patients Undergoing Mastectomy Do Not Decrease Pain Scores or Narcotic Use." Society of Surgical Oncology's 65th Annual Cancer Symposium, Orlando, Florida, March 21-24, 2011.
26. Beswick E, **Morris KT**, Earley RB, Nofchissey R, Ma T, Pinchuk I. "Th17 Develop in the Human Gastric Tumor Microenvironment and Promote Pro-carcinogenic Events." Translational Sciences 2012, Washington DC, April, 2012. Winner of Translational Study Scholar Award.



27. **Morris KT**, Earley RB, Nofchissey R, Beswick E. "G-CSF Promotes Pro-Carcinogenic Events in Gastrointestinal Cancers." Keystone Symposium: The Role of Inflammation during Carcinogenesis, Dublin, Ireland, May 20-25, 2012.
28. Eberly L, Wiggins C, Nir I, **Morris K**, Russell JC, Rajput A. Increasing incidence for anal cancer in the United States, 1980-2009. ASCO GI, San Francisco, CA. January 24-26, 2013. (poster).
29. Madden K, Wiggins C, **Morris K**, Rajput A, Nir I. Clinicopathologic correlations of gallbladder cancer by ethnicity in New Mexico, 1980-2009. ASCO GI, San Francisco, CA. January 24-26, 2013. (poster).
30. **Morris K**, Weston LL, Nofchissey RA, Beswick E. The Role of G-CSF in expansion of GI Cancer Stem Cells, Gordon Research Conference, Les Diablerets, Switzerland, April 21-26, 2013. (poster).
30. Kahn B, **Morris K**. Breast Cancer: Recurrence in the modern era. Am Soc. Of Breast Surgeons, Chicago, IL, May 1-5, 2013. (poster).
31. **Morris K**, Beswick E. Macrophage migration inhibitory factor mediates mesenchymal epithelial transition and promotes gastrointestinal cancers. Keystone Symposia Inflammation, Infection & Cancer Conference, Whistler, British Columbia, Canada. March 9-14, 2014. (poster).

Book Chapters/Non Peer-Reviewed Articles:

1. **Morris KT**, Brennan MF. "Prognosis in Advanced Sarcoma." In Glare P, Christakis N. (Eds) Prognosis in Advanced Cancer, 2007
2. **Morris KT**, Pommier RF. "How gynecologists can avoid breast cancer related lawsuits." Contemporary OB/GYN, December, 1999.

National Presentations:

1. "Palliative Surgery Tumor Board – Breast Cancer" at 2012 Society of Surgical Oncology Annual Meeting, Orlando, FL. March 24, 2012.

Local/Regional Presentations:

1. "The Role of Granulocyte Colony Stimulating Factor (G-CSF) in Gastrointestinal Cancers." University of New Mexico, Albuquerque, NM, Department of Pathology Seminar. January 29, 2015.
2. "Current Management of Cystic Lesions of the Pancreas." University of New Mexico, Albuquerque, NM, Department of Surgery Grand Rounds. February 1, 2013.
3. "Futility in Medicine: Surgical Oncology Perspective" at Medical Futility Conference, University of New Mexico, Albuquerque, NM. March 2, 2011.
4. "Choosing a Surgical Specialty" and "Private Practice" at Women in Surgery Forum, Portland, OR. October 22, 2010
5. "Life During Cancer Treatment: A Primer for the PCP" at Clinicians Update: Cancer Control Training for Physicians, Nurses and Nurse Practitioners, Pharmacists, and other Providers with the Indian Health Service, Portland, OR. October 20, 2010
6. "Tumor Banking: The Role of Tumor Banking in 21st Century Cancer Research" The Treva Hoffman Foundation, Roseburg, OR. January, 2009
7. "The Promise of Cancer Research" at Legacy Survivors Day Celebration. June 01, 2008



Curriculum Vitae
April 28, 2015
Katherine Morris, MD

8. "Tumor Bank" at 24th Annual Seminar for Radiation Oncology Professionals, Multnomah Athletic Club, Portland, OR. February 17, 2007
9. "Current Management of Pancreatic Cystic Neoplasms" at Legacy Good Samaritan Hospital, Oncology Grand Rounds, Portland, OR. June 2006

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Service Committees:

- 2014- Clinical Competency Committee, General Surgery Residency at University of New Mexico
- 2011- Mock Oral Boards for PGY-4 and 5 General Surgery Residents at University of New Mexico
- 2011- Data Safety Monitoring Committee (DSMC) for the Clinical Trials Office at the UNM Cancer Center
- 2010-2009 American College of Surgeons Commission on Cancer State Chair, Oregon
- 2010-2008 Medical Director, Multnomah County Division of Project Access
- 2010-2006 Human Services Commission – Genetics Advisory Subcommittee
- 2006-2010 Chair, Legacy Health System Cancer Quality Committee
- 2000-2003 Oregon Health and Science University Residency Review Committee
- 2000-2003 Oregon Health and Science University Graduate Medical Education Committee
- 1997-2003 Oregon Health and Science University Residency Advisory Committee

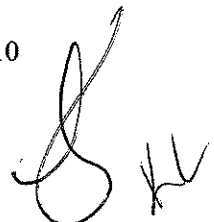
Grants:

Current:

1. Project Title: MIF as a Potential Colorectal Cancer Therapeutic Target
Role: PI
Source: University of New Mexico Research Allocation Committee
Amount: \$25,000
Dates: 7/1/2014-6/30/2015
2. Project Title: Annotated Human Solid Tumor and Blood Specimen Contract with NCI
Role: Co-Investigator (5% FTE)
Source: NCI RFP S09-148
Amount: \$3,800,000
Dates: 2010-April 30, 2015

Completed:

1. Project Title: "The Role of G-CSF and G-CSF receptor in GI Cancer: an *in vivo* model."
Role: PI (Collaborator, Dr. Ellen Beswick).
Source: ACS IRG
Amount: \$30,000.
Dates: June 1, 2013-May 31, 2014
2. Project Title: "Microarray Analysis for Pro-Tumorigenic Pathways in Gastric Cancer Cells treated with G-CSF."
Role: Co-PI (Dr. Ellen Beswick)
Source: UNM Cancer Center FIG
Amount: \$5000
3. Project Title: "The Role of G-CSF and G-CSF receptor in GI Cancer"
Role: PI (Collaborator, Dr. Ellen Beswick).
Source: ACS IRG
Amount: \$30,000.

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Dates: May 1, 2012-April 30, 2013

4. Project Title: "The Role of G-CSF in Colorectal Cancer."
Role: PI (Collaborator, Dr. Ellen Beswick)
Source: Surgery Research Investigator Award
Amount: \$5,000
Dates: November 1, 2012–December 31, 2013
5. Project Title: "The Role of Th17 in H Pylori-Associated Gastric Cancer."
Role: Collaborator (PI, Dr. Ellen Beswick).
Source: Grant ID CTSC0016-2.
Amount: \$25,000.
Dates: April 1, 2011-March 31, 2012
6. Project Title: "Combined Selective Internal Radiation Therapy And Radiofrequency Ablation For Primary And Secondary Hepatic Malignancies With Correlative Study Of Treated Samples."
Role: **Morris KT**, Chen J, Bauer J.
Source: Legacy Annual Foundation
Amount: Grant \$24,000
Dates: April 2008-March 2009

Pending:

1. American Cancer Society (Morris) 01/01/16-12/31/20 7.2 Cal Months (60%)
Mentored Research Scholar Grant \$135,000/yr direct
G-CSF and tumor associated neutrophils in colorectal cancer
2. Mountain West Research Consortium (Morris) 07/01/15-06/30/17 1.2 Cal Months (10%)
IDeA-CTR Pilot Grant \$60,000/yr direct
G-CSF and G-CSFR as a novel prognostic biomarker in colorectal cancer
3. NIH R01 (Beswick) 04/01/13-03/31/18 1.2 Cal Months (10%)
NCI \$250,000/yr direct
The Role of Stromal Cells in Gastric Cancer
The goal of this study is to examine how *H. pylori* induces pro-cancerogenic inflammatory responses in stromal cells.
4. Burroughs Wellcome Fund (Beswick) 07/01/13-06/30/18 0.6 Cal Months (5%)
Infectious Disease Grant \$100,000/yr direct
Helicobacter pylori Induction of Th17 Promotes Gastric Cancer Development
5. DOD (Pinchuk) 07/01/13-06/30/15 0.12 Cal Months (1%)
Career Development Award in Colon Cancer \$32,000/yr direct
Dysregulation of IL-6 Signaling in CD90+ Stromal Cells: role in immune evasion in CRC
6. American Cancer Society (Pinchuk) 07/01/13-06/30/17 0.12 Cal Months (1%)
Research Scholar Grant \$20,000/yr direct
Dysregulation of Vitamin A metabolism in cancer associated fibroblasts: role in CRC associated immune evasion.

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Mentoring/Research Supervision:

Adrienne Griffin, Medical Student (2011-Present) Faculty Advisor/Mentor. Surgery Interest Group.
Alicia Small, ACNP Concentration, (2011-2012) University of New Mexico College of Nursing.
Fatima Shami, Pre-Medical Student (2011-2012) University of New Mexico School of Engineering.
Jacqueline O'Neill, Pre- and Medical Student (2011-Present) University of New Mexico
Muhammed Musleh, Pre-Medical Student (2013-Present) University of New Mexico
Anna Sabih, MD, Surgical Resident (2012-Present) Faculty Advisor/Mentor, General Surgery Residency
Alyssa Greenbaum, MD, Surgical Resident (2013-Present) Research Advisor/Mentor, General Surgery
Residency

Clinical Research:

Local PI through 2010:

1. ACOSOG Z1031: A Randomized Phase III Trial Comparing 16 to 18 Weeks of Neoadjuvant Exemestane (25 mg daily), Letrozole (2.5 mg), or Anastrozole (1 mg) in Postmenopausal Women with Clinical Stage II and III Estrogen Receptor Positive Breast Cancer
2. ACOSOG Z4051: A Phase II Study of Neoadjuvant Therapy with Cisplatin, Docetaxel, Panitumumab Plus Radiation Therapy Followed by Surgery in Patients with Locally Advanced Adenocarcinoma of the Distal Esophagus

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