

MAURO VACCAREZZA

Dr. Mauro Vaccarezza, MD, PhD, FHEA

Work Address:

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Australian Citizen

Italian Citizen

PROFESSIONAL OVERVIEW

Energetic, motivated and professional Academic Senior Lecturer with more than 20 years' experience in Research, Lecturing and Tutoring roles across a wide range of subjects such as Anatomy, Physiology, Educational Development and Academic Methods. Qualified with a PhD and degrees in Biomedical, Infectious Diseases, Tropical Medicine and Immunology. Capable of motivating and developing appreciation, with instructive capacity to implement academic learning to achieve results and objectives. Language capacity with fluency in Italian, English and in French. Experienced dealing with people from diverse cultural backgrounds. An exceptional communicator with a consultative style, strong negotiation skills, excellent problem solving abilities and a keen client needs assessment aptitude. An accomplished presenter and writer of publications, including scholarly research and journal articles. A self-motivated individual with an excellent record of commitment to professional development activities.

STRENGTHS & ATTRIBUTES

- ◇ Biomedical and Immunology Specialist
- ◇ Strategic Planning & Research Management
- ◇ Dynamic Leadership & Operations Management
- ◇ Analysis & Reporting of Emerging Issues
- ◇ Complex Project Management
- ◇ High level Negotiation & Administration
- ◇ Process & Productivity Evaluation
- ◇ Human Resource Alignment
- ◇ Training, Lecturing and Mentoring
- ◇ Program & Training Development

EDUCATION

University of Queensland and Royal Australasian College of Surgeons Certificate of Merit Advanced Surgical Anatomy Course (Awarded Feb 5, 2014)	2013
University of Ferrara, Italy PhD Biomedical Sciences	2006
University of Milan, Italy Board of Infectious Diseases and Tropical Medicine	2002
Pasteur Institute Paris, France Masters of Immunology	2001
University of Genoa, Italy M.D. degree (Magna cum Laude)	1991

ACADEMIC EMPLOYMENT – TEACHING/RESEARCH

Curtin University

<i>School of Pharmacy and Biomedical Sciences (Biomedical Sciences until 12/2017), Bentley Campus</i>	
Full Time Fixed Term Senior Lecturer (C6), Anatomy and Cell Biology	July 2015- Dec 2020
Anatomy Licence Holder (Chief Anatomist)	Jan 2016 –Dec 2020
Chair, Scientific Foundations of Medicine, SBMS & Curtin Medical School	Dec 2015- Jan 2018
Unit Coordinator Pathophysiology	July 2016-Dec 2020
Director/Coordinator, Human Biology program	Jan 2017 –July 2019
Unit Coordinator Optometry Flinders-Curtin program	June 2017-Dec 2017
Optometry Stream Deputy Coordinator	Jan 2018- Dec 2018
Deputy Course Coordinator, Human Biology program	Aug 2019-Dec 2020
Fellow of the Higher Education Academy (FHEA, Advance HE)	October 2019 – pres
<i>Curtin Medical School</i>	
Adjunct Senior Lecturer, Curtin Medical School	Jan-Feb 2021
Full time Fixed Term, Senior Lecturer (C6), Anatomy and Cell Biology	March 2021-pres

University of Queensland

<i>School of Biomedical Sciences, Santa Lucia Campus - (MEDI1011, MEDI2011, MEDI1012, MEDI2012, BIOM3002, BIOM2020, BIOM3015, RACS Advanced Surgical Anatomy Course)</i>	
Full Time Fixed-Term Lecturer Anatomy and Histology	February 2015-June 2015

Queensland University of Technology

<i>School of Biomedical Sciences, Faculty of Health, Gardens Point Campus - (LQB389, LQB390)</i>	
Casual Tutoring Regional Anatomy (Medical Radiology and Radiotherapy)	Apr 2014 – December 2014

University of Queensland

<i>School of Biomedical Sciences, Santa Lucia Campus - (MEDI1011, MEDI2011, MEDI1012, MEDI2012, BIOM3002, BIOM2020, BIOM3015, RACS Advanced Surgical Anatomy Course)</i>	
Casual Tutoring Anatomy and Histology	May 2013 – January 2015

University of Cassino and Southern Lazio & Sapienza University of Rome, Italy

*Faculty of Human Movement Sciences and Physical Activity
Nursing School and Physiotherapy School*
Associate Professor of Human Anatomy and Cell Biology

Mar 2005 – January 2015

University of Ferrara, Italy

School of Pharmacy
Sessional Professor of Human Anatomy

Nov 2009 – Jun 2010

University of Parma, Italy

*Faculty of Medicine
School of Exercise Science*
Adaptive Physical Exercise Unit

2010-2011

Italian Foundation for Spa Scientific Research - FORST

Consultant

Jan 2008 – Jan 2013

Component of the Scientific Committee

2016- pres

University of Cassino and Southern Lazio, Italy

Contact Professor of Human Anatomy

Nov 2003 - Feb 2005

University of Trieste, Italy

Research Scientist – Department of Human Morphology

Nov 2002 - Nov 2004

AREA Science Park, Trieste, Italy

Scientific Consultant

2003 - 2004

Merck, Sharp and Dohme, Italy

Scientific Consultant – Research Projects

2000 - 2003

Bristol Myers Squibb, Italy

Scientific Consultant – Research Projects

2000 - 2003

National Institute of Allergy and Infectious Diseases, Bethesda, USA

Visiting Associate

Mar 1997 - Feb 1999

Winner of the NIH Staff Award

1998

Laboratory of Immunoregulation

Visiting Fellow - Winner of Fogarty Fellowship

Feb 1992 - Jan 1997

ACADEMIC DUTIES

Curtin University

Chair of Committee of Scientific Foundations of Medicine	2015-2018
Chief Anatomist	2016-2020
Deputy Director –Human Biology program	2016 and 2019-2020
Unit Coordinator – Pathophysiology	2016-pres
Director Human Biology program	2017-2019
Low Risk Ethics reviewer	2019-pres
Unit Coordinator- Environmental Physiology	2021

University of Cassino and Southern Lazio

Movement Sciences

Member of the Admission Exam Board for the Courses of the Faculty	2005 – 2012
Member of the Election Committee for the Faculty President	2005 – 2012
Member of the Department of Health and Sport Science	2005 – 2012
Member of the Intramural Grant Evaluation Committee	2007 - 2010
Member of the Evaluation Committee for short term Fellowships for graduated, PhD and postdoctoral students	2007 – 2012
Member of the Spin-off Committee	2007 – 2012
Member of the Executive Committee for the Election of the Dean	2009
Member of the Evaluation Committee of Teaching and Research	2005 – 2009

Sapienza University of Rome

Member of the Executive Committee of the Nursing School	2006 - 2010
Member of the Executive Committee of the Physiotherapy School	2008 – 2010

REFEREES

Prof. John C.L. Mamo, Ph.D.

Full Professor & Director, Curtin Health Innovation Research Institute (CHIRI)

Faculty of Health Sciences

Curtin University

Kent Street

Bentley, Perth, WA, 6102

Tel. 08 -92667232 Email: J.Mamo@curtin.edu.au

<https://research.curtin.edu.au/supervisor/prof-john-mamo/>

Adjunct Prof. Elizabeth Watkin, Ph.D.

Full Professor & previous Deputy Head, Curtin Medical School

Faculty of Health Sciences

Curtin University

Kent Street

Bentley, Perth, WA, 6102

Tel. 08-92662955 Email: E.Watkin@curtin.edu.au

<https://staffportal.curtin.edu.au/staff/profile/view/E.Watkin/>

Prof. Marco Vitale, M.D.

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Prof. Dr. Anthony S. Fauci, MD

Albert Lasker Laureate
 Director
 National Institute of Allergy and Infectious Diseases,
 Chief of Laboratory of Immunoregulation, National Institutes of Health, USA
 6610 Rockledge Drive MSC 6612 Bethesda, Md., 20892 USA
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<http://www.niaid.nih.gov/about/directors/biography/pages/biography.aspx>

Professional Memberships & Affiliations

Australian & New Zealand Association of Clinical Anatomists - ANZACA	2013 – Present
Italian Society of Anatomy and Histology - SIAI	2005 – Present
Consultant – ANATOMEDIA Project (www.anatomeia.com)	2014 – Present
Case Teacher, NATIONAL CENTER FOR CASE STUDY TEACHING IN SCIENCE (NCCSTS), USA	2017 - Present
Western Australian Institute for Educational Research	2018 - Present
Fellow of the Higher Education Academy (Advance HE)	2019 - Present

Editorial Board Member

International Journal of Molecular Sciences (from 01/11/2018)
https://www.mdpi.com/journal/ijms/sectioneditors/Pathology_Diagnostics_Therapeutics

Immuno (from 01/2021) <https://www.mdpi.com/journal/immuno/editors>

Frontiers of Virology (from 02/2021) [Frontiers in Virology | Virus and Host Immunity](https://www.mdpi.com/journal/frontiersofvirology)

Reviewer of International Scientific Journals and Research Foundations

Advances in Medical Education and Practice

AIDS

AIDS Res and Human Retroviruses

Anatomical Science Education

BMC Medical Education

BMJ Surgery, Interventions, & Health Technologies

Cancers

Clinical and Translational Medicine

Current Drug Targets

Cytokine

European Journal of Histochemistry

Frontiers in Immunology

Future Cardiology

Int Journal of Biometeorology

International Journal of Molecular Sciences

Issues in Educational Research

JAMA Network Open

J Cell Physiology

J Exp Med

Journal of Anatomy

Journal of Clinical Endocr and Metab

Journal of Infectious Diseases

Journal of Medical Education and Curr Dev

Leukaemia

Nature Medicine

Neurological Sciences

Neurosurgical Review

Nutrients

Oncotarget

Plos One

Proc National Academy of Sciences

World Journal of Surgical Oncology

Grant reviewer for Heart Foundation Australia (2020)

Grant reviewer for Natural Sciences and Engineering Research Council of Canada (NSERC) (2020)

Funding and Grants

- ◇ Intramural Research Program NIH, NIAID (roughly USD 350,000/year to our group, 1993-1998)
- ◇ ANLAIDS Start-up Clinical Research Grant (1999-2002) 105,000 euro total
- ◇ InnovAction Program AREA Science Park, Trieste, Italy (2002-2004) 7500 euro/year
- ◇ Italian Ministry of Education and Research Grant “The Action of TRAIL (Tumor Necrosis Factor-Related Apoptosis Inducing Ligand) on the Differentiation, Maturation, Growth and Apoptosis of Skeletal Muscle Cells” (PRIN 2006-2008) 50,000 euro
- ◇ University of Cassino Local Dev. Program (FAR) (2006-2011) total euro 22000
- ◇ UQ start-up package (AUD 8000, Jan-July 2015)
- ◇ **EMCA SPBMS grant (Curtin University) (Dec 2019 for 2020/2021; AUD 6000)**
- ◇ **Medical Research Future Fund (MRFF) Australia Grant (Curtin University) “A randomized controlled trial in subjects with early Alzheimer’s disease exploring probucol support to cognitive function through improved cerebrovascular function” AUD 1,720,000 (2020-2024, Associate Investigator)**

Oral Presentations at conferences and symposia

- Best practice for anatomy learning and teaching: Hints from a literature review. Teaching and Learning Forum 2018. Perth, Australia
- The influence of basic Latin and Greek etymology knowledge on anatomy learning, understanding and outcomes in first year Biomedical Sciences students. Teaching and Learning Forum 2017. Perth, Australia
- 3D printed specimens for learning anatomy: A pilot study comparing 3D printed models with traditional cadaverous materials. Teaching and Learning Forum 2017. Perth, Australia
- A new role of balneology and spa therapy in modern clinical setting: evidence-based and basic science-based medicine. 111th Congress of the Italian Society of Internal Medicine, Roma, Italy 2010
- Triglyceridaemia, but not cholesterolemia and glycaemia, is a predictor of lymphodystrophy in HIV infected treated patients: the LipolCONA Study. 4th International Workshop on Adverse Drug Reactions and Lymphodystrophy in HIV infection, San Diego, USA, 2002
- NK cell function in HIV chronically infected individuals with undetectable viremia under HAART. XIV National Congress AIDS, Milan, Italy, 2000
- Role of Lymphoid tissue in the HIV infection. XII International AIDS Conference, Geneva, Switzerland, 1998
- Primary Immune response to HIV infection. Meeting of the Laboratory of Tumor Cell Biology, Bethesda, USA, 1995
- Cyclosporine A Suppresses HIV infection in primary T lymphocytes acutely infected in vitro. American Association of Immunology Congress, Denver, USA 1993

Invited Speaker

The primary immune response to HIV (invited seminar)
San Raffaele Scientific Institute and San Raffaele University, Milan 2001

Alteration of metabolism and lipid distribution in cohorts of HIV treated patients
(invited seminar)
University of Chieti School of Medicine, 2002

The role of TRAIL in the immune system and haematopoiesis (invited speaker)
University of Parma Medical School, 2005

Evidence based-medicine and basic science-based medicine in the spa therapy
(invited speaker)
Italian Spa and Thermal Medicine Association, Sapienza University of Rome, 2011

Undergraduate and Graduate Students Supervision

Undergraduate supervision

University of Cassino and Southern Lazio (18 undergraduates, all successful, 16 *summa cum laude*)

David Barratt, B.S. (Curtin University)

Started in S1 2020 (project: "Effects of freezing and thawing on platelet mRNA expression and platelet function: a pilot study")

Graduate supervision (Doctoral & Masters, Level 1: <https://research.curtin.edu.au/supervisor/dr-mauro-vaccarezza/>)

Dr. Andrea Melani (University of Cassino and Southern Lazio) Ph.D. in "Systems, technologies and devices for movement and health" awarded in March 2015 (XXXVII cycle: 2012-2014, thesis title: "Study, development and testing of a variable intergrip barbell")

Devahuti Chaliha, B.S. (Hon) Ph.D. in Neurosciences at Curtin University and Curtin Health Research Innovation institute (CHIRI); co-supervision (40%) started in January 2020 (thesis title: "A paradoxical vasodilatory nutraceutical intervention (aged garlic extract and L-arginine) for prevention and attenuation of migraine: results from a randomized clinical trial")

Andrianto Gandadireja, B.S., M.S. Ph.D. in Biomedical Sciences at Curtin University and Harry Perkins Institute of Medical Research; co-supervision (20%) started in April 2020 (thesis title: "Engineering next generation gene editing systems").

Zachary D'Alonzo, B.S. (Hon) Ph.D. in Biomedical Science at Curtin University; and Curtin Health Research Innovation institute (CHIRI); co-supervision (10%) started in October 2019 (thesis title: "Blood Lipoprotein-amyloidemia: Implications for Alzheimer's Disease risk").

Scientific databases

Google Scholar: <https://scholar.google.com/citations?user=fVpy63AAAAAJ&hl=it&oi=ao>

ORCID: <https://orcid.org/0000-0003-3060-318X>

ResearchGate: https://www.researchgate.net/profile/Mauro_Vaccarezza

Scopus: <https://www.scopus.com/authid/detail.url?authorId=6701350504>

Scientific Publications - Peer-Reviewed

H-INDEX: 33 [Google Scholar]; 31 [ResearchGate]; 27 [Web of Science]; 27 [Scopus]

Total citations: 5440 [Google Scholar, assessed on September 29th, 2021]

1. Graziosi C, Pantaleo G, Demarest JF, Cohen OJ, **Vaccarezza M**, Butini L, Montroni M, Fauci AS. HIV-1 infection in the lymphoid organs. *AIDS*. 1993 Nov; 7 Suppl 2:S53-8. Review. IF : 6.407 Cited : 32 Q1
2. Rebai N, Pantaleo G, Demarest JF, Ciurli C, Soudeyns H, Adelsberger JW, **Vaccarezza M**, Walker RE, Sekaly RP, Fauci AS. Analysis of the T-cell receptor beta-chain variable-region (V beta) repertoire in monozygotic twins discordant for human immunodeficiency virus: evidence for perturbations of specific V beta segments in CD4+ T cells of the virus-positive twins. *Proc Natl Acad Sci U S A*. 1994 Feb 15; 91(4):1529-33. IF : 9.737 Cited : 89 Q1
3. Pantaleo G, Graziosi C, Demarest JF, Cohen OJ, **Vaccarezza M**, Gantt K, Muro-Cacho C, Fauci AS. Role of lymphoid organs in the pathogenesis of human immunodeficiency virus (HIV) infection. *Immunol Rev*. 1994 Aug;140:105-30. Review. IF : 12.155 Cited : 226 Q1
4. Butini L, De Fougères AR, **Vaccarezza M**, Graziosi C, Cohen DI, Montroni M, Springer TA, Pantaleo G, Fauci AS. Intercellular adhesion molecules (ICAM)-1 ICAM-2 and ICAM-3 function as counter-receptors for lymphocyte function-associated molecule 1 in human immunodeficiency virus-mediated syncytia formation. *Eur J Immunol*. 1994 Sep; 24(9):2191-5. IF : 4.970 Cited : 63 Q1
5. Cohen OJ, Pantaleo G, Schwartzenuber DJ, Graziosi C, **Vaccarezza M**, Fauci AS. Pathogenic insights from studies of lymphoid tissue from HIV-infected individuals. *J Acquir Immune Defic Syndr Hum Retrovirol*. 1995; 10 Suppl 1:S6-14. Review. Erratum in: *J Acquir Immune Defic Syndr Hum Retrovirol* 1996 Feb 1;11(2):210. IF : 4.653 Cited : 45 Q1
6. Pantaleo G, Menzo S, **Vaccarezza M**, Graziosi C, Cohen OJ, Demarest JF, Montefiori D, Orenstein JM, Fox C, Schragger LK, et al. Studies in subjects with long-term nonprogressive human immunodeficiency virus infection. *N Engl J Med*. 1995 Jan 26;332(4):209-16. IF : 51.658 Cited : 872 Q1
7. Pantaleo G, Demarest JF, **Vaccarezza M**, Graziosi C, Bansal GP, Koenig S, Fauci AS. Effects of anti-V3 antibodies on cell-free and cell-to-cell human immunodeficiency virus transmission. *Eur J Immunol*. 1995 Jan; 25: 226-31. IF : 4.970 Cited : 40 Q1

8. Graziosi C, Ganttt KR, **Vaccarezza M**, Demarest JF, Daucher M, Saag MS, Shaw GM, Quinn TC, Cohen OJ, Welbon CC, Pantaleo G, Fauci AS. Kinetics of cytokine expression during primary human immunodeficiency virus type 1 infection. *Proc Natl Acad Sci U S A*. 1996 Apr 30; 93(9):4386-91. IF : 9.737 Cited : 168 Q1
9. Pantaleo G, **Vaccarezza M**, Graziosi C, Cohen OJ, Fauci AS. Antiviral immunity in HIV-1 long-term non-progressors. *Seminars in Virology*. 1996 Apr; 7: 131-38. IF : no longer published (it was 4.333 when available, Q1 when available) Cited : 4
10. Sunila I, **Vaccarezza M**, Pantaleo G, Fauci AS, Orenstein JM. Activated cytotoxic lymphocytes in lymph nodes from human immunodeficiency virus (HIV) 1-infected patients: a light and electron microscopic study. *Histopathology*. 1997 Jan; 30(1):31-40. IF : 3.294 Cited : 7 Q2
11. Sunila I, **Vaccarezza M**, Pantaleo G, Fauci AS, Orenstein JM. Gp120 is present on the plasma membrane of apoptotic CD4 cells prepared from lymph nodes of HIV-1-infected individuals: an immunoelectron microscopic study. *AIDS*. 1997 Jan; 11(1):27-32. IF : 6.407 Cited : 49 Q1
12. Zimmerman PA, Buckler-White A, Alkhatib G, Spalding T, Kubofcik J, Combadiere C, Weissman D, Cohen O, Rubbert A, Lam G, **Vaccarezza M**, Kennedy PE, Kumaraswami V, Giorgi JV, Detels R, Hunter J, Chopek M, Berger EA, Fauci AS, Nutman TB, Murphy PM. Inherited resistance to HIV-1 conferred by an inactivating mutation in CC chemokine receptor 5: studies in populations with contrasting clinical phenotypes, defined racial background, and quantified risk. *Mol Med*. 1997 Jan; 3(1):23-36. IF : 4.469 Cited : 487 Q1
13. Pantaleo G, Demarest JF, Schacker T, **Vaccarezza M**, Cohen OJ, Daucher M, Graziosi C, Schnittman SS, Quinn TC, Shaw GM, Perrin L, Tambussi G, Lazzarin A, Sekaly RP, Soudeyns H, Corey L, Fauci AS. The qualitative nature of the primary immune response to HIV infection is a prognosticator of disease progression independent of the initial level of plasma viremia. *Proc Natl Acad Sci U S A*. 1997 Jan 7; 94(1):254-8. IF : 9.737 Cited : 336 Q1
14. Martin LN, Murphey-Corb M, Mack P, Baskin GB, Pantaleo G, **Vaccarezza M**, Fox CH, Fauci AS. Cyclosporin A modulation of early virologic and immunologic events during primary simian immunodeficiency virus infection in rhesus monkeys. *J Infect Dis*. 1997 Aug; 176(2):374-83. IF : 5.848 Cited : 39 Q1
15. Pantaleo G, Soudeyns H, Demarest JF, **Vaccarezza M**, Graziosi C, Paolucci S, Daucher M, Cohen OJ, Denis F, Biddison WE, Sekaly RP, Fauci AS. Evidence for rapid disappearance of initially expanded HIV-specific CD8+ T cell clones during primary HIV infection. *Proc Natl Acad Sci U S A*. 1997 Sep 2; 94(18):9848-53. IF : 9.737 Cited : 240 Q1
16. Cohen OJ, **Vaccarezza M**, Lam GK, Baird BF, Wildt K, Murphy PM, Zimmerman PA, Nutman TB, Fox CH, Hoover S, Adelsberger J, Baseler M, Arthos J, Davey RT Jr, Dewar RL, Metcalf J, Schwartzentruber DJ, Orenstein JM, Buchbinder S, Saah AJ, Detels R, Phair J, Rinaldo C, Margolick JB, Pantaleo G, Fauci AS. Heterozygosity for a defective gene for CC chemokine receptor 5 is not the sole determinant for the immunologic and virologic phenotype of HIV-infected long-term nonprogressors. *J Clin Invest*. 1997 Sep 15; 100(6):1581-9. IF : 12.812 Cited : 54 Q1
17. Pantaleo G, Soudeyns H, Demarest JF, **Vaccarezza M**, Graziosi C, Paolucci S, Daucher MB, Cohen OJ, Denis F, Biddison WE, Sekaly RP, Fauci AS. Accumulation of human immunodeficiency virus-specific cytotoxic T lymphocytes away from the predominant site of virus replication during primary infection. *Eur J Immunol*. 1997 Dec; 27(12):3166-73. IF : 4.970 Cited : 50 Q1
18. Pantaleo G, Cohen OJ, Schacker T, **Vaccarezza M**, Graziosi C, Rizzardi GP, Kahn J, Fox CH, Schnittman SM, Schwartz DH, Corey L, Fauci AS. Evolutionary pattern of human immunodeficiency virus (HIV) replication and distribution in lymph nodes following primary infection: implications for antiviral therapy. *Nat Med*. 1998 Mar; 4(3):341-5. IF : 24.302 Cited : 146 Q1
19. Oliva A, Kinter AL, **Vaccarezza M**, Rubbert A, Catanzaro A, Moir S, Monaco J, Ehler L, Mizell S, Jackson R, Li Y, Romano JW, Fauci AS. Natural killer cells from human immunodeficiency virus (HIV)-infected individuals are

- an important source of CC-chemokines and suppress HIV-1 entry and replication in vitro. *J Clin Invest*. 1998 Jul 1; 102(1):223-31. IF : 12.812 Cited : 294 Q1
20. Scala G, Chen X, Liu W, Telles JN, Cohen OJ, **Vaccarezza M**, Igarashi T, Fauci AS. Selection of HIV-specific immunogenic epitopes by screening random peptide libraries with HIV-1-positive sera. *J Immunol*. 1999 May 15; 162(10):6155-61. IF : 5.520 Cited : 133 Q1
 21. Cicala C, Arthos J, Ruiz M, **Vaccarezza M**, Rubbert A, Riva A, Wildt K, Cohen O, Fauci AS. Induction of phosphorylation and intracellular association of CC chemokine receptor 5 and focal adhesion kinase in primary human CD4+ T cells by macrophage-tropic HIV envelope. *J Immunol*. 1999 Jul 1; 163(1):420-6. IF : 5.520 Cited : 114 Q1
 22. Soudeyns H, Paolucci S, Chappey C, Daucher MB, Graziosi C, **Vaccarezza M**, Cohen OJ, Fauci AS, Pantaleo G. Selective pressure exerted by immunodominant HIV-1-specific cytotoxic T lymphocyte responses during primary infection drives genetic variation restricted to the cognate epitope. *Eur J Immunol*. 1999 Nov;29(11):3629-35. IF : 4.970 Cited : 46 Q1
 23. Rizzardi GP, **Vaccarezza M**, Capiluppi B, Tambussi G, Lazzarin A, Pantaleo G. Cyclosporin A in combination with HAART in primary HIV-1 infection. *J Biol Regul Homeost Agents*. 2000 Jan-Mar; 14(1):79-81. IF : 2.825 Cited: 31
 24. Galli M, Ridolfo AL, Adorni F, Gervasoni C, Ravasio L, Corsico L, Gianelli E, Piazza M, **Vaccarezza M**, d'Arminio Monforte A, Moroni M. Body habitus changes and metabolic alterations in protease inhibitor-naïve HIV-1-infected patients treated with two nucleoside reverse transcriptase inhibitors. *J Acquir Immune Defic Syndr*. 2002 Jan 1;29(1):21-31. IF : 4.653 Cited : 158 Q1
 25. Gervasoni C, Ridolfo AL, Rovati L, **Vaccarezza M**, Carsana L, Galli M. Maintenance of breast size reduction after mastoplasty and switch to a protease inhibitor-sparing regimen in an HIV-positive woman with highly active antiretroviral therapy-associated massive breast enlargement. *AIDS Patient Care STDS*. 2002 Jul; 16(7):307-11. Erratum in: *AIDS Patient Care STDS* 2002 Sep; 16(9):465. Cassana Luca [corrected to Carsana Luca]. IF : 3.090 Cited: 20 Q1
 26. Galli M, Cozzi-Lepri A, Ridolfo AL, Gervasoni C, Ravasio L, Corsico L, Gianelli E, **Vaccarezza M**, Vullo V, Cargnel A, Minoli L, Coronado O, Giacometti A, Antinori A, Antonucci G, D'Arminio Monforte A, Moroni M; LipolCoNa Study. Incidence of adipose tissue alterations in first-line antiretroviral therapy: the LipolCoNa Study. *Arch Intern Med*. 2002 Dec 9-23;162(22):2621-8. IF : 10.579 Cited: 109 Q1
 27. Gervasoni C, Ridolfo AL, **Vaccarezza M**, Parravicini C, Vago L, Adorni F, Cappelletti A, d'Arminio Monforte A, Galli M. Thrombotic microangiopathy in patients with acquired immunodeficiency syndrome before and during the era of introduction of highly active antiretroviral therapy. *Clin Infect Dis*. 2002 Dec 15;35(12):1534-40. Epub 2002 Dec 2. IF : 9.374 Cited: 77 Q1
 28. Gervasoni C, **Vaccarezza M**, Ridolfo AL, Moroni M, Galli M. *Pneumocystis carinii* pneumonia after the discontinuation of long-term antiretroviral therapy in an HIV-1-infected pregnant woman. *AIDS*. 2003 Apr 11; 17(6):940-1. IF : 6.407 Cited: 1 Q1
 29. Galli M, Gervasoni C, Ridolfo AL, Trabattoni D, Santambrogio S, **Vaccarezza M**, Meroni L, Trifirò G, Moroni M, Norbiato G, Clerici M. Cytokine production in women with antiretroviral treatment-associated breast fat accumulation and limb wasting. *AIDS*. 2003 Apr;17 Suppl 1:S155-61. IF : 6.407 Cited: 18 Q1
 30. Galli M, Ridolfo AL, Adorni F, Cappelletti A, Morelli P, Massetto B, Piazza M, Gianelli E, **Vaccarezza M**, Gervasoni C, Moroni M. Correlates of risk of adipose tissue alterations and their modifications over time in HIV-1-infected women treated with antiretroviral therapy. *Antivir Ther*. 2003 Aug; 8(4):347-54. IF : 3.807 Cited: 20 Q1

31. Gervasoni C, Ridolfo AL, **Vaccarezza M**, Fedeli P, Morelli P, Rovati L, Galli M. Long-term efficacy of the surgical treatment of buffalo hump in patients continuing antiretroviral therapy. *AIDS*. 2004 Feb 20; 18(3):574-6. IF : 6.407 Cited: 25 Q1
32. Mirandola P, Ponti C, Gobbi G, Sponzilli I, **Vaccarezza M**, Cocco L, Zauli G, Secchiero P, Manzoli FA, Vitale M. Activated human NK and CD8+ T cells express both TNF-related apoptosis-inducing ligand (TRAIL) and TRAIL receptors but are resistant to TRAIL-mediated cytotoxicity. *Blood*. 2004 Oct 15; 104(8):2418-24. Epub 2004 Jun 17. IF : 9.030 Cited: 191 Q1
33. Secchiero P, **Vaccarezza M**, Gonelli A, Zauli G. TNF-related apoptosis-inducing ligand (TRAIL): a potential candidate for combined treatment of hematological malignancies. *Curr Pharm Des*. 2004;10(29):3673-81. IF : 2.412 Cited: 59 Q1
34. Nicolin V, Ponti C, Narducci P, Grill V, Bortul R, Zweyer M, **Vaccarezza M**, Zauli G. Different levels of the neuronal nitric oxide synthase isoform modulate the rate of osteoclastic differentiation of TIB-71 and CRL-2278 RAW 264.7 murine cell clones. *Anat Rec A Discov Mol Cell Evol Biol*. 2005 Oct; 286(2):945-54. IF : 1.343 Cited: 14 Q1
35. Ortu M, **Vaccarezza M**, Trovati S, Galli M, Gervasoni C, Vella A. A martial arts injury: karate induced unilateral haematoma of the adrenal gland. *Br J Sports Med*. 2006 Aug;40(8):730-1; discussion 731. Epub 2006 May 24. IF : 3.668 Cited: 10 Q1
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NON-PEER REVIEWED**Letter**

Abbadessa G, Accolla R, Aiuti F, Albin A, Aldovini A, Alfano M, Antonelli G, Bartholomew C, Bentwich Z, Bertazzoni U, Berzofsky JA, Biberfeld P, Boeri E, Buonaguro L, Buonaguro FM, Bukrinsky M, Burny A, Caruso A, Cassol S, Chandra P, Ceccherini-Nelli L, Chieco-Bianchi L, Clerici M, Colombini-Hatch S, de Giuli Morghen C, de Maria A, de Rossi A, Dierich M, Della-Favera R, Dolei A, Douek D, Erfle V, Felber B, Fiorentini S, Franchini G, Gershoni JM, Gotch F, Green P, Greene WC, Hall W, Haseltine W, Jacobson S, Kallings LO, Kalyanaraman VS, Katinger H, Khalili K, Klein G, Klein E, Klotman M, Klotman P, Kotler M, Kurth R, Lafeuillade A, La Placa M, Lewis J, Lillo F, Lisziewicz J, Lomonico A, Lopalco L, Lori F, Lusso P, Macchi B, Malim M, Margolis L, Markham PD, McClure M, Miller N, Mingari MC, Moretta L, Noonan D, O'Brien S, Okamoto T, Pal R, Palese P, Panet A, Pantaleo G, Pavlakis G, Pistello M, Plotkin S, Poli G, Pomerantz R, Radaelli A, Robert-Guroff M, Roederer M, Sarngadharan MG, Schols D, Secchiero P, Shearer G, Siccardi A, Stevenson M, Svoboda J, Tartaglia J, Torelli G, Tornesello ML, Tschachler E, **Vaccarezza M**, Vallbracht A, Van Lunzen J, Varnier O, Vicenzi E, von Melchner H, Witz I, Zagury D, Zagury JF, Zauli G, Zipeto D. *Unsung hero Robert C. Gallo. Science. 2009 Jan 9; 323(5911):206-7.[letter]*

MAURO VACCAREZZA, MD PhD FHEA

TEACHING PORTFOLIO (December 2020)

Part I - Teaching Philosophy

I teach Anatomy to make a difference.

I want to make a difference to the students who choose a medical/health oriented career path.

As a medical student myself, and later as a practicing physician, it became clear to me the importance of having a thorough understanding of the human body with not only, for example, the location of a ligament but how it works to stabilize a joint, what other tissues might be close by to it and what happens if it is damaged both in the context of simple biomechanics and of a real, moving person, or to have in mind a clear path of vascular supply of a given organ or region.

I want them to take away from my lectures a true knowledge and appreciation of the human body. In their careers, those students would accurately diagnose a complex musculoskeletal dysfunction without an MRI; correct a worker's ergonomics to prevent an injury; guide a client with osteoporosis in yoga so that they maintain their health without risk of fracture; or even identify the early onset of a chronic disease in their routine assessments.

I ultimately feel responsible for instilling the importance of thoroughly learning the foundational science of Anatomy.

1. Teaching Philosophy and Goals

I base my teaching on the belief that the best way to learn Human Anatomy is to apply anatomy in everyday life, in health and disease.

Although Anatomy is generally grouped under the conceptual arena of a "Basic Science", I believe it to be one of the most unique topics to teach as it is one of the only sciences which involve physical material that you must explore with multiple senses (touch, sight, listening) to truly master. In order to teach this content area with efficacy, you must quickly move beyond merely 'facts' and find ways of engaging students to make the learning meaningful, and thus successful.

Throughout my years as a tutor, teacher, lecturer, researcher and ultimately a course coordinator, my approach to achieve meaningful learning has been underscored with three

main tenets:

- 1) Make anatomy *interesting*
- 2) Make anatomy *relevant*
- 3) Teach how to learn anatomy *comprehensively*.

Some might argue that this is not always possible when faced with the task of teaching the name, location and purpose of every muscle, nerve, vessel, organ and layer of tissue in the body in a semester or two. I disagree. In my opinion, it is the best way to teach this generation of learners. According to research, the learners of “Generation Me” have been characterized as highly intelligent, somewhat narcissistic and entitled, less likely to read texts at length, more likely to respond to short multimedia stimuli, attached to their computer world and having the desire to learn by doing...not just being told.

I have personally observed the shift of the students’ needs over the past decade, and this emerging research has enhanced my confidence.

Making Anatomy Interesting:

For many years I have worked hard to incorporate aspects of my lecturing/teaching to address multiple learning styles. I provide succinct, written notes prior to class usually with associated reading from the text (should they want to peruse prior to the lecture). Within the notes, I include diagrams, photos and pictures from both their text and other sources so that they have a number of views of the same structure.

I utilize **Power point slides**, [videos](#), [animations](#) and physical demonstrations throughout my lectures to illustrate complex concepts, or to bring perspective to structures in regions difficult to visualize. I often [use 3D digital models \(from Biodigital Human, Visible Body, Anatomedia and Primal Pictures and Biomedica CDs\)](#) to bring to the lecture and lab which helps in appreciating content which is often presented in word or 2D picture format. Joining the Australian academic arena was pivotal in using 3D “real” models (either plastic, wet or plastinated) and in the past two years, students have consistently **commented on how helpful these models** are during the learning process. With the advent of sophisticated technology available, I have been able to connect with programs and resources to develop even more dynamic models for my teaching in the future.

Having taught anatomy for more than 15 years, I have a very good idea of which particular topics are likely to be more difficult to master than others. Hence, I have built up a number

of online resources, usually from university or trusted academic sources which provide additional ways for students to learn, review and quiz themselves. In recent years, I have taken to reviewing electronic **'apps' and software** for their usefulness and accuracy so that I can make intelligent recommendations to students, as they are more likely to utilize these on their tablets, laptops and phones than to refer to a text.

I like encouraging students to answer their peers' questions before I provide my answer and other times it is a formal portion of the curriculum) which is assigned a small mark value. Often these presentations result in students following my lead and creating their own models and schematics which in some cases are so good I have asked to keep them to help with future teaching.

Making Anatomy Relevant

In my opinion, making anatomy relevant is what I find the most natural aspect of my teaching and the most rewarding. As I have had many years of medical activity and clinical research and I was assigned in Italy to a Human Movement Science program at the beginning of my career, these two realms provide more than ample fodder for bringing up examples from either clinical scenarios or sports & exercise related to anatomy. There is not one lecture that I have ever given which hasn't included at least one story from my clinical practice or from input of the medical practice and literature, injuries related to sports or examples from workouts in the gym to 'bring to life' the anatomy, so to speak. I often specifically mention what I call "exercise & clinical myths", usually with the musculoskeletal content to relate it to their own lives. For example, I might challenge them to consider whether reverse crunches are necessary to strengthen the 'lower' abdominals or whether or not rolling on a foam roller can really 'stretch' the ilio-tibial band.

I also explain those conditions that students have heard of within the context of the appropriate lecture such as 'sciatica', 'water on the knee', 'twisted ankle', etc., and routinely ask students to share if they know of someone that have these conditions and encourage their related questions. Often this sparks more inquiries from the students during (or after) the lecture regarding exercise routines, personal injuries or the 'I was wondering about...' type of questions. It makes the lecture material suddenly more interactive and memorable.

Teaching Students to Learn Comprehensively

Whether I stand before a group of undergraduates or a professional program cohort, I know that I am the one that is responsible for not only guiding them through the complicated new 'language' of this science but learning the skills of handling the human tissue and retaining complex information.

I strive to teach anatomy with the expectation that students don't merely memorize the content but have the knowledge retained (at least some of it) and understand how it provides the foundational underpinnings for problem solving in the exercise and health care fields.

Over the years, I have realized that students who are more successful in learning the Anatomy content are those that bring material together comprehensively, rather than rote memorizing. As a result I have adapted my instructional methods from simply teaching the content to teaching students study skills and how to *learn* the content.

My premise of comprehensive learning and studying relies on using more than their 'typical' study approach in many cases and often I offer to meet with them individually to tailor their needs. Several times throughout the term, I remind the class how essential it is to do a considerable amount of memorization and then review with a comprehensive approach. This typically means layering on visual learning (taking the time to look at the structure in multiple views in a text, animation or lab) in conjunction with a verbal or written review of everything they know about that structure including anatomical relationships to nearby structures. Next they should review function and the related 'dysfunction' whenever applicable. I try to provide examples of this approach in each lecture but usually demonstrate this best in my review lectures when I teach, for example, "**Summarize everything you learned over the past month in 20 minutes**". It is my consistent mantra to the students that "you need to know what it [the structure in question] is, what makes it work, where it is located, what it does and what happens when it is broken!"

To ensure that the comprehensive learning that I encourage is in line with exams, I ensure that evaluation components reinforces this teaching & learning approach. For example, in the bell ringer 50-60% of the questions will be the straight out 'identify' the structure pinned; 30-40% will be what I term "applied identify" (what is the function, innervation of the structure pinned or what is superior to it etc.,) and the final 10-20% will be of the nature of what happens if this structure is damaged.

One of my favourite quotes about teaching is: "*I like a teacher who gives you something to take home to think about besides homework.*" (Tomlin). A few years ago a student came up to me after class in a sling and said that he hurt his arm skiing. Despite this clearly being not an ideal event, he had the biggest smile on his face and he said: "You know Prof. Vaccarezza, when I got to the emergency and the doctor started to check me out, I already knew what was broken and once we got the x-ray back, he agreed with me! It was so cool!" These are the moments I know that my teaching is giving students something more to take home than homework.

Part II - Teaching Overview: Courses, Roles & Responsibilities

Curtin University

July 2015 –December 2021

School of Pharmacy and Biomedical Sciences (now Curtin Medical School), Bentley Campus

Senior Lecturer full time fixed term (C6), Anatomy and Cell Biology

Anatomy of the Trunk (70-80 students)

Integrated Systems Anatomy and Physiology (140 students)

Human Structure and Function (250 students)

Functional Anatomy (S2 2015 only, 60 students)

Anatomy Techniques (50 students)

Medical Anatomy (30-60 students)

Curtin Medical School (60/70/80/90 students, Year 2 of the Curriculum 2018, 2019, 2020 and 2021; 2 Seminars and 1 Tutorial for Year 3, 2019, 2020 and 2021)

From July 2016 (in addition to the aforementioned Units)-present
Pathophysiology (U.C., 35-40 students)

Clinical Immunology (40-60 students) (1 Lecture, S1 2017-2021)

Foundation of Immunobiology (80 students) (1 Lecture, S2 2016-2019)

Foundations for Professional Health Practice (50 students) (S1 2020)

Environmental Physiology (heavy practical training and duties for students) (36 students, S2 2021)

School of Population Health, Bentley Campus

Pathophysiology for Dietetics [Master Course] (35 students) (S1 2021)

Overall teaching load at Curtin (from Semester 2, 2016 to S2, 2019): average 18hrs/week

**University of Queensland
2015**

February 2015 - June

School of Biomedical Sciences, Santa Lucia Campus (MEDI7111, BIOM3002)

Lecturer full time fixed term, Anatomy and Cell Biology

Dissection modules for MEDI7111 (480 students), Dissection modules and lectures for BIOMED 3002 (250 students), RACS Advanced Surgical Anatomy Course (15 Students)

**Queensland University of Technology
2014**

March 2014 – November

School of Biomedical Sciences, Faculty of Health, Gardens Point Campus - (LQB389, LQB390)

Casual Tutoring Regional Anatomy (Medical Radiology and Radiotherapy)

Two modules of 16 hours each in the first semester and in the second semester (teaching and tutoring at the Anatomy Facility of QUT- School of Biomedical Sciences- Gardens Point Campus, each two hours session with 40-50 students, total 64 hours)

**University of Queensland
2015**

May 2013 – January

School of Biomedical Sciences, Santa Lucia Campus - (MEDI1011, MEDI2011, MEDI1012, MEDI2012, BIOM3002, BIOM2020)

Casual Teaching/Tutoring Anatomy and Histology

Over 300 hours of teaching and tutoring to graduate (I and II year Medical Students, 75%) and undergraduate students (Biomedical Science students, 25%)

(always at the UQ Gross Anatomy Facility or the Histology Facility, each session two hours with 40-60 students)

**University of Cassino & Sapienza University of Rome March 2005 –
January 2015**

*Faculty of Human Movement Sciences and Physical Activity
Nursing School and Physiotherapy School*

Associate Professor of Human Anatomy and Cell Biology

University of Cassino

Human Movement Degree (Three –years program, 180 students) and HM Graduation
Magistralis (admission after Degree graduation) (Two-years program, 55 students)

Three-years program (Graduation): 1 full year course of Anatomy (roughly 90 hours of
teaching activity, 40 lectures + seminars)

Two year program (Graduation Magistralis): 6 months course of Anatomy applied to
Biomechanics and Metabolism (30 hours of teaching activity, Lectures + seminars)

Sapienza University of Rome Cassino Campus

Nursing (Three-years program, 60 students), Physiotherapy (Three-years program, 25
students)

Nursing: Six months Anatomy & Histology course (50 hours, 25 lectures)

Physiotherapy: Six months Anatomy Course (50 hours, 25 lectures)

University of Ferrara

November 2009 – July 2010

School of Pharmacy

Sessional Professor of Human Anatomy

Pharmacy Degree (Three-years program, 120 students)

Six months Anatomy and Histology course (50 hours, 25 lectures)

I was responsible for the development of the content and coordinator of my courses in Italy. Programs and lectures were moderately tailored for the different kind of courses (i.e. particular attention to skin and various accesses for the nursing course, special attention for the peripheral nervous system and detailed innervation for physiotherapy course).

Evaluation tests were performed for all the courses with written exams (multi-choice questions, open questions, identification of parts in specimen pictures) and oral exams. I implemented a middle term check-point to assess preparation (not counting for the final marking): it was very useful and popular among students.

I was available at the end of the lessons as well as in my office for questions as well as clarifications. I usually arranged small group meetings or single students meetings when requested.

At Curtin University I am involved in a continuous review process of our Unit contents. My contribution to content preparation, delivery and assessment has increased sharply at Curtin since 2016.

Despite the lack of tradition in Italy regarding teaching awards and teaching skills development, in the past ten years even the Italian Academy uses student evaluation to measure teaching and learning quality. My students were always very satisfied (over 85/90%): the same trend is recurring in my experience here in Australia. The overall evaluation at Curtin University is following the same trend.

TEACHING EVALUATION

From UQ:

Sample comments from under-graduate and graduate students:

"Excellent lecturer! Very clear, concise, well prepared. Very thorough coverage of the topic - I learned a lot!"

"The instructor taught very well and clearly. He always gave us lots of homework. But now that the term is going to end, I think I learned the material very well."

"Even though I found the course material very difficult and sometimes tedious, Dr. Vaccarezza's enthusiasm made the course very enjoyable. I felt a camaraderie in the class which made it fun and interesting. Dr. Vaccarezza was very helpful and always available outside of class, and I think most students took advantage of this. He was always well-prepared and I'm extremely amazed at his knowledge and level of understanding of this material."

"I learned an extraordinary amount and found the class rewarding and worthwhile...On the whole, I really liked the course, and I applaud the rewrite opportunities - they are very instructive...I think you teach very well - your presentation is clear, direct, and not hard to follow."

Last teaching evaluations (from Curtin Evaluate site, 2018-2020)

From Human Structure and Function (HSF)

"You have so much knowledge in each area of study."

"Loud and boisterous making learning fun and interesting. Interacts with the class getting the class to participate and answer questions, an effective way to learn and retain knowledge"

"You have a wealth of knowledge and are very enthusiastic"

"Mauro was enthusiastic in his approach to the subject."

"Friendly and approachable. Keeps demonstrations engaging and interesting. "I think he is very knowledgeable but learning load covered in workshop is a lot."

From Integrated Systems Anatomy and Physiology (ISAP)

"Seems to have knowledgeable in the unit and explain well. Willing repeat if a student does not understand."

"Very passionate about his subjects, a very, very smart man with a great deal of knowledge to pass onto his units. Gives good explanations when in a small group (1-5) environment"

"Mauro is very approachable and is very keen in teaching students. He also demonstrates the activities so that students can visualize/experience the activity effectively. He also dedicates his time to motivate and encourage students to arrive to the answer themselves without spoon-feeding the direct answer."

"You always explained everything in simple terms which made it easier to understand."

“Seems very enthusiastic on teaching anatomy and motivated to help us learn”

“BEST Teacher EVER! COFFEE FOR EVERYONE Dedicated Motivated enthusiastic Funny Knowledgeable Knows how to control his class (some people can be noisy) but he knows how to make everyone pay attention Most lecturers should follow his example as a teacher so all units would be fun to attend”

“Mauro is very enthusiastic and knowledgeable in this unit, I felt that he did the best that he could with the class he had as not many of the other students were willing to help him in tasks that required class participation. “

“Mauro is very passionate, his booming voice and style of communication certainly captured my attention. He also had fabulous sayings, interesting anecdotes and some hilarious pronunciation. Whilst his accent is very thick, I found him easy to understand and I found his class very engaging. He was also very supportive and encouraging. Thanks Mauro - PS you owe me about 23 coffees!”

“Comical, really knowledgeable and knows how to captivate students”.

“Mauro!! Such a thick accent that I can't understand at times hahaha. However, you are so enthusiastic about this unit and always bring a fun vibe to the labs. You always have a joke with us boys and explain the parts we don't understand until we are clear with the concept it. Thanks for explaining coeliac trunk, superior and inferior mesenteric to us because that came up in the exam.”

“Nothing to improve on, just keep being funny and inserting your Italian vibe to teaching. Love how you refer to fertilisation as the 'magic encounter.' That was the highlight of the semester. P.S. you owe us all approximately 4 coffees from the whole semester you kept saying 'Coffee for everyone.' Hahaha Thank you legend! All the best”

“I was very impressed by the knowledge and the enthusiasm of Mauro Vaccarezza and I hope to encounter more teachers like him during my studies at Curtin University.”

“Great teacher, very enthusiastic.”

“Mauro worked hard to make the grim reality of learning anatomy through a computer screen as fun and joyous as possible. He is a wonderful teacher, and deserves all the praise possible”

From Anatomical Techniques

“Dr. Vaccarezza is loud and distinctly passionate, very useful, because it helps keep tired 10am students awake during his brilliant lectures. He is knowledgeable and entertaining. I look forward to his 3rd Year 2nd Semester unit.”

“Clearly very passionate and knowledgeable in the areas he taught. Very approachable outside of the lecture time and explained things clearly in the lectures he gave. “

From Medical Anatomy

“I really liked Mauro's teaching style, in which he informs us of the surface anatomy structures and then allowed us time to practice on each other, which was useful for the surface anatomy assessment. Mauro was also very approachable and could answer any questions we had about the content.”

From Pathophysiology

“Very friendly and approachable. Makes the classes a friendly environment and engages well with the students and tries to understand what we might find difficult and helps us learn. The lectures are always very interesting and engaging.”

“Mauro is always energetic, engaging and makes students look forward to classes. Thanks Mauro”

“Loved this unit and loved your enthusiasm. You genuinely care about how well we do and that made it easy to ask you questions”

“It is hard not to be engaged when Mauro is so enthusiastic. It really helped to learn the content and understand difficult concepts. His friendly nature made him easy to approach when help was needed.”

“Mauro has been great to learn from. He is passionate in what he teaches and it is clear that he genuinely cares about his students' progression in learning. He is an endearing teacher because of his ability to combine his personal experiences with his academic experiences. This humanistic way of teaching not only helps students understand the content better, but also remind us of the practical significance of what is taught in lectures and workshops.”

“No comment, he's a legend.”

“Mauro is a great teacher, he is very knowledgeable and his teaching style is very charismatic and makes you feel eager to learn.”

“The man is a scientist, through and through. Clearly passionate about his topics, encourages further reading. Treats students like they're as passionate about pathophysiology as he is”

“Mauro is super engaged, involved and well versed in knowledge about the subject.”

“Cares about student learning. Clarifies concepts when unclear.”

“He is very enthusiastic about the unit, he is very knowledgeable and likes sharing that knowledge with his students. The best part of the unit was how it's clear that Mauro wants his students to do well, which makes us work harder to live up to that. It's really nice feeling like the teacher wants you to succeed instead of trying to find ways to mark you down.”

“The unit information was well thought out and easy to understand, and the information was always presented in an enthusiastic way.”

“Mauro is absurdly passionate about his students' learning and wellbeing. His unit has explicitly clear objectives, it is easy to see what is important. Mauro's unit runs like clockwork, we are notified of every upload, he gives real time feedback quizzes that are reflective of the assessments he gives. I cannot compliment his teaching style enough.”

“The tutorials were very helpful as they provided an opportunity to ask questions and discuss cases.”

From Medicine

Lucie Norman (Medicine Year 2 Coordinator)

2020

“Hi Mauro,

Thanks for your message. I wanted to tell you the students have said that the preparation and documents you uploaded for them were fantastic. They have been very appreciative of the extra work involved in moving online for you.

You have done a fantastic job.

Hope next year is a little easier.

Come over for a coffee when you have a spare moment.

Kind regards

Lucie”

2019

“Dear Mauro,

I am sure you are looking forward to a well-earned break at the end of the year. We would like to thank you for the time and effort you have put into teaching the students. The feedback is very positive and students very much enjoy the lectures and labs. The resources have provided inspiration for assessment items through the year. Next year in 2020 we have changed the order of the PBL cases to improve learning so the schedule looks a little different. (...)”

From Prof. Archie Clements, PVC Health Sciences

From: Health Sciences - PVC Office <PVCOffice@health.curtin.edu.au>

Sent: Tuesday, 25 August 2020 3:54 PM

To: Hlth-AllStaff <Hlth-AllStaff@curtin.edu.au>

Subject: **2021 Good Universities Guide**

Dear all

Some of you will already know that the 2021 Good Universities Guide data has just been released. The GUG is one of the few ranking exercises that focusses on teaching, and I am delighted to tell you that the Faculty has performed extremely well.

For the second year, Curtin Medical School is number one in the country for overall experience, teaching quality, learner engagement and learning resources. I particularly congratulate all the School's staff on repeating this wonderful achievement.

(...)

My congratulations to all those staff concerned.

This has been a challenging year. I encourage you to share this good news story with one another, and also of course during the forthcoming Open Day.

In the meantime, a full set of results is available from <https://www.gooduniversitiesguide.com.au/university-ratings-rankings>.

With best wishes

Archie

Professor Archie Clements

Pro Vice-Chancellor

Faculty of Health Sciences

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DIGITAL RESOURCES

One of the most common questions students now ask is "What kind of online resources can help me study/memorize/review/learn anatomy better?" To be honest, I cannot possibly now keep up with the growing marketplace of phone/tablet apps in particular but I do try to take a look at emerging software or popular apps every couple of months so that I can provide appropriate suggestions.

What I have determined is that the use of a software download or app (or a CD/DVD, i.e. Primal Pictures) will be useful for students in the following ways:

- 1) if they include high level examples of material that we are covering (e.g. [Blue Histology website](#))
- 2) if they have 3D animations which demonstrate hard to envision actions (e.g. [Virtual Cardiac Valves](#) or [Anatomy Expert, Complete Anatomy](#) by 3D4 Medical) or can be manipulated by the user (e.g. [The Whole Brain](#))
- 3) if they include a number of types of quizzes (e.g. [The Quiz Bowl](#)) or practice bell ringer style questions (e.g. [Human Anatomy](#))
- 4) if they have either a Mac or iPhone/iPad interface (e.g. [Nova Muscle Pro](#), [Complete Anatomy](#) by 3D4Medical)
- 5) if they can download it for PC, Mac or smartphone using different programs such Mozilla and /or Google Chrome (e.g. [Visible Body 3D](#), Bio-digital Human)
- 6) if they can replace their atlas and go paperless through an iPad (I introduced [Inklings](#) to UQ students - a free app which allows purchase and extended use of selected anatomy atlases-. This is of GREAT value and now very popular among UQ students).
- 7) If they are free! (E.g. apps for tablets/smartphone like: Brainview, some of the Nova series, etc)

We are also trying to monitor students and staff use of our digital resources here at Curtin (Anatomy TV, Net-Anatomy and Acland Atlas of Anatomy) to have a case for an eventual upgrade with new digital tools such as ANATOMEDIA (www.anatopedia.com, [available as an internet resource and completed in 2017](#)) based also on use trends and financial considerations. The final decision was to cease Anatomy TV and to buy a Licence for ANATOMEDIA in Jan 2019, with substantial positive feedback (2019 ANATOMEDIA users: 29000, versus more than 6000 for Net Anatomy and Acland Atlas of Anatomy).

RECENT DEVELOPMENTS.

Feeling fortunate to be in the Australian academic “pabulum” the primary goal is to continue to develop and mix traditional teaching approaches (lectures, dissection, gross anatomy) with innovative approaches such as 3D printing, Anatomage, Google Glass, Neuro-Sim reconstruction software, SoftAnatomy wearing, VR devices.

Integration of the curricula (horizontally and vertically) will be also an important approach to optimize delivery of anatomy knowledge and improved learning with an eye to clinical everyday real-life professional activities.

I was able to start at Curtin University an educational research program that was based on the assessment of knowledge of Latin and Greek language and its influence on anatomy learning and a second program based on the availability of 3D printed material derived from human CT scans (that we obtained by the Curtin Medical School under my supervision) and the learning experience of our undergraduate students. A pilot study comparing wet, plastinated and 3D printed specimens was implemented. Both studies were recently presented at the WAND Learning and Teaching Forum 2017 in Perth (https://www.wand.edu.au/Media/Default/Docs/TLF_program_web.pdf, p. 32 and p. 59).

A paper related to our studies has been published (Garas M, Vaccarezza M, Newland G, McVay-Doornbusch K, Hasani J. 3D-Printed specimens as a valuable tool in anatomy education: A pilot study. *Ann Anat.* 2018 Jun 6;219:57-64. doi: 10.1016/j.aanat.2018.05.006.)

In January 2018 I started my Peer Review of Educational Practice under the supervision of A/Prof. Lynne Roberts. This procedure is aimed to further develop and improve my teaching and to review my teaching material and teaching activities: the Formative Part have been run successfully in Semester 1 2018 and the Summative Part has been conducted by Semester 2 2018.

In 2019, after completing the Peer Review of Professional Practice I was able to apply to the Fellowship of the Higher Education Academy. My application was successful (attached documents)

In S1 2020, I became familiar with Blackboard Collaborate/Collaborate Ultra and several programs such as Webex, Zoom, Skype, Microsoft Teams and GoToMeeting, due to the need of online teaching delivery after the COVID 19 pandemic. Preliminary feedback from our students is very positive, keeping in mind the limitations of such delivery methods.

I am quite confident that this approach coupled with an eye to every day real life and to clinical problems is an ideal and reasonable path to continue to succeed as an anatomy and biomedical sciences teacher.