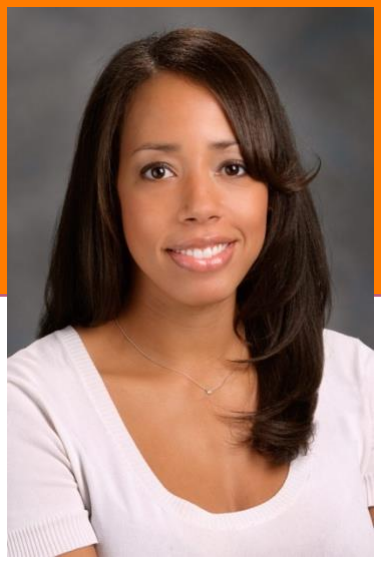

Chelsea Pinnix, MD-PhD, Upon completion of the combined degree program at the University of Pennsylvania, Dr. Pinnix embarked on residency training in Radiation Oncology at the University of Texas MD Anderson Cancer Center. Being at MD Anderson was the logical progression in her professional research and clinical development given that it encourages research at the post-doctoral level while offering the insight that can only be gleaned through clinical interactions. Radiation oncology is an ever evolving specialty. The unanswered questions continue to compound. Clinical scientists continue to observe superior survival of patients treated with combined chemotherapy and radiation approaches, yet the mechanisms behind this synergistic therapeutic approach are not fully understood. The pursuit of technical advancement continues as investigators seek novel ways to improve patient outcomes. Moreover, radiobiologists also have intense interest in identifying approaches to minimize treatment related side effects. As multi-modality approaches to cancer continue to improve patient outcomes, limiting treatment related morbidity is essential. This is especially true in the treatment of young patients with radiation therapy. Dr. Pinnix joined the faculty in the division of Radiation Oncology at MD Anderson Cancer Center in July of 2012. Her clinical and research interests lie in improving the outcomes of patients with lymphoma. Dr. Pinnix's ultimate aspiration is to advance the clinical outcomes of patients afflicted with Hodgkin’s and Non-Hodgkin’s Lymphoma via the minimization of normal tissue toxicity related to radiotherapy. Another interest lies in the identification of improved treatment strategies that incorporate radiation in the management of aggressive and refractory lymphomas. She intends to contribute to the growing body of literature in the field of radiation oncology with the ultimate goal of influencing the standard of care as well as the prevention and management of long term treatment related toxicity.