

K. Krishnan Unni

David C. Dahlin, M.D.



Dr. David C. Dahlin died on Friday 12 September 2003, at St. Mary's Hospital, Rochester, Minnesota, at the age of 86, following a brief illness.

Dr. Dahlin was born in a small town in South Dakota. He completed his premedical studies at the University of South Dakota and was admitted to Rush Medical School in Chicago at the age of 21. He helped pay his way

through medical school by washing dishes at the YMCA for 30¢ an hour. Having grown up during the Depression, he was accustomed to hardship and had learned to get by with little. Upon graduation, he completed a 1-year rotating internship and 1 year of residency in pathology at Anker Hospital in St. Paul. Dr. Dahlin was accepted for training in surgery at Mayo Clinic, but before he could begin, he was drafted into the Army Medical Corps. He spent 3 years in Bari, Italy, as a flight surgeon during World War II. This led to his abiding interest in the history of World War II and to many stories about his experiences in Italy.

At the end of the war, he joined the Mayo residency program for which he had already been accepted. His first rotation was in surgical pathology in the frozen-section laboratory at St. Mary's Hospital. Here, he came under the influence of Dr. Malcolm Dockerty, whose enthusiasm for surgical pathology was infectious. Dr. Dahlin switched to pathology and joined the Mayo pathology staff in 1948. Both Drs. Dockerty and Dahlin had their offices in the frozen-section laboratory area at St. Mary's Hospital. Dr. Dahlin claimed that he saw all the interesting cases that came through the frozen-section laboratory during the 35 years he worked there. He was justifiably proud of being a general surgical pathologist who could diagnosis gliomas just as easily as he could carcinoma of the pancreas.

Some of the orthopedic surgeons at Mayo Clinic had developed an interest and expertise in bone tumors. There were excellent clinical records, and most of the gross specimens were saved in Tissue Registry. Dr. Dahlin made an intensive study of all the bone tumors diagnosed at Mayo Clinic. He was able to obtain additional sections from the gross specimens. He kept track of all these tumors by entering the data on 4×6 index cards, which were filed in order of the Mayo Clinic registration number. The information was also filed in notebooks, which were tabulated by the diagnoses. This was an incredibly simple and effective method of keeping track

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of cases. These studies resulted in Dr. Dahlin's book on bone tumors that was published in 1957. The book was an example of clarity and brevity. The skeletal chart, providing the patient's age and the skeletal distribution of all bone lesions, was Dahlin's brainchild. His recognition of the fact that information about the age and site of involvement were of critical importance in diagnosing bone tumors was genius.

The publication of the book and his other writings on bone tumors led to visiting lectureships throughout the world. From around the world, Dr. Dahlin's opinion was sought on all the difficult bone tumor problems. He kept track of all the consultation cases with index cards and continually reviewed them. This constant self-education resulted in the discovery of many new entities.

Dr. Dahlin received numerous honors, including the first gold medal of the International Skeletal Society, the Distinguished Pathologist Award from the USCAP, the Distinguished Alumnus Award from Mayo Clinic, and an honorary degree from the University of Gothenburg, Sweden. He was the first medical doctor inducted into the South Dakota Hall of Fame. In spite of all the honors and

accolades, he retained what Dr. Franco Bertoni termed "a powerful humility." He was the best of mentors by allowing others freedom to grow. He genuinely did not care about who got the credit as long as the work was done or the paper published.

Dr. Dahlin was a hard taskmaster. Loving hard work, he expected the same from others. He had a great sense of humor, and all residents expected to be at the receiving end in his conferences—but residents loved him because he was without malice.

What is the legacy that Dr. Dahlin leaves? His pragmatic approach to problem-solving in surgical pathology. (Although he kept up with the literature even after he retired, he was suspicious of many new techniques. He felt that overdependence on ancillary techniques led to wasted resources.) His ability to acknowledge mistakes. His love of the profession to which he contributed so much. I consider myself extremely fortunate to have had a long association with Dave Dahlin—a great general surgical pathologist with bone tumors as a hobby.