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COM Outlook Spring 2013

College of Osteopathic Medicine

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COM Outlook Spring 2013

Nova Southeastern University College of Osteopathic Medicine

EASING SUFFERING

***Institute for Neuro-
Immune Medicine Aims to
Transform People's Lives***



Dean's Message

By Anthony J. Silvagni, D.O., Pharm.D., M.Sc., FACOPF dist.

The recent town hall meetings, led by NSU President George L. Hanbury II, Ph.D., are a meaningful experience and an opportunity to contribute to Nova Southeastern University's growth and success. In February, the town hall meeting held with the Health Professions Division was most uplifting and offered promise for the future because Dr. Hanbury has created an atmosphere of fairness coupled with a willingness to develop a system to further enhance the activities and goals of NSU.

Dr. Hanbury's lively discussion outlined the path to achieve the goals he believes will make NSU a true academic and community leader. At first, he shared his Vision 2020 strategic plan, which states that excellence and innovations will make NSU a premier university of quality and distinction. He then reviewed the university's updated mission statement, which is as follows:

The Mission of Nova Southeastern University, a private, not-for-profit institution, is to offer a diverse array of innovative academic programs that complement on-campus educational opportunities and resources with accessible distance learning programs to foster academic excellence, intellectual inquiry, leadership, research, and commitment to community through engagement of students and faculty members in a dynamic, lifelong learning environment.

Prior to beginning the open forum, Dr. Hanbury also discussed NSU's core values, which are the foundation for building NSU's success and featured below:

- Academic Excellence -
- Student Centered -
- Integrity -
- Innovation -
- Opportunity -
- Scholarship/Research -
- Diversity -
- Community -

During the interactive gathering, Dr. Hanbury updated attendees on NSU's plans and opened the floor for a candid exchange of ideas and comments. He also was responsible for creating a level of comfort that invited attendees to express the challenges that presented themselves in meeting the key elements of the mission and core values and then exchanged opinions and practices needed to convert any perceived obstacles into strength-based opportunities.

Another discussion highlight was information relative to the long-awaited Center for Collaborative Research. This state-of-the-art cooperative interprofessional center, which will be located adjacent to the HPD parking garage, will serve as the focal point for NSU's medical, pharmaceutical, dental, oceanographic, and other research and is scheduled to break ground within the year. Additional topics addressed ranged from curriculum and grants to technology and community outreach.

From my vantage point, everyone left the town hall meeting feeling more committed and with more optimism than when they entered. Dr. Hanbury and his administration, as well as the administrators and faculty and staff members of NSU-COM, were all actively engaged at the meeting—and we are stronger as a result of that engagement.

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In This Issue - Spring 2013



Neuro-Immune Institute Aims to Ease Suffering 20

In February, NSU-COM held a grand opening ceremony for its Institute for Neuro-Immune Medicine. Celebrants gathered to salute the first-of-its-kind facility that will treat patients with conditions such as chronic fatigue syndrome/myalgic encephalomyelitis (CFS/ME) and Gulf War Illness (GWI), as well as conduct basic and clinical research under one roof in this field.

Alumni to Faculty Members: The Allure of NSU-COM 26

Medical school is generally construed—especially by those students studying within its cozy confines—as a challenging, exhausting, and all-consuming experience. So why then do so many NSU-COM alumni enthusiastically return to the college in the ensuing years to accept faculty positions in the same institution that relentlessly challenged their bodies, brains, and spirits?

Medical Outreach in Jamaica, Peru, and Vietnam 30

In December, the college coordinated medical outreach trips to Jamaica, Peru, and Vietnam that allowed students to treat patients in underserved areas of the world and enhance their cultural horizons in the process.

NSU-COM Alumnus Invents Scrotal Rehabilitative Device 39

2010 alumnus Dr. Matt Stringer has invented a revolutionary new device called the AeroLift® to improve scrotal wound care for soldiers injured during military duty.



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An interesting topic that has been addressed recently during various health care panels I participate in has to do with how we, as a nation, are going to provide for what has been described by various publications, institutes, and foundations as an extreme physician shortage that is

estimated to range anywhere from 25,000 to 40,000 in the near future.

However, beyond the impending physician shortage crisis looms another critical issue that is already impacting both D.O. and M.D. schools throughout the United States: the increasing lack of clinical training sites for third- and fourth-year medical school students. While the creation of new medical schools is a logical step toward increasing the physician pool, it's equally as important for elected policymakers to focus on the education that occurs external of the so-called bricks-and-mortar structures or electronic classrooms involved in a traditional four-year medical education.

I think it's unfortunate that policymakers at both the state and federal level keep talking about the lack of graduate medical education positions and the impending physician shortage without recognizing that the most difficult aspect of educating future physicians involves providing abundant clinical training opportunities during the final two years of medical school.

Traditionally, clinical training has always existed in hospitals, as well as at external clinics and physician offices. Unfortunately, because most of this training occurs in hospital settings, opportunities to provide third- and fourth-year medical students with this vital clinical training are diminishing due to a number of factors.

In my opinion, the actual delivery of health care has become much more efficient over the past few decades thanks to the evolution of minimally invasive procedures and robotic surgeries that dramatically shorten the length of time patients need to remain in the hospital to recover. But with fewer people having to stay in hospitals for a sustained period of time, there becomes less need for hospital beds.

Consequently, what has resulted is a paradoxical situation where there is an increasing need for clinical training sites for medical students combined with a diminishing need for hospital beds, which has resulted in fewer hospitals being created. In addition, because patient visits are increasingly being handled on an outpatient basis, medical students are having reduced interaction with both patients and physicians at the hospital level.

This is an imperative discussion topic because practicing physicians are the individuals we rely on to serve as mentors to and trainers for our students during their final two years of medical school. These physicians are pivotal to student training because they also function as our offsite clinical faculty members. Consequently, the

aforementioned issues need to be addressed by our policymakers to avoid a crisis that includes more than just a physician shortage.

With clinical training sites in a state of flux, you have to wonder how U.S. medical schools will continue to effectively train future generations of D.O.s and M.D. as the number of medical schools continues to increase, especially in Florida where the number has burgeoned from four to nine over the past two decades.

Due to the proliferation of medical schools throughout Florida and the southeastern United States, we are also dealing with increased competition for placing our students into the clinical training sites that currently exist. Fortunately, NSU's College of Osteopathic Medicine has established, longstanding, and collaborative partnerships with a vast array of hospitals, medical systems, and physicians' offices throughout the state.

Although NSU-COM is well-positioned in terms of dealing with the clinical training topic, the fact remains that the combination of issues I've just discussed has led to a noticeable shift when it comes to how health care is delivered. For example, in physician shortage areas that currently exist within the United States, other primary health care professionals such as physician assistants and nurse practitioners have stepped in to fill the void.

I believe the days of establishing medical schools and simply assuming they are going to be successful are over, which is why I'm so optimistic about the newly created relationship between the American Osteopathic Association (AOA) and the Accreditation Council for Graduation Medical Education (ACGME). Through this historic agreement, which is expected to take place in July 2015, the AOA and ACGME plan to pursue a single accreditation system for U.S. graduate medical education programs.

As a result of this integrated approach to graduate medical education, I think we're going to see additional attention being paid to addressing the clinical rotation issue. Because of this, I am very optimistic about the future of medical education.



First D.O./D.M.D. Students Set to Graduate

By OMS-IV Amber Hurley Johnson



Randy Rodriguez-Torres and Amber Hurley Johnson

In May 2013, Randy Rodriguez-Torres and I will be the first graduates of the college's D.O./D.M.D. dual-degree program, which was created as a new pathway to address access to care issues and provide care for underserved populations. The curriculum offers students the opportunity to receive both Doctor of Osteopathic Medicine and Doctor of Dental Medicine degrees. Upon completion of their degrees, the students are eligible to apply for licensure in dentistry and for postgraduate medical residency programs. Randy and I became the first D.O./D.M.D. students in August 2007, when we began the curriculum.

The six-year D.O./D.M.D. program combines the medical and dental curriculums, with the first-year curriculum combining both the medical and dental coursework. Program participants are essentially considered first-year dental students but take additional courses with their osteopathic peers, including Introduction to Clinical Medicine and Osteopathic Principles and Practices. Second-year students are primarily OMS-Is, with independent study time in the dental simulation laboratory. Third years are primarily OMS-IIIs and rotate

at hospitals or offices alongside their osteopathic classmates.

As the OMS-III year comes to an end, the program's fourth year launches the dual-degree students' transition back into dental school. Fourth-year students are essentially considered D2s, with a half day of medical clinic per week. Fifth-year students are primarily D3s but also complete core medical rotations, such as rural medicine. Sixth-year students complete remaining requirements for both dental and medical school, including medical electives in the fall semester. The curriculum continues to change and adapt as the curriculums in each school are updated. Randy and I have worked closely with the administration in both schools to improve the program and have it recognized as a separate dual-degree program.

The D.O./D.M.D. program currently has one to three students enrolled in every year of the educational process. Students enter the program after being accepted into either the medical or dental school. Once accepted into either school, the students then apply to become dual-degree students. Currently, a little more than half of the students have come through the dental school.

With the academic year coming to a close, Randy and I are now completing both curriculums and will be moving on to postgraduate training. D.O./D.M.D. students can choose from any medical or dental specialty they are passionate about. When we both began the program, we were very open to the options that lay in front of us. At times, we both considered a variety of different specialties and allowed our rotations and clinical experiences to guide our paths.

I was drawn to the program because I had always been passionate about health care, but had been unsure about which career path to take. I applied through the dental school, but when I heard about the opportunity to pursue both degrees, I took advantage of it. I really saw the program as an opportunity to explore all

of my interests. It is difficult to choose a career with the limited experience most undergraduate students have, and I knew this program would give me a great deal of exposure to all aspects of medicine and health care. I also knew it would make me a more well-rounded clinician.

I have chosen to use my dual degree to pursue a career in oral and maxillofacial surgery (OMFS) and will be heading to Virginia Commonwealth University next year to begin my training in this specialty. I will be one of the nation's first oral and maxillofacial surgeons with a D.O. degree. I think being an oral and maxillofacial surgeon with a D.O. degree will not only make me a better practitioner, but it will also allow me to introduce osteopathic medicine into the OMFS field. Dually trained oral and maxillofacial surgeons typically have M.D. degrees, which they received during or after their residency training. I think having the medical training before I start as an OMFS intern will be extremely beneficial because it will allow me to learn not only from the dental perspective but also as a medical resident.

Randy was initially intrigued by a dual practice model and has continued to be interested in that path. He has chosen to pursue his residency training in internal medicine and is participating in the allopathic match. He hopes to practice both medicine and dentistry—and to one day operate a full-service health center.

The dual-degree program was a great opportunity for us. I am glad I was able to take a new path to oral and maxillofacial surgery and that Randy will be able to pursue his goal of a dually focused practice. Students in this program have so many options for what career and life path they would like to take, which was really the initial appeal for me. This program can be a great fit for many students. I could see it being an asset for those interested in public health and teaching, as well as those interested in rural and underserved medicine.



A Look at Social Media in Medical Education and CME

By OMS-IV Lauren Westafer

"Half of what we are going to teach you is wrong, and half of it is right. Our problem is that we don't know which half is which," said Charles Sidney Burwell, former dean of Harvard Medical School.

As my classmates and I prepare for graduation, I find Dr. Burwell's words frightening. They highlight the gap in medicine between when the best knowledge and evidence become accepted and when that knowledge reaches the bedside. This gap, the *knowledge translation window*, is estimated to be about 10 years. Thus, as we embark on our lives as physicians, my peers and I are already practicing in the past, circa 2003.

Why is this knowledge translation gap so lengthy? Physicians and trainees are busy. It is difficult to maintain the fund of knowledge acquired in medical school, clinical encounters, and journals, let alone build on it. Furthermore, even recent journal articles and eminent textbooks contain old information. The submission, peer-review,

and publication process can take years and lack transparency. Consensus guidelines? It can take hours for a group to agree on a lunch order, let alone medical standards. Thus, guidelines often do not reflect the current best practice.

In addition, much of keeping up in medicine exists in the process of unlearning. It takes decades for the medical community to unlearn a practice. Examples include the use of lidocaine with epinephrine in digits (it's safe), a cross-reactivity of 10 percent between penicillin and cephalosporins (it's 1 or 2 percent), and the notion that ketamine should not be used in head trauma due to increases in intracranial pressure (it's now recommended in these cases).

Continuing medical education (CME) has traditionally filled the role of educating physicians in a longitudinal fashion. Yet, CME often comes at an extraordinary expense because it's outdated, pricey, and inconvenient. Physicians committed to a lifetime of learning pay

hefty fees to attend conferences, access journals, and receive the latest news. We acquiesce to this paradigm because this habit and expectation is established early in training through textbooks and exam-review courses. Our predecessors have established this pattern, but a new path is emerging.

Over the past year, I've become involved in a global movement to mitigate this issue, coined Free Open Access Medical Education (FOAM). The movement, based on the premise that the world is flat with regard to medical education and information, has gained worldwide momentum. FOAM, a new movement for an old concept, works to build and codify available online medical education resources. This growing body of resources includes blogs, podcasts, iTunes University lectures, Google+ Hangouts, text, question banks, grand rounds from residency programs, and Twitter tweets. Don't have time to flip through journals? Many journals produce podcasts, summarizing the issue's key points or exploring an article in depth. Other sources, such as the *Now@NEJM* blog and the Global Medical Education Project, span the spectrum of clinical and basic sciences.

Numerous advantages exist in this form of medical education. Learning is self-directed, allowing an individual to select the subject material as well as the medium for learning (audio, visual, text). The nature of the medium enables anyone to access the information, regardless of location. Rural physicians and community practitioners have the same ability to access and engage in the latest thought and practices as their academic counterparts. Use of applications such as Google+ Hangouts and the Web site <http://nb.mit.edu> encourage virtual journal clubs amongst individuals in different locations. A world-class education is available anywhere as the information is often from content experts, premier lecturers, and top educators. Additionally, many producers of FOAM offer formal CME credits.

FOAM is interactive learning and Twitter is the epicenter. Like many, I had reservations about this medium, thinking it was solely for crazed pop-star fans. Social media has become a dirty phrase in medicine as scandalous stories from inappropriate posts

occasionally dot the headlines of journals and media. Used in a deliberate and professional manner, however, this medium has transformed medical practice around the world. One can virtually attend medical conferences by following conference hashtags. Debates on diagnosis and management arise frequently, with links to PubMed journal articles and texts. Twitter can function as a form of intellectual voyeurism as one can see how other physicians and trainees think, read, or approach a particular clinical situation. Pose a question and someone from around the world is likely to offer an answer or resource within minutes. The only rules? Remember HIPAA and don't put anything online that you wouldn't want on a billboard.

FOAM is not without weaknesses. One must use a discriminating eye to ensure



information is accurate and be wary of mindlessly lapping up an expert's word; yet this is an issue in any classroom or conference hall. FOAM naturally induces open, continuous dialogue, thereby increasingly holding authors accountable for references. Additionally, there exists the danger of information overload. Akin to any lecture, listening is not understanding. However, from the first day of medical school, we hear the refrain, "Medicine is like drinking from a fire hose." FOAM requires fundamental skills of information filtering, appraisal, and processing.

There's something for everyone in the FOAM world. For example, during my first and second year of medical school, I used podcasts to make the basic sciences clinically relevant while justifying my time

at the gym, traveling, and at the beach. As a third-year student, I drew upon blogs, lectures, and podcasts to look well-read and study for Step 2 while commuting. This year, FOAM enabled me to virtually attend and participate in over a dozen international conferences. Active participation using Twitter and creation of a personal learning network through a blog connected me with physicians from around the world and provided me with residency opportunities that seemed unattainable.

For educators, residency programs can create an interactive classroom by recording lectures and creating public online case scenarios to encourage innovation and critical thinking while bolstering the institution's public profile. Community physicians use FOAM to stay updated, practice evidence-based medicine, network, and obtain CME credits. Whether you realize it or not, NSU-COM generates FOAM. Andrew Sloas, D.O. (class of 2001) has a pediatric emergency podcast with an international following, PEM ED, at the forefront of the FOAM movement. NSU-COM's OPP fellows created a podcast called Didactics Online. I dare you to see what FOAM can do for you.

"If you want to know how we practiced medicine 5 years ago – read a textbook

If you want to know how we practiced medicine 2 years ago – read a journal

If you want to know how we practice medicine now – go to a (good) conference

If you want to know how we will practice medicine in the future – use FOAM."

- Dr. Joseph Lex, Temple University -

For more information on FOAM, please visit <http://lifeinthefastlane.com/foam/> <http://lifeinthefastlane.com/2012/09/creating-the-foam-network/>.

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Correctional Medicine Earns Specialty Status Due to NSU-COM Efforts



In January, the college received approval for a new medical specialty—correctional medicine—that was developed at NSU-COM in collaboration with the Florida Department of Corrections. NSU-COM became the first medical school in the country to gain such recognition when the standards

developed by the college for this distinct specialty were approved by the American Osteopathic Association. NSU-COM now has the first accredited and approved correctional medicine fellowship program in the country.

The classification of correctional medicine as a medical specialty is an important milestone because recent statistics show that 7.1 million men and women are under adult correctional supervision, and more than 1.5 million are cared for by physicians who work full time in this challenging environment.

David Thomas, M.D., J.D., professor and chair of the college's Department of Surgery and Division of Correctional Medicine, described the innovation as "very, very rare. The last new specialty I can remember was the creation of emergency medicine in 1976."

NSU-COM established a two-year correctional medicine fellowship in 2010 that offers broad interdisciplinary experience in oncology, radiation therapy, orthopedic surgery, and hospice care and leads to both board certification and a Master of Public Health degree. The program includes inpatient/outpatient supervised clinical experience in acute and chronic settings in jails/prisons, medicolegal experiences and responsibilities, quality management and review, and mortality review and control.

The new correctional medicine specialty represents a milestone in medical treatment. "Correctional health care was looked upon for many years as a last refuge of barely competent practitioners," Dr. Thomas explained. "It is not. It is a complex, intricate field where you are taking care of people, many of whom are very ill, because they have not accessed care outside of the correctional environment—ever. It takes sophisticated doctors with significant training to handle both the illnesses and the unique correctional environment. This is the first step in bringing recognition to the care that correctional doctors provide."

Employee Longevity Honored



On December 17, the college coordinated an employee recognition luncheon to honor those individuals who celebrated noteworthy employee milestones in 2012:

25 Years

Linda Brookins and Elaine Lefkowitz

20 Years

Robin Hofberg and Dr. Stanley Simpson

15 Years

Dr. Paula Anderson-Worts and Nancy May

10 Years

Katherine Campos, Debra Chase, Jason Cohen, Dr. Hilda De Gaetano, Heike Dose, Dr. Gary Hill, Leslie Jones, Gustavo Saldias, and Dr. Bart Whitehead

5 Years

Krista Bartley, Dr. Natasha Bray, Dr. Rebecca Cherner, Sandra Chunulal, Tashera Cruz, Angel Demps, Dr. Marti Echols, Dr. Rogério Faillace, Dr. Tracy Favreau, Yennifer Kusienki, Dr. Heather McCarthy, Dr. John Pellosie, Letitia Plotner, Jennifer Silva, and Valdo Vega

AOA PRESIDENT VISITS NSU-COM



On February 21, Ray E. Stowers, D.O., president of the American Osteopathic Association, visited NSU-COM to interact with students and faculty members and discuss issues of importance to the osteopathic medical profession. Pictured (from left) are Howard Neer, D.O., FACOF, associate dean of alumni affairs, Dr. Ray Stowers, Elaine Wallace, D.O., M.S., executive associate dean, and Kenneth Johnson, D.O., chair of the Department of Obstetrics and Gynecology.



Carisa Champion-Lippmann Named Student D.O. of the Year

In January, OMS-III Carisa Champion-Lippmann was selected from a competitive group of applicants to receive the NSU-COM Student D.O. of the Year Award from her peers, joining an exceptional group of previous winners who have become leaders in the medical field.

Excerpts from her recommendation letter illustrate why Champion-Lippmann

was selected for this prestigious honor. “Carisa marshaled our school’s efforts to always place the student first and ensure that each student feels empowered to become a true agent of change. Through her unflagging efforts with the Pan Student Government Association, our multiple clubs and organizations on campus, and the American Osteopathic Association, Carisa has proven herself time and time again to carry the traits of a genuine leader and stands in the eyes of many of her colleagues as the archetype of professionalism.

She has shown amazing compassion to the underserved, attaining well over 600 hours of community service. Read On, Big Sisters, and the American Osteopathic Foundation Human Touch Project are just a few of the dozens of programs fortunate

to have her helping hand. Carisa also finds time to organize and lead entire medical outreach trips and supply drives for disaster relief and the needy. Her many contributions and pioneering spirit represent and embody our core values of academic excellence, integrity, innovation, opportunity, and community.”

As the current NSU-COM selectee, Champion-Lippmann is automatically entered into the national Student D.O. of the Year Award competition, which is presented annually by the Council of Osteopathic Student Government Presidents—a council of the American Association of Colleges of Osteopathic Medicine. This esteemed award acknowledges students’ commitment to their school, community, and the osteopathic profession.



In March, the College of Osteopathic Medicine received eight NSU Student Life Achievement (STUEY) Award nominations. The winners will be announced on Tuesday, April 16 at 6:00 p.m. at a ceremony to be held in the Miniaci Performing Arts Center located on campus. For those unfamiliar with the STUEY Awards, the event was created in 2000 to honor the people and organizations that best exemplify the NSU core values of academic excellence, student centered, scholarship/research, integrity, innovation, opportunity, diversity, and community. A full recap of the STUEY Awards will be published in the July issue of *COM Outlook*. Listed below are this year’s NSU-COM STUEY nominees:

- *Executive of the Year* – **Dr. Anthony J. Silvagni**
- *Professor of the Year* – **Alina Perez**
- *Administrator of the Year* – **Johneta Goodwin**

- *Student of the Year* – **Elizabeth Phung**
- *Staff Person of the Year* – **Jordan Mathis**
- *Student Government of the Year* – **NSU-COM SGA**
- *Co-Curricular Advisor of the Year* – **Dr. Paula Anderson-Worts**
- *Corporate Partner of the Year* – **Pizza Loft**

Heroes for Health Charity Fun Run



On January 20, the college’s Student Government Association coordinated and sponsored the Heroes for Health Charity Fun Run for the Homeless, which

featured around 300 participants and helped raise \$1,500 for local homeless organizations such as Broward Partnership for the Homeless. The participants, who were primarily NSU-COM students, also donated \$1,500 worth of water, food, clothes, and backpacks to Broward Partnership for the Homeless. The event, held on NSU’s main campus, allowed the runners to dress up in superhero costumes and also featured the participation of the college’s dean, Dr. Anthony J. Silvagni, who led the race on his Harley motorcycle.

AHEC Program Epitomizes Longevity



Since the inception of the college's Area Health Education Centers (AHEC) Program in October 1985, the program has blossomed into a comprehensive interprofessional system of academic and community partnerships. Involvement has been widespread and includes a range of NSU faculty and staff members from the Colleges of Osteopathic Medicine, Dental Medicine, Nursing, Health Care Sciences, Optometry, Pharmacy, and the Center for Psychological Studies. Over the past 28 years, the program has successfully

DEVELOPED highly effective programming in a wide range of primary care and public health issues such as rural and underserved health care, immigrant and minority health, domestic violence and child abuse, HIV/AIDS, and, most recently, tobacco treatment and cessation

PARTNERED with myriad colleges and universities, federally qualified health centers, county health departments, hospitals, rural health networks, and numerous other agencies throughout South and Central Florida

ENHANCED the training of over 2,000 medical, dental, pharmacy, physician assistant, nursing, and nurse practitioner graduates from AHEC-affiliated programs who subsequently went into practice in Florida's many underserved communities and critical needs sites in 65 of Florida's 67 counties

The success of these AHEC partnerships is evidenced by the fact that the current 2012-13 fiscal year marks the 20th consecutive year in which the program has received annual externally sponsored grant and contract funding from state and federal sources exceeding \$2 million per year.

WORKING TOGETHER AS A COMMUNITY REAPS REWARDS



On January 7, the college's Project HOPE (Homelessness in Osteopathic Predoctoral Education) program, along with the NSU-COM Public Health Student Association (PHSA) and the City of Pembroke Pines, cele-

brated the success of their joint holiday donation drive. Through this effort, 16 bags of clothing, toiletries, nonperishables, toys, and gifts were donated to Broward Partnership for the Homeless last December 18. During the celebration event, Pembroke Pines Mayor Frank Ortis affirmed his commitment to Project HOPE and the PHSA through his willingness to maintain a donation box in City Hall throughout the year. Dozens of additional bags of donated items continue to be collected and will be disbursed to the local homeless community throughout the year.

NSU-COM STUDENTS PARTICIPATE IN WORLD AIDS DAY ACTIVITIES



At the end of 2012, NSU-COM's Student National Medical Association, Gay and Lesbian Medical Association, Medical Students for Choice, and Student Association of Obstetrics and Gynecology chapters hosted an educational dinner and volunteer outreach program. The SEEHIV program (Students Educated and Engaged as HIV Intervention Volunteers) was designed to educate medical students about HIV transmission, treatment, and prevention and then allow them to use that knowledge to educate the community. Several HIV specialists were on hand to share their knowledge and experience with students at a dinner event held in November. Then, on December 1, over 20 NSU-COM students participated in a World AIDS Day community health fair at Samuel Delevoe Memorial Park in Fort Lauderdale, where they distributed condoms, educated the public, and provided blood pressure screenings.

Student Excellence Honored at FOMA Convention

During the 110th Annual Florida Osteopathic Medical Association (FOMA) Convention, held February 23-26 at the Hyatt Regency Bonaventure in Weston, a number of NSU-COM students were honored with awards for their various achievements, including **Trevine Albert**, **Allison Amore**, **Kacie Bhushan**, **Carisa Champion-Lippmann**, **Manuel Portalatin**, and **Susan Thomas**.

Albert, Thomas Win FOMA Student Awards



Winners of the FOMA Student Awards, which are presented each year to two NSU-COM students, were **OMS-I Trevine Albert** and **OMS-II Susan Thomas**, who received \$300 and \$500 cash awards, respectively. The FOMA Student Awards are based on criteria such as possessing leadership skills, supporting FOMA student district society initiatives, and showcasing significant interest in the osteopathic profession and osteopathic manipulative medicine.

Thomas Scores Oliva Scholarship



OMS-II Susan Thomas received the \$1,000 FOMA Marcelino Oliva, Jr., D.O., Student Scholarship and Award, which honors students who advance and promote the practices and principles of osteopathic medicine, showcase dedication to continuing Dr. Oliva's vision, and epitomize the qualities of commitment, passion, and involvement in the political and legislative process. *Pictured (from left) are Lora Lee Oliva (Dr. Oliva's widow), and Susan Thomas.*

Florida Hospital East Orlando Scholarships



Two third-year students who completed a core rotation at Florida Hospital East Orlando — **Allison Amore** and **Manuel Portalatin** — each received a \$5,000 scholarship from the Osteopathic Foundation of East Orlando for demonstrating excellence in leadership and academics. The scholarship is awarded to third-year core medical students from NSU-COM based on criteria such as exemplary grade-point average, personal statement, letters of recommendation, and curriculum vitae.

Bhushan Receives AFOMA Scholarship



In another show of NSU-COM strength, **OMS-III Kacie Bhushan** was named the winner of a \$500 AFOMA Believes in You Scholarship Award, which is presented by the Advocates of the Florida Osteopathic Medical Association (AFOMA). The award is partly based on a student's interest in osteopathic medicine, activities in the profession, and leadership abilities. *Pictured are Gary Novotny, President of the Advocates to the Florida Osteopathic Medical Association, and Kacie Bhushan.*

Champion-Lippmann Garners Seltzer Legislative and Healthcare Policy Award



OMS-III Carisa Champion-Lippmann, the current SGA president, won the FOMA Seltzer Legislative and Healthcare Policy Award, which is accompanied by a \$250 cash prize. The Seltzer Award is presented to a student of good standing in the FOMA Student District Society at NSU-COM who possesses significant interest in the legislative process in the state of Florida, is politically active, possesses leadership qualities, and supports FOMA Legislative Committee initiatives. *Pictured are Carisa Champion-Lippmann and Paul Seltzer, D.O.*

Pediatric Residency News



The NSU-COM/Miami Children's Hospital Pediatric Residency Program filled and matched its four first-year osteopathic residency positions. Two of the incoming residents are soon-to-be NSU-COM graduates—Jennifer Berkovich and Courtney Allen. The addition of the aforementioned positions will increase the program to 11 filled osteopathic residency slots for the 2013-14 academic year, which is the highest total ever since the program's inception.



HEALTH CARE LEGAL EAGLE

Patient Referrals and Financial Relationships: Laws You'll Need to Know

By Fred Segal, Esq.



I know you are still in the early stages of your medical career, but as an attorney who works with doctors daily, I feel it is my obligation to teach you about some of the laws you will frequently come across throughout your career. This article will briefly introduce two of the most important and complex laws physicians will encounter: Stark Law and the Anti-Kickback Statute.

Fred Segal is an attorney in the Miami office of the statewide law firm Broad and Cassel, where he is a member of the Health Law Practice Group. After earning a bachelor's degree from the University of Florida, he earned his Juris Doctorate from NSU's Shepard Broad Law Center and then completed a Master of Law degree in Health Law at Widener University School of Law in Wilmington, Delaware, in 2008.

These laws regulate patient referrals and financial relationships involving medical practices, testing facilities, surgery centers, hospitals, and other businesses.

The federal **Anti-Patient Self-Referral Act (Stark Law)** provides that neither a physician nor his or her immediate family members may make a referral to an entity or make or cause to be presented a claim to the Medicare program (or any other federal health care program) or any individual, third-party payer, or other entity, for certain health services (among these are lab and radiology services) if such physician or family member has a *financial relationship* with such entity.

For example, you can't own an imaging center and send all of your patients there just so you can make money (unless you meet an exception to the statute).

Since the majority of physicians will be involved, in some way, in billing Medicare for reimbursements for the services you provide, most of you will likely be under the auspices of the Stark Law in some fashion. One of the most common scenarios in which the Stark Law will apply is when a physician has an ownership interest in a business that provides ancillary services (such as a testing lab or a surgical center) and the physician refers patients to that ancillary business.

The Stark Law is subject to certain exceptions that most physicians try to use to avoid the restrictions. For example, the in-office ancillary services exception allows *group practices* (as defined in the statute) to refer patients for ancillary services to a company that has a financial relationship with the group.

The federal **Anti-Kickback Statute** prohibits one party to provide or offer to provide any-

thing of value in order to induce the referral of health care services that will be billed to the Medicare program (or any other federal health care program). A common way a physician gets in trouble is when he or she is paying the referral source money specifically for the purpose of the referral source referring Medicare patients to the provider.

Because the statute is so broad (technically, getting free coffee at the hospital could be a violation), the U.S. Department of Health and Human Services Office of Inspector General has throughout the years adopted certain safe harbors that protect providers and business from prosecution if such providers and business fall within the parameters of said safe harbors. For instance, the space rental safe harbor allows a physician to refer patients to a group from whom he or she is leasing space if six standards (described in the safe harbor) are met.

Florida also has enacted statutes that in some ways mirror the Stark Law and the Anti-Kickback Statute. These laws—the Florida Patient Self-Referral Act, the Florida Patient Brokering Act, and the Florida and federal kickback statutes—carry with them severe penalties for noncompliance, such as stiff fees and, in some cases, jail time.

While you may not be subject to these laws for a long time, you almost certainly will be hearing about and dealing with them throughout your medical career. If you want to get a head start in learning about them, attorneys Lester Perling, a board-certified health law attorney and partner in my firm Broad and Cassel, and Alan Gassman, a board-certified estate planning lawyer, have authored the newly-released *A Practical Guide to Kickback and Self-Referral Laws for Florida Physicians*, which is available at amazon.com.

Research/Scholarly Activity - Faculty and Student Achievements



1 Steve E. Bronsburg, Ph.D., M.H.S.A., assistant professor of biomedical informatics, served as a peer reviewer for the International Institute for Applied Knowledge Management's Knowledge Management Conference 2013. The conference will be held in Novi Sad, Serbia, June 26-28. The conference is a platform of current research and investigation concentrating on knowledge management used in academia, industry, and government to improve upon, advance, and sustain quality.

2 OMS-II's Mai Dang and Jacob Triplet were selected to participate in the college's 2013-14 Predoctoral Research Fellowship Program. During their fellowship year, which will commence on July 1, Dang and Triplet will have the opportunity to develop an individualized training program, engage in all aspects of the research process, and collaborate with others involved in the research field.

3 M. Isabel Fernandez, Ph.D., OMS-IV Aditya Vora, OMS-IV Nathan Maltezos, Nilda Hernandez, and Lauren Alfonso, B.A., coauthored a study entitled "Predictors of

Scoring at Least 600 on COMLEX-USA Level 1: Successful Preparation Strategies," which was published in the February issue of the *Journal of the American Osteopathic Association*.

4 Jay M. Fleisher, Ph.D., M.S., associate professor of public health, has become a team leader for Statistics Without Borders—a volunteer organization that helps researchers in developing countries.

5 Patrick Hardigan, Ph.D., clinical professor of public health and executive director of Health Professions Division research, has been elected president of the Association for the Behavioral Sciences in Medical Education (ABSAME)—a national association of interdisciplinary educators focused on the behavioral side of medicine and health care education.

6 Robin J. Jacobs, Ph.D., M.S.W., associate professor of psychiatry and behavioral medicine, preventive medicine, biomedical informatics, and public health and director of international medicine, authored an article entitled "Attributions of Autonomy and Competence of Older and Younger Homeless Mentally

Ill" in the February edition of *Health & Social Work*. She also coauthored an article with **Raymond Ownby, M.D., Ph.D., M.B.A.**, professor and chair of the Department of Psychiatry and Behavioral Medicine, entitled "Cost Effectiveness of a Computer-Delivered Intervention to Improve HIV Medication Adherence" in the February issue of *BMC Medical Informatics and Decision Making*. In addition, she served as a grant reviewer for the Patient-Centered Outcomes Research Institute in Washington, D.C., and coauthored an article with Dr. Ownby entitled "Development and Initial Validation of a Brief Computer-Administered HIV-Related Health Literacy Scale" that was published in the February edition of *AIDS and Behavior*.

7 Kenneth Johnson, D.O., FA-COOG, associate professor and chair of the Department of Obstetrics and Gynecology, was selected to serve on the *Journal of the American Osteopathic Association* Editorial Board.

8 OMS-IV Kristopher Kline, was awarded first place in the Medical Student Competition for Case Vignette at the Florida

Chapter of the American College of Physicians Associates Meeting held March 2-3 in Orlando for his project entitled "The Cumbersome Lymphoma: A Strange Neurologic Presentation of a Rare Lymphoma."

9 Linda E. Maurice, director of the NSU-COM Lifelong Learning Institute, presented the topic "It's Not Your Grandparents' Retirement: The New Reality of Mature Adults" at the 39th Annual Meeting of the Association of Gerontology in Higher Education held February 28-March 3 in St. Petersburg, Florida.

10 Naushira Pandya, M.D., CMD, professor and chair of the Department of Geriatrics, coauthored an article entitled "Use of Warfarin Therapy Among Residents Who Developed Venous Thromboembolism in the Nursing Home," which was published in the December 2012 issue of the *American Journal of Geriatric Pharmacotherapy*. She also was named a reviewer for the *Journal of Palliative Care* and coauthored an article entitled "Efficacy and Safety of Insulin Glargine Compared to Other Interventions in Younger and Older Adults: A Pooled

Research/Scholarly Activity - Faculty and Student Achievements



9



10



11



12



13

Analysis of Nine Open-Label, Randomized Controlled Trials in Patients with Type 2 Diabetes” in the February edition of *Drugs and Aging*.

11 OMS-IV Elizabeth Phung was awarded first place in the

Medical Student Competition for Medical Research at the Florida Chapter of the American College of Physicians Associates Meeting held March 2-3 in Orlando for her project entitled “Does Living Arrangement Impact Hospitalization Rate Among Enrollees in Program of All-Inclusive Care for the Elderly?” She will also present this research project at the Annual Scientific Meeting of the American Geriatrics Society being held May 3-5 in Grapevine, Texas.

12 Arif M. Rana, Ph.D., M.Ed., assistant professor of

biomedical informatics and medical education, presented a lecture entitled “Designing Effective Presentations Using PowerPoint” for the 2013 Public Health Workforce Development Series held January 15 at the Broward Regional Health Planning Council in Hollywood, Florida. He also coauthored an article with **Kenneth Johnson, D.O., FACOOG**, associate professor and chair of the Department of Obstetrics and Gynecology, and Frank Voehl, director of process improvement at NSU’s H. Wayne

Huizenga School of Business and Entrepreneurship. The article, entitled “Using Health Information Technology and Lean Six Sigma to Optimize Health Care,” was published in the January edition of *South Florida Hospital News and Healthcare Report*.

13 OMS-IV Lauren Westafer authored a case report entitled “Role of Bedside Ultrasound in CMV Retinitis: A Case Report” that was published in the volume 2012 edition of *Case Reports in Emergency Medicine*.

Affiliation Between NSU-COM and Slovakian Universities Going Strong

Students from NSU-COM and the College of Medicine at Comenius University in Bratislava, Slovakia, have experienced rich student exchanges over the past year. Recently, fourth-year NSU-COM student Richard Sanchez completed a one-month international selective rotation in Slovakia. Under the direction of Daniela Ostatnikova, M.D., Ph.D., associate dean of the College of Medicine at Comenius University, Sanchez was able to spend one week in Dr. Ostatnikova’s physiology laboratory, where she is conducting state-of-the-art research in autism and testosterone. He spent the remainder of his time rotating through various hospitals and clinics in Bratislava—the capital city of Slovakia.

Similarly, NSU-COM recently welcomed Silvia Lakatosova, Ph.D., who serves as a postdoctoral research fellow and works as a researcher in Dr. Ostatnikova’s laboratory. During her stay, she will work with Anna Maria Castejon, Ph.D., associate professor of pharmaceutical sciences in

the College of Pharmacy. Dr. Lakatosova will also seek to publish articles on autism-related research through her collaboration with Leonard Levy, D.P.M., M.P.H., associate dean for education, planning, and research, and Cecilia Rokusek, Ed.D., RD, assistant dean for education, planning, and research. Dr. Lakatosova is the third research fellow from Slovakia to join NSU-COM in the past year.

Through an ongoing partnership with the University of Zilina in Slovakia, Dr. Rokusek also worked with Lukas Bomba for five months on a research project that examines how students value education in Slovakia and compares those findings to the value that American students have for their

higher education. Bomba, who is completing his Ph.D. in Slovakia, is a faculty member at the University of Zilina School of Education and Sociology. Bomba spent five months at NSU-COM with Drs. Rokusek and Levy before returning to Slovakia on February 28; Dr. Lakatosova arrived on February 25.



Pictured (from left) are Dr. Silvia Lakatosova, Dr. Cecilia Rokusek, and Lukas Bomba.

GREAT GEC Hosts Sixth Annual Training Institute



On February 15-16, the Florida Coastal Geriatric Resources, Education, and Training Center (GREAT GEC) hosted its Sixth Annual Training Institute. This year's theme—*Interprofessional Aging Issues in a Global Society*—focused on the worldwide demographic shift moving toward a significantly increasing population 55 years and older. In 2017, for the first time in human history, the population aged 65 and older will outnumber the population 5 years and younger. This year's training institute selected this topic because of the need for interprofessional geriatric providers to address the multiple needs of this growing population majority.

Over 100 geriatric professionals and GEC students participated in the 2013 event, which attracted attendees from Poland, the United Kingdom, the Czech Republic, Slovenia, Hungary, Slovakia, and Lithuania. Highlights included presentations on innovations in geriatric care regarding topics such as dance therapy, dementia care, interprofessional team care in the home, pharmacological administration for depression, and pain treatment in the geriatric population.

"This training institute provided an outstanding environment for interprofessional education that brought together geriatric health professionals, GEC students, and medical scientists," said Cecilia Rokusek, Ed.D., RD, GREAT GEC executive director. "It also provided a foundation for understanding the myriad challenges we face as geriatric leaders to provide adequate numbers of geriatric professionals to meet the growing demand worldwide."

To learn more about the 2013 training institute, please visit www.nova.edu/gec/igs13/index.html.

NSU-COM FACULTY MEMBERS SHARE EXPERTISE AT FOMA CONVENTION

A number of full-time faculty members made presentations at the 110th Annual Florida Osteopathic Medical Association Convention, which was held February 23-26 at the Hyatt Regency Bonaventure in Weston. They are:

Barbara Arcos, D.O.

"OMT for the Primary Care Physician"

David Boesler, D.O., M.S., and

Yasmin Qureshi, D.P.T., M.H.S, M.P.T.

"Thoracic Outlet Syndrome: A Commonly Missed Diagnosis"

Robert Hasty, D.O., FACOI

"Prevention of Medical Errors"

Kenneth Johnson, D.O., FACOOG

"Domestic Violence"

Andrew Kusienski, D.O.

"OMT for the Injured Athlete"

Naushira Pandya M.D., CMD, and

Siddharth Pandya, D.O.

"Imaging to Improve Clinical Care; What to Order When: Acute Abdominal, Back, Hip, and Leg Pain, Edema, and the Diabetic Foot"

Dennis Penzell, D.O., M.S., FACP

"AHEC: Tobacco Control and Treatment in 2013: Controversies and Solutions"

Anthony J. Silvagni, D.O., Pharm.D., M.Sc., FACOFP dist.

"Federal and State Laws Related to the Prescribing of Controlled Substances"



NSU-COM DOMINATES AT FOMA POSTER COMPETITION



Pictured (from left) are OMS-III Shaakir Hasan, OMS-III David Kang, Sabine Delinois Elisee, D.O., Elizabeth Hames, D.O., and Lily Weidrich, D.O.

During the 110th Annual Florida Osteopathic Medical Association Convention, which was held February 21-24 at the Bonaventure Resort and Spa in Weston, Florida, NSU-COM and its affiliated postgraduate programs nabbed six of the seven research prizes up for grabs at the association's Third Annual Resident and Student Research Poster Competition. Additionally, 49 of the 56 poster entries were from NSU-COM students or Consortium for Excellence in Medical Education/OPTI residents.

Janet Hamstra, Ed.D., associate professor of internal medicine and director of preclinical education, served as the competition's head judge. Five other NSU-COM faculty members also judged the event along with two representatives from the Lake Erie College of Osteopathic Medicine-Bradenton.

The NSU-COM judges were John Pellosie, Jr., D.O., M.P.H., FAOCOPM, chair of preventive medicine and director of graduate programs, Cyril Blavo, D.O., M.P.H. and T.M., FACOP, director of the college's Master of Public Health Program, Susan Ledbetter, D.O., assistant professor of family medicine, Anjali Bhasin, M.D., assistant professor of internal medicine, and Dennis Penzell, D.O., assistant professor of internal medicine. Students, residents, and affiliated OPTI programs from various osteopathic colleges were judged in two categories:

Osteopathic Intern/Resident/Fellow Case Study and Experimental Research

Osteopathic Medical Student Case Study and Experimental Research

Six winners were selected, with first-, second-, and third-place winners receiving \$750, \$250, and \$100, respectively. In addition, a Future of Osteopathic Medicine Award was presented to the research study that best advances the principles and practices of osteopathic medicine.

Following are the NSU-COM-affiliated poster winners in their respective categories. First authors/presenters are listed in **bold**.

Resident Research

First Place

"Congenital Syphilis: It Still Exists"

Sabine Delinois Elisee, D.O., M.P.H. (PGY-I)
(Lakeside Medical Center family medicine resident)
Charles N. Azan, M.D.
Marie H. Florent-Carre, D.O., M.P.H.

Second Place

"Seizures, Left-Sided Weakness, and Headache in a 41-Year-Old Female: A Case of Neurocysticercosis"

Elizabeth Hames, D.O. (NSU-COM geriatric medicine fellow)
Alexandra Oleinik, OMS-III
Kenya Rivas, M.D.

Third Place

"6-Ketothiolase Deficiency: A Rare Late Presentation"

Lily Wiedrich, D.O. (PGY3-III) (Palms West Hospital pediatric resident)

Student Research

First Place

"Mesenteroaxial Volvulus: An Imaging Obstacle"

OMS-III David J. Kang
Victor Jaffe, D.O.

Second Place

"Idiopathic Intracranial Hypertension in a Previously Healthy 12-Year-Old Male"

OMS-IV Jennie Berkovich

Third Place

"Mycobacterial Infection in Cosmetic Surgery: A Case Report and Review of the Literature"

OMS-III Shaakir Hasan,
OMS-III Kyle Leneweaver
Lindsay Frye, D.O.
OMS-III John Howard
Paula Dilanchian, D.O.
Natasha Bray, D.O.



COM Outlook is excited to unveil a new column that will touch on a range of timely and insightful topics. Called Faculty Perspective, the editorial think piece will allow members of the college's esteemed faculty to discuss issues related to their areas of expertise, share their ideas for a brighter tomorrow, and focus attention on health-related themes.



FACULTY PERSPECTIVE

Focusing on Preventive Care Helps Create a Healthier Future

*By John C. Pellosie, Jr., D.O., M.P.H., FAOCOPM
Chair of Preventive Medicine and Director of Graduate Programs*



We all have a vested interest in the health and wellbeing of our communities, coworkers, neighbors, and families. As physicians, we are very good at disease management for the individual, but there is more we must do—a holistic approach we must embrace—called primary prevention. We must not concentrate on already existing conditions and remain reactionary. Instead, we must address the avoidance of injury and challenges to both physical and mental health.

Does our culture truly want to prevent medical problems? Unfortunately, with most issues, we tend to wait until there is a problem and then address it. We tend to wait until there is a fire, perhaps until we see smoke, before we run to put the fire out. Many times we do not analyze the event and learn from it, so we neglect to correct the root causes that could prevent future problems.

Consequently, a paradigm shift is required in our culture. In the field of health and medicine, we must primarily prevent injury and illness and not just provide disease management. This practice would then save us from increased morbidity, mortality, and expense.

Changing perceptions has to do with promoting prevention and preventive care. Prevention is the avoidance of injury or illness, so we must take care now and in the future to master prevention, which requires culture changes, being individually responsible, and accepting the results of one's actions. This includes primary prevention practices such as childhood vaccinations, critical thinking, and making healthy life choices.

Marketing tactics target us on both conscious and subconscious levels to influence us as individuals and as members in our communities. Marketing strategies focus on specific portions of society to create a desire or need to have things that make us a part of what is considered acceptable, favored, and trendy.

A business model that supports unhealthy practices is troubling and should not be used in the fields of health and medicine because the goals do not serve the patient and the health care provider.

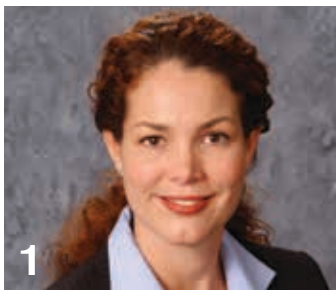
When we apply a business model to deal with health and medicine as a business venture, we must formulate it to focus concern on overall health and wellbeing. We are very good at disease management and the use of technological advances, but do we really want to wait until a health crisis happens? Are we only interested in assuring ongoing visits, diagnostics, and laboratories to fatten the bottom line?

Primary prevention would help us avoid many health crises. I suggest a return to the old model of the doctor and patient. Anything that interferes with the respect and success of that relationship should be deemed unacceptable. The general practitioner approach needs to be renewed, with the doctor serving as both patient advocate and gatekeeper.

Many may not agree and say, "We can never go back to the way it was. We must move ahead." Like it or not, we are all moving toward the future, but we must apply lessons learned, models, and concepts to address our future needs—not just make changes to create needless jobs to assure income streams. Stop allowing marketing to lower the bar within society. Building a good life means helping and living alongside one another, depending on one another to create and maintain a healthy community and society.

As we move forward, let's consider whether we are making changes that are positive and beneficial or mostly materialistic for business and/or political advancement. Do the ends serve the means for good or just for profit? How will we handle the constant flow of information and avoid overload? We must reevaluate and consider a return to a sound foundation that is simple, consistent, logical, and easily understood.

We must also return to assuming responsibility for ourselves, our families, and our neighbors while at the same time move away from complicating issues for gain and distraction. We must also retreat from marketing medicalization paradigms. Modernization has its place, but we must use it wisely as a tool to prevent rather than create problems.



1 Michelle Gagnon Blodgett, Psy.D., coordinator of geriatric clinical services, joined the Department of Geriatrics in December. She previously served as clinical assistant professor in the Department of Geriatrics and is the director of the NSU Counseling Center for Older Adults (NCCOA) in the Center for Psychological Studies. Dr. Gagnon Blodgett also coordinated an inter-professional workshop on hoarding that was presented by the Broward Hoarding Task Force and held on March 1 at the Health Professions Division. The event attracted over 90 participants from a variety of disciplines and organizations in South Florida, including psychology, social work, occupational therapy, nursing, and law, as well as first responders, real-estate agents, professional organizers, and laypeople from the community.

2 Michael De Lucca, M.H.M., a public health clinical faculty member who serves as president and chief executive officer of the Broward Regional Health Planning Council, was named Broward College Non-Profit Organization Leader of the Year at the Third Annual PNC

Non-Profit Academy Awards presented by 211 Broward and hosted by the Seminole Hard Rock Hotel and Casino in Hollywood, Florida.

3 Paula Dilanchian, D.O., Pharm.D., assistant professor of internal medicine, recently earned her board certification in infectious disease.

4 Tracy Favreau, D.O., chair of the Department of Dermatology, recently earned her board certification in dermatology.

5 Robert Hast, D.O., FACOI, associate professor of internal medicine and program director of the NSU-COM/Palmetto General Hospital Internal Medicine Residency Program, was recently appointed as a national faculty leader and committee chair for advanced items by the National Board of Osteopathic Medical Examiners (NBOME). Advanced items are multimedia elements such as videos and audio clips the NBOME uses to assess competence on the COMLEX examinations that are required for osteopathic physicians to become licensed in the United States. In February, he also was chosen by Apple to be an

Apple Distinguished Educator. The Apple Distinguished Educator (ADE) Program began in 1994 when Apple recognized K-12 and higher-education pioneers that are using a variety of Apple products to transform teaching and learning in powerful ways. The program has grown into a worldwide community of over 2,000 visionary educators and innovative leaders.

6 Oneka Bynoe Marriott, D.O., M.P.H., assistant professor of pediatrics, recently earned her board certification in pediatrics from the American Osteopathic Board of Pediatrics.

7 Deborah A. Mulligan, M.D., FAAP, FACEP, director of NSU's Institute for Child Health Policy and clinical professor of pediatrics, is a co-investigator for a project that recently launched a new Web-based computer game released by the American College of Emergency Physicians. The game—*Disaster Hero*—is designed to teach families how to prepare for all types of hazards or emergencies and was developed as part of a grant administered by the U.S. Department of Homeland

Security/Federal Emergency Management Agency. She also coauthored an article entitled "Media Education in Pediatric Residencies: A National Survey" in the January issue of *Academic Pediatrics*.

8 Kenya Rivas, M.D., assistant professor of geriatrics, was interviewed by the Spanish-language TV network Telemundo in February in regard to the physiologic and pathologic changes associated with aging in regard to Pope Benedict XVI's decision to resign.

9 Khin M. Tu, M.D., professor of anatomy in the College of Medical Sciences, has been accorded the rank of NSU-COM associate professor of medical education.

- TRANSITIONS -



Barbara Arcos, D.O., chair of the Department of Family Medicine, has been

named interim medical director of all NSU-COM medical clinics. She will be working closely with Albert Whitehead, D.M.D., M.Ed., M.B.A., assistant dean

of clinical operations, in the administration of the clinics to provide another perspective to the decision-making process of clinical operations.

On January 16, the college coordinated a farewell party for **Natasha Bray, D.O.**, assistant professor of internal medicine and director of medical education at Broward Health in Fort Lauderdale. Dr. Bray, who served as an NSU-COM faculty member for five years, left the college to accept a position at Broward Health as its vice president of academic affairs/designated institutional official. *Pictured (below from left) are Drs. Fred Lippman, Natasha Bray, and Anthony J. Silvagni.*



On February 25, the college hosted a retirement party for **Nancy May**, who worked for over 15 years as the support services coordinator for the Area Health Education Centers (AHEC) Program. She is relocating to North Carolina with her husband to enjoy what the college hopes will be a restful and healthful retirement. *Nancy May (holding clock below) shares a farewell pose with several longtime AHEC colleagues.*



Dr. Elaine Wallace Earns Prestigious NSU Honor



Elaine M. Wallace, D.O., M.S., professor of osteopathic principles and practice and executive associate dean, received a prestigious honor on January 24 when she was presented with the inaugural NSU President's Excellence in Community Service Award (faculty category) during the university's 15th Annual Celebration of Excellence ceremony. Dr. Wallace was honored for participating in various medical outreach trips around the world and originating NSU-COM's medical outreach trip to Ecuador, which serves anywhere from 400 to 2,000 patients annually. Other countries where she has conducted medical outreach excursions include Argentina, Bangladesh, Peru, and Vietnam. Because she is such a passionate advocate for community-based care, Dr. Wallace played an integral role in helping add a community service requirement for NSU-COM students. *In the above photo, Dr. Elaine Wallace (center) poses with Jacqueline A. Travisano, M.B.A., CPA, NSU executive vice president and chief operating officer, and George L. Hanbury II, Ph.D., NSU president and chief executive officer.*

Applications to D.O. Schools Break Record



upcoming 2013-14 academic year. This figure represents an 11 percent increase over last year's figures at the same time and is already more than the total number of applicants at the close of last year's application cycle. Application growth was recorded at all schools.

Today, over 20 percent of all U.S. medical students are studying at osteopathic medical schools, with more than 20,000 aspiring osteopathic physicians enrolled as of fall 2012. Thanks to elevated awareness surrounding osteopathic medicine, coupled with the increasing number of COMs in the United States, this figure is projected to continue increasing, with an estimated 5,300 D.O.s graduating each year by 2015.

All applications to the nation's colleges of osteopathic medicine, with the exception of the University of North Texas Health Science Center at Fort Worth/Texas College of Osteopathic Medicine (UNTHSC/TCOM), are processed through the American Association of Colleges of Osteopathic Medicine Application Service. Applications to UNTHSC/TCOM are processed through the Texas Medical and Dental Application Service and are therefore not represented in the figures outlined in this article.

For the seventh consecutive year, prospective medical students have been applying to the nation's colleges of osteopathic medicine (COMs) in record-breaking numbers. As of February 1, more than 16,107 aspiring physicians have submitted applications to the nation's 29 osteopathic medical schools and four branch campuses for the



Institute for Neuro-Immune Medicine Aims to Ease Suffering

By Debra R. Gibbs, B.A., Medical Communications Coordinator

In February, NSU-COM held a grand opening ceremony for its Institute for Neuro-Immune Medicine. Celebrants gathered to salute the first-of-its-kind facility that will treat patients with conditions such as chronic fatigue syndrome/myalgic encephalomyelitis (CFS/ME) and Gulf War Illness (GWI), as well as conduct basic and clinical research under one roof in this field.

The institute is the only one in the nation to study neuroinflammatory and neurodegenerative disorders that include CFS/ME, GWI, Parkinson's disease, multiple sclerosis, and other illnesses using the newest genomic techniques. By studying individual genes and what they code for, the institute's scientists will better understand the symptoms and causes, as well as point to new ways to treat these complex disorders.

The idea is to challenge the patient with something such as exercise and measure which genes turn on or off to better understand the cause of relapse and the persistence of illness. The analysis seeks points of intervention to treat the patient. This important basic

research will provide answers that will help scientists develop new pharmaceutical medications to treat these illnesses.

Leading this innovative team is Nancy Klimas, M.D., who has achieved international recognition for her research and clinical efforts in complex medical disorders that are the focus of the institute. She is a highly regarded authority who has served as a past president of the International Association for Chronic Fatigue Syndrome and Myalgic Encephalopathy (IACFS/ME)—a professional organization of clinicians and investigators—and a member of the Department of Health and Human Services CFS Advisory Committee.

"The Institute for Neuro-Immune Medicine, strategically placed at NSU-COM, brings together great minds in the field of neuro-immune disorders under one umbrella," Dr. Klimas said. "It will be a place to coordinate cutting-edge thinking and research, train new practitioners, and offer the highest quality clinical care for a hugely underserved population. I am thrilled to partner with NSU-COM in this giant step forward in the field of CFS/ME care and research."

“There is a lot of work to do to make NSU the major research institution President Hanbury envisions,” Dr. Klimas explained. “It’s completely plausible and doable, but it’s only going to happen with the passion, belief, and commitment of the leadership. Building a building is the start, but building a culture of scientific advancement and scholarship is what is going to take NSU where it wants to be in 2020.”

Dr. Klimas, who was born in Pittsburgh, Pennsylvania, and raised in northern Virginia, came to Florida to attend the University of Southern Florida, where she pursued a double major in microbiology and English and earned her M.D. degree at the University of Miami (UM). She is a diplomate of the American Board of Internal Medicine, a diplomate in diagnostic laboratory immunology, and director of clinical immunology research at the Veterans Administration Medical Center in Miami.

Her commitment to easing the suffering of others comes from several life experiences, including her father’s battle with brain cancer. During his illness, she observed what doctors did to support patients and families in crisis.

Two colleagues from UM’s Miller School of Medicine also served as major influencers in Dr. Klimas’ noble pursuit of conquering neurological challenges: Mary Ann Fletcher, Ph.D., professor of medicine, microbiology/immunology, and psychology, who hooked Dr. Klimas on immunology when they worked together in the 1980s, and Janet Canterbury, Ph.D., professor of medicine and deputy dean emeritus, who instilled the importance of including and supporting women in the field.

The commitment of Drs. Fletcher and Canterbury personified “a way of imbuing you with responsibility to the next generation,” Dr. Klimas said. There were only 12 women in Dr. Klimas’ class at UM; consequently, she has tried very hard in her years of practice to acknowledge her “sensitivity to the privilege of having the access to certain advantages and the responsibility to pass down the lesson that we do not open doors alone.” Essentially, those who win success have the obligation to recognize people who have helped them to succeed and to keep the doors open for others.

An expert in immune disorders, Dr. Klimas will treat patients at two sites: the institute on

the main campus in Davie and at the existing Chronic Fatigue Center in Kendall, where Dr. Klimas is the director. The institute will use the integration of research, training, and clinical care to answer the needs of patients suffering from CFS/ME and GWI. By bringing together some of the best scientific minds in the world, the facility will act as a think tank and working institute for the research, as a training center for new clinicians, and provide diagnostic and therapeutic clinical care.

The institute, which houses research laboratories, a patient clinic, a clinical research unit, faculty offices, and conference facilities, is designed to bring together multiple core medical and scientific disciplines in one place. This includes clinicians, educators, and researchers in the areas of genomics, virology, immunology, cellular biology, computational biology, and therapeutic modeling.

Neuro-immune diseases such as human immunodeficiency virus (HIV/AIDS), fibromyalgia, autism spectrum disorder, Lyme disease, and Gulf War syndromes are some of the illnesses that are treated at the institute.

Patients seek treatment for myriad ailments, including mild-to-severe cognitive impairment, disordered sleep, severe headache, swollen lymph nodes, sore throat, malaise, postural orthostatic tachycardia, painful nerves, joints, and/or muscles, abdominal pain, nausea, and unusual fatigue. Unfortunately, standard medical treatment is not successful in resolving these disorders. Research conducted at the institute will examine the immune system and monitor infections, major life stresses, or exposure to toxins that can trigger a severe relapse or worsening of existing symptoms. Inflammation is a common problem, but different illnesses manifest in divergent ways.

What makes the institute different is the way it combines computer models with patient care and treatment development, Dr. Klimas explained. For instance, the institute’s researchers can study the way a patient’s genes react during exercise while experiencing chronic fatigue syndrome and plug that data into a computer model to calculate the ways this reaction could be blocked off. The computer would then run through all the pre-





On February 12, a number of dignitaries attended the institute's ribbon-cutting ceremony.

approved therapies and see whether any of them have that desired effect.

Dr. Klimas plans to share research and other data via REDcap (Research Electronic Data Capture)—“a cloud that has well validated research tools,”—to study pain and sleep patterns and share clinical information without identifying the patients. REDcap offers constant access to clinical studies on multiple patients at various sites. Dr. Klimas added that many major universities use the software platform.

While on a tour of the new \$5 million clinic with Dr. Klimas, one is caught up in her energy and excitement about finding treatment for her patients. She has surrounded herself with a team of respected scientists who are equally committed. Using an interdisciplinary approach, Dr. Klimas and her colleagues are “connecting the dots” to examine the linkages needed to care for her patients. It’s an approach that looks at the system and tries to get balance back. Her work also strives to make “practical application to an exciting scientific approach,” she said.

Hers is “a novel treatment with strategies that are not yet modeled,” she added. The NSU-COM clinics in Davie and Kendall accommodate around 1,200 patients from South Florida, throughout the nation, and around the world. Appointments at the institute are booked through October of this year, so managing the clinics and the follow-up consultations are a top priority.

Dr. Klimas’ methods seek to treat the

whole patient, which is why she is enthusiastic about working in the D.O. world, which is “integrative and the best place for me to have this program,” she said. The institute represents a unique concept that combines research and clinical care. If a patient agrees, his or her history can be part of clinical data collected throughout treatment. The multidisciplinary resources available to patients are in one building, helping the patient avoid the stress of triage at multiple facilities. There is no need to repeat the history of illness or symptoms. The first appointment lasts about two hours in order to get a comprehensive report. Subsequent appointments are scheduled for an hour. Giving the patient plenty of attention brings great relief and freedom from

the stress of justifying the use of the medical system, Dr. Klimas explained.

It is the initial step in “putting patients back together again—like Humpty Dumpty,” she said, adding that dealing with the complexities of her patients lets them gain comfort in revealing that their experiences “are complicated, but real.” The team studies what controls systems and reactions, while also examining which stimuli in the body cause symptoms to occur. The institute’s integrated system coordinates treatment by a very broad methodology: clinical testing, cognitive testing, and monitoring the autonomic nervous system (involuntary body functions such as pulse, breathing, and blood pressure).

In addition to discovering treatments, the institute works diligently to obtain financial support. The U.S. Department of Defense has awarded three grants to the institute, including a \$4 million stipend with the Miami VA Medical Center on the Gulf War Illness research. Another supporter, the National Institutes of Health, oversees three grants that help fund the institute.

As the institute’s research progresses, Dr. Klimas hopes to attract investors to support the groundbreaking work of her diverse and skilled team. Along with her team, Dr. Klimas is enabled, respected, and ready to make a significant interprofessional contribution toward advancing knowledge about neuroinflammatory and neurodegenerative disorders.

“There is a lot of work to do to make NSU the major research institution Presi-



Dr. Nancy Klimas explains a treatment procedure to an institute patient.



dent Hanbury envisions,” she explained. “It’s completely plausible and doable, but it’s only going to happen with the passion, belief, and commitment of the leadership. Building a building is the start, but building a culture of scientific advancement and scholarship is what is going to take NSU where it wants to be in 2020.”

Meet the Institute Team

Members of Dr. Klimas’ ace research department include the following:

Gordon Broderick, Ph.D., who focuses on understanding immune dysfunction and autoimmunity from an integrated systems perspective, and **Travis Craddock, Ph.D.**, who has a background in biophysics. Both Drs. Broderick and Craddock recently relocated from the University of Alberta in Canada to join Dr. Klimas’ team.

Paula Dilanchian, D.O., Pharm.D., assistant professor of internal medicine, who recently earned her board certification in infectious disease.

Ana Imia Fins, Ph.D., associate professor of health psychology at NSU’s Center for

Psychological Studies, who is an expert in the areas of sleep medicine, life-threatening illness, and coping with chronic illness.

Lynn Lafferty, Pharm.D., M.B.A., ND, CNC, CNHP, assistant professor of family medicine, who has worked with veterans to explore alternative treatments for post-traumatic stress disorder, brain injury, and hormone imbalances. The institute utilizes a naturopathic doctor because some patients do not tolerate prescription drugs.

Nicholas Lewis, J.D., who serves as the institute’s administrative director.

Mariana Morris, Ph.D., professor of immunology and an expert in neurotoxicology, will focus on brain injury and brain inflammation, allowing the institute to test potential therapies.

Lubov Nathanson, Ph.D., assistant professor of clinical immunology, who is a genomics expert.

Irma Rey, M.D., a clinician with over 20 years of medical experience, serves as director of the institute’s education program. Her clinical prowess and teaching experi-

ence are essential to the success of the institute’s treatment methodologies.

Irina Rozenfeld, M.S.N., ARNP, CCR, the institute’s nurse practitioner.

Jaime Tartar, Ph.D., associate professor and coordinator of psychology research at NSU’s Center for Psychological Studies.

Phyllis Wagner, ARNP, a nurse practitioner.

Paula Waziry, Ph.D., a research associate and lecturer at NSU’s College of Pharmacy, who is an expert on viral interactions with cells and pathogen discovery.



New Marine Species...Ethics Bowl...Oral Cancer Walk...Fishing for Scholarships

New Marine Species Discovered in Pacific Ocean by NSU Researcher



genus *Leucothoe*

When Jim Thomas, Ph.D., a researcher at **NSU's National Coral Reef Institute** in Hollywood, and his global team of researchers returned to the Madang Lagoon in Papua New Guinea, they discovered a treasure trove of new species unknown to science. This is especially relevant as the research team consisted of scientists who had conducted a previous survey in the 1990s.

"In the Madang Lagoon, we went a half mile out off the leading edge of the active Australian Plate and were in 6,000 meters of water," Dr. Thomas explained. "It was once believed there were no reefs on the north coast of Papua New Guinea since there were no shallow bays and lagoons typical of most coral-reef environments. But there was quite a bit of biodiversity to be found."

Dr. Thomas and his team discovered new species of sea slugs (nudibranchs), feather stars (crinoids), and amphipods (genus *Leucothoe*). There was more variety of these indicator species found than there is in the entire length of Australia's 1,600-mile Great Barrier Reef. "This was an astonishing discovery," he said. "We returned to our labs and began to formally assess our collections. We had no idea this lagoon's bounty was so profound."

The NSU-led research team's findings will be shared with the local villagers, as well as regional and federal governments. It will also be published in peer-reviewed journals. The Madang Lagoon faces many environ-

mental threats by land-based pollution from a recently opened tuna cannery whose outfall is very close to the lagoon's reefs. "Hopefully, our discoveries will strongly encourage governing bodies to recognize the environmental importance of the lagoon and work to stop the pollution," Dr. Thomas stated.

College of Pharmacy Conducts Shark-Bite Study

NSU researchers are conducting a unique scientific study of bacteria found in the mouths of sharks to develop enhanced medical treatment methods for shark-bite victims.

Scientists from **NSU's College of Pharmacy**, who are working in collaboration with St. Mary's Medical Center, will be gathering data from sharks captured in South Florida. Over the past decade, Florida has consistently ranked near the top worldwide in the number of shark attacks and accounted for about 25 percent of the approximately 100 incidents of reported shark bites that occur each year.

Because of this, NSU researchers believe their findings are critical in helping the millions of ocean-goers each year that share the beaches and waterways with sharks. Their research, the first of its kind in the United States, could lead to groundbreaking research that will ultimately save lives from this tragedy.

"We are excited to gather scientific data from these incredible animals in order to learn more about the infecting bacteria from their bites and how to treat victims," said Nathan Unger, Pharm.D., an assistant professor at NSU's College of Pharmacy and the lead researcher on this project.



NSU OVERVIEW

Cancer Survivor Organizes Oral Cancer Walk



When Uyen Nguyen, a third-year **College of Dental Medicine** student, discovered a lesion inside her mouth that looked like a traumatic bruise, she chose not to have it checked out. "I was a busy dental student," she explained. "My palate was extremely tender, so I avoided brushing my teeth hard in that area and even switched to a pediatric toothbrush. Later, I developed sharp pains on the right side of my face."

Eventually a biopsy was taken—and the results were devastating. Nguyen had oral central mucoepidermoid carcinoma, a type of head and neck cancer. "I was shocked and confused," she admitted. "I kept asking 'Why me?' I live a healthy life. I am young, and I am a good person."

Nguyen eventually underwent a surgical procedure that successfully removed the cancer. In a show of selflessness, she decided to help others by raising awareness and money for oral cancer by coordinating an oral cancer awareness 5K run/walk at Central Broward Regional Park in Lauderhill on February 23.

Oral cancer is the seventh-leading cancer in the United States. In most cases, it's detectable and treatable if discovered in its early stages.

Ethics Bowl Competition Challenges Participants

The **Seventh Annual Ethics Bowl**—held February 12 and sponsored by NSU's Multicultural Affairs Committee, the College of Health Care Sciences, and the College of Nursing—allowed participants from 10 NSU programs to compete in the event, which was held at the uni-

versity's Health Professions Division. Teams comprising several students were given various scenarios and were challenged to come up with the best ethical solutions.

First-place honors went to the Physician Assistant Program from Fort Myers Student Educational Center. Second place was awarded to participants from the Vascular Sonography Program (Davie campus), while the College of Nursing (Davie campus) team earned third-place honors. The Spirit Award was presented to nursing students from the Miami Student Educational Center for outstanding support to their team.

Fishing for Scholarships: Tournament Benefits Students



NSU's Oceanographic Center, in partnership with the Marine Industries Association of South Florida, held its Sixth Annual Oceanographic Center Scholarship Fishing Tournament in Fort Lauderdale. The tournament began with the Kickoff Party and Captain's Meeting on February 28 at NSU's new \$50-million Center of Excellence for Coral Reef Ecosystems and culminated on March 2 with an awards dinner held at the Hyatt Regency Pier 66 in Fort Lauderdale.

The tournament featured a catch-and-release billfish division and a *fun-fish* division targeting dolphin fish, tuna, wahoo, kingfish, and cobia. Money raised during this year's event will provide scholarships for master's and Ph.D. students to study at the Oceanographic Center's Center of Excellence, where they will conduct research to help understand, conserve, and protect coral reef ecosystems at a local, national, and international level.



From Alumni to Faculty Members: The Allure of NSU-COM

By Scott Colton, B.A., APR
NSU-COM/HPD Director of Medical Communications and Public Relations

Currently, 20 full-time faculty members are NSU-COM graduates. In the following article, a number of alumni discuss why they chose to return to their beloved alma mater.

Medical school is generally construed—especially by those students studying within its cozy confines—as a challenging, exhausting, and all-consuming experience. So why then do so many NSU-COM alumni enthusiastically return to the college in the ensuing years to accept faculty positions in the same institution that relentlessly challenged their bodies, brains, and spirits?

While some may joke it's because they possess a predilection for the masochistic, the truth is they simply had a desire to *go home again* based on a combination of respect for NSU-COM's educational program and true affection for the college's collegiality and culture.

That was certainly the case for Kenneth Johnson, D.O., FACOOG, a 1991 alumnus who serves as associate professor and chair of the Department of Obstetrics and Gynecology. "As an NSU-COM student, I was elected class president and basically fell in love with the school, the profession, and especially the faculty," he explained. "I decided before I left to do my OB/GYN residency that I wanted to come back

to my alma mater and start an academic career. When I became a faculty member in 1996, it was the happiest day of my life and marked the beginning of my dream-come-true career at NSU-COM."

Jill Wallace-Ross, D.O., a 2007 alumna who joined the college as an assistant professor of family medicine in 2010, had a similar response when asked about her deep and abiding NSU-COM bond. "I have felt very connected to NSU-COM since becoming a student," she said. "I wanted to work with other physicians who I knew and trusted so I could continue to learn in an environment that was safe and welcoming. With my emotional attachments to the NSU-COM faculty and staff members, the only place I wanted to work was here."

For Paula Anderson-Worts, D.O., M.P.H., associate professor of family medicine and public health and program director of the NSU-COM/Broward Health Family Practice Residency, giving back to the college that had given her so much, including a full-tuition scholarship, proved to be a compelling reason to return. "As a resident, I loved teaching the medical school students and interns," said Dr. Anderson-Worts, who graduated in 1994 and became a faculty member in 1997 after completing her family medicine residency.

"I received positive feedback on being able to explain and simplify information," she added. "On a few occasions during my senior year,



Drs. Ken Johnson (left) and Robert Hasty sharing a collegial moment.

I was asked if I ever considered teaching as a career option. As I pondered what I was going to do after completing residency, it was like a light bulb went off. Having received the full-tuition scholarship, I felt indebted to NSU-COM, so I applied and received a job offer a few months later. Today, 15 years later, I am blessed to still be employed at NSU-COM.”

Nadine Chipon Schoepp, D.O., a 2007 alumna and current assistant professor of family medicine who joined the faculty in 2010, had a brief but telling response to explain her return. “In my eyes, NSU-COM has it all—a collegiate atmosphere, an emphasis on medical outreach and community service, and students who are eager and willing to learn.”



Drs. Victor Jaffe and Nadine Chipon Schoepp at the North Miami Beach Clinic.



Dr. Anderson-Worts (far right) during a medical outreach trip to Jamaica in 2012.

Like most professions, medical schools and their faculty members have to contend with numerous challenges, inherent pressures, unforeseen frustrations, and incessant fiscal concerns. Although the demands placed on faculty members can be overwhelming at times, the sense of fulfillment they feel usually supersedes the job stress they may be experiencing. This is especially true of those NSU-COM alumni now serving as faculty members, who have witnessed academic life from both a student and faculty perspective.

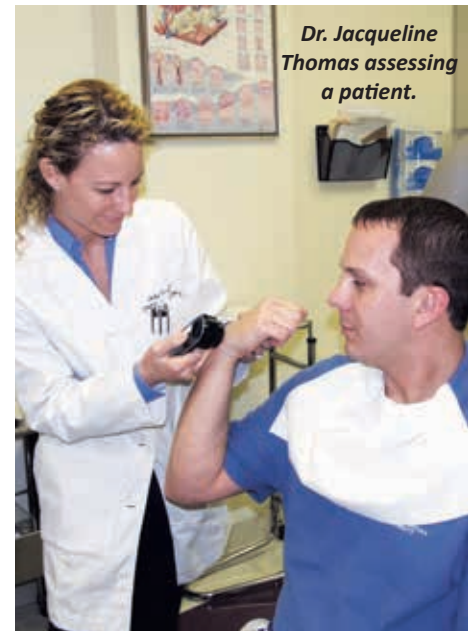
“The most fulfilling aspect of being employed at NSU-COM is being able to work with the students and help mentor them as they are beginning on their path to a rewarding career in medicine,” said Victor Jaffe, D.O., an assistant professor of family medicine who graduated in 2006 and rejoined the college family several years ago. “Also, it is amazing to work in an institution where it feels like everyone is family and so readily eager to help you advance in your career.”

According to Jacqueline Thomas, D.O., a 2005 graduate who joined the Department of Dermatology in 2013, “The word doctor in English comes from the Latin word for teacher,” she explained. “Not only does this imply the lifelong commitment to learning, but also teaching—teaching patients, their families, students, other doctors, and one’s staff in a collegial environment.

“Watching students’ and residents’ faces light up once they truly understand

a medical concept is gratifying,” added Dr. Thomas, who worked as a Mohs surgeon and taught medical students, residents, and fellows in a clinical environment before returning to NSU’s College of Osteopathic Medicine. “Throughout medical school, students are taught to learn from those above them and teach those below them. That idea continues throughout the physician’s career and is such a foundation in medical education, it is difficult to imagine practicing medicine without it.”

Robert Hasty, D.O., FACOI, a 2000 alumnus who serves as associate professor of internal medicine and program director of the NSU-COM/Palmetto General Hospital Internal Medicine Residency Program, finds



Dr. Jacqueline Thomas assessing a patient.

his faculty role especially fulfilling because of the all-important mentorship aspect. "Training the next generation of physicians is one of the best things one can do for society," said Dr. Hasty, who has been a faculty member since 2005. "Every day, I have the pleasure of knowing I am making a significant difference in training the next generation of caring and expert physicians."

THE D.O. DIFFERENCE: Why I Became an Osteopathic Physician



Dr. Paula Anderson-Worts

"I knew at an early age I wanted to be a doctor. After completing my undergraduate education,

my initial goal was just to be a physician. My desire was to practice medicine that provided primary care and focused on prevention and indigent care. I also wanted to stay in Florida, so I applied to three Florida allopathic medical schools and SECOM—the only osteopathic program in Florida at the time. Although I was exposed to D.O.s, it was not until I started the medical school application process that I really focused on what distinguished M.D.s from D.O.s. I really feel it was all part of God's master plan. I started to realize the osteopathic philosophy was more in line with my view of the type of medicine I wanted to practice."



Dr. Robert Hasty – "I had a calling to become a physician later than most. I began college as an economics major. Fueled by

positive reinforcement from great success in my undergraduate studies, I began to feel confident that I would succeed in whatever I might endeavor. At the same time, I felt a desire to do something with my life where I

would do something significant for the greater good. A well-timed conversation with a friend's mother (who was a seasoned nurse) about the benefit to mankind that health care providers make, particularly regarding physicians, was enough to ignite my passion to become a physician. Several years later, I was introduced to osteopathic medicine by a mutual friend of the late Matthew Terry, D.O. I then met with Morton Terry, D.O., the founder of NSU's Health Professions Division, who was interested in having me matriculate through NSU-COM. He gave me insight into the opportunities and unique qualities of osteopathic medicine. This clinched my choice, which has been one of the best decisions of my life."



Dr. Victor Jaffe

"I decided to become an osteopathic physician because I believe in the philosophy of mind, body, and spirit. I

wanted to be able to put that philosophy into practice with patients on a daily basis. I also wanted to have multiple and different treatment modalities to treat patients for their underlying pathology. Also, the experience I had growing up and going to an osteopathic physician who was extremely patient-centered and honestly listened to what I had to say as a patient leaned me toward osteopathic medicine."



Dr. Ken Johnson

"I had the extreme pleasure of going to Florida State University with a member of SECOM's charter class—William

Kirsh, D.O. Bill was the student liaison to Governor Bob Graham in Tallahassee, and he invited me to his office in the capital building. At that time, Bill showed me the plans to the new school where Dr. Morton Terry would open the first osteopathic medical school in Florida. Bill encouraged

me to consider applying after my Air Force commitment, and I did. I studied the unique aspects of osteopathic medicine for the next seven years and fell in love with the holistic aspects of the profession."



Dr. Nadine Chipon Schoepp

"At the age of 16, I was involved as the passenger of a rollover car accident. Following numer-

ous surgeries and months of recovery, my orthopedic surgeon became my mentor. I started shadowing her and fell in love with the profession. Waking up every morning with the ability to help and care for others is a true blessing. Now, six years after graduating medical school, I cannot imagine doing anything else."



Dr. Jacqueline Thomas

– "During my youth, I did not know there was a difference between osteopathic and allopathic physicians. I thought all

physicians treated the body as a whole and treated the whole person. I was fortunate enough to be exposed to M.D.s who treated people with a D.O. approach. It wasn't until I was applying to medical schools that I even learned there were two different philosophies and two different degrees. At that time, I discovered there was another tool—osteopathic manipulation—which could be used to help patients, and I wanted to learn it."



Dr. Jill Wallace-Ross

– "I specifically wanted to be an osteopathic physician because I wanted the ability to do manipulation, to have the

additional tool set to treat my patients with those techniques and methodologies."



MELNICK MEMORIES

Looking Back...at Some AHEC Highlights

By Arnold Melnick, D.O., M.Sc., FACOP

Founding Dean of Southeastern College of Osteopathic Medicine (NSU-COM)

EDITOR'S NOTE: The Melnick Memories column you are about to read marks the conclusion of a productive seven-year collaboration with *COM Outlook* that has allowed Dr. Melnick to share his historical reflections of the events that led to the creation, growth, and maturation of both the College of Osteopathic Medicine and the Health Professions Division. We thank Dr. Melnick for his journalistic contributions to *COM Outlook*, which have allowed us to see inside the development of our great college.

All I knew about area health education centers (AHEC) back in 1983 was what I heard about them at a meeting I described in one of my earliest columns. The key points of interest for me were support of rural medicine and some financial help. Plus, they included training programs for medical students. That was enough for me and I jumped in. Little did I realize what benefits to everyone this program would bring—or the memories it would provoke.

Becoming part of the national AHEC program—and getting compensated for what we did—enabled us to develop and expand our already established Department of Rural Medicine and train even more students. That was a result we had not really anticipated.

Then came another benefit. Working with the other three state medical schools to help them get into the AHEC system, and then developing an informal but friendly cooperative group, enabled us to create lines of communication between SECOM and the other Florida medical schools. I believe this linkage also improved some thinking about SECOM and osteopathic medicine and minimized possible osteopathic discrimination. In this effort, Steven Zucker, D.M.D., M.Ed., our AHEC director, in addition to his specific job, played a most important role.

These advantages and achievements also brought great help to the people we served. I am not sure SECOM could have financially done it alone, but with AHEC's help, medical care and service in rural areas and in underserved populations in South Florida, and then ultimately to all of the state, underwent considerable growth and improvement. Many more people received improved health care, and it all sprang from one simple meeting in Washington, D.C.

Numbers sometimes illustrate the story. Under our aegis, 25,000 student rotations, 5 million hours of service in underserved communities, and more than 200,000 school children, tobacco users, and health professionals all benefitted. Every dollar and every hour spent provided better health care for thousands of underserved people.

Unexpectedly, this new AHEC affiliation brought unexpectedly great honors to me personally for my role. Early on, Dr. Zucker almost completely took over the work of SECOM's AHEC Program. Because some of his fine work reflected nicely on me, several organizations recognized me personally. In 1988, the Everglades Area Health Education Center honored me with its Distinguished Service Award. In 1991, the National AHEC Directors Association did likewise, and in 1996, the Florida Statewide AHEC Program also gave me a similar honor. I accepted all three on behalf of SECOM's AHEC because our program was providing the vital services.

I haven't mentioned money, but financial support was crucial because it funded much of the services and education we provided in rural areas. In 2012 alone, we received about \$2.7 million to support our AHEC services. And since our start with AHEC, our school has been awarded around \$75 million. If I had dreamed of money in 1983, even my wildest ones never would have figured on the vastness of the monetary support we received. And by no stretch of the imagination could I have visualized our great impact on the underserved people of Florida.

From impulse to millions of dollars—from hope to the provision of numerous health care services. And much of the credit goes to Dr. Zucker, his associates, and all the students who participated in rotations under AHEC's aegis.



Dr. Steven Zucker



Hands-On Humanitarianism Highlights Inaugural Odyssey to Vietnam

“Why would you want to go there?” was a typical response when discussing the December 2012 medical outreach trip to the Mekong Delta region of Vietnam. This reaction did not come as a surprise. After all, the name of this communist country reminds most Americans of a sinister period in our history. For many, it brings back memories of a war that left scars on American society; scars so deep they would change a generation and fuel a cultural revolution. But to the 14 student and physician volunteers, this trip offered an opportunity of medical care and cultural immersion unlike anything we have experienced before. None of us had any idea of what to expect, but we all knew we were in for an incredible journey.

Less than a day after our final exams, the volunteers boarded the 30-hour series of flights to Ho Chi Minh City (Saigon), Vietnam. The group of 10 second-year NSU-COM students was led by Sam Snyder, D.O., chair of internal medicine, Almos Trif, M.D., Ph.D., J.D., professor of pathology, Harold Laubach, Ph.D., professor of microbiology and dean of the College of Medical Sciences, and his wife, Victoria. Our plane carried us over the top of the world and back down over Russia, China, and finally, to Vietnam. We arrived in Ho Chi Minh City around 2:00 a.m. local time. The warm humid air reminded us we were back near the equator and foreshadowed what our working days would be like.

The next day was spent getting to know our Vietnamese counterparts from the nonprofit organization Aid for Kids, which provided us with five translators who recently graduated from local universities and two Vietnamese



physicians, all of whom would work, eat, and explore Vietnam with us for the duration of the trip. The Vietnamese staff members welcomed us into their country and proudly shared their culture with both humor and humility. They would be instrumental in the success of our medical work in the coming days and would soon become our friends.

The area where we would provide medical care, Ben Tre Province, was two hours south of Ho Chi Minh City by bus. As we left the progressive city behind, it felt as if we had traveled into another world. From the bus window, we saw the first of what would be endless communist party propaganda. Red seemed to adorn everything, from the pictures and statues of Ho Chi Minh to signage on billboards. Grandiose government buildings rose out of the rice paddies where farmers worked the field by hand. Above-ground tombs dotted the rice fields and every so often, we would pass a memorial to those who had fought in the war. The hammer and sickle were displayed next to the national flag and served as a constant reminder of who was in charge.

Before we could start work, our entire team was invited to meet with government officials from the Department of Labor in Ben Tre. In the conference room of an open-air building, the group exchanged pleasantries with the officials over freshly cut coconuts and hot tea. The government officials expressed their gratitude for our commitment to help the underserved citizens of Vietnam and explained how happy they were to develop a positive relationship with American students and physicians. After several photo opportunities, the façade of communism seemed to be lifted, and our focus turned to the patients we would soon treat.





Each morning, after an early but multifarious Vietnamese breakfast, the NSU-COM group and the Vietnamese staff loaded two small vans for the 45-minute ride to our clinic site for the day. Our drivers carried us through the sea of motor-bikes, over bridges that we prayed we would make it across, and down narrow, palm-lined roads in the river delta. When the bridges and roads became too small, the van would stop short, and the group would carry the equipment across the foot bridges to the buildings we would use that day.

Upon arrival, the group was greeted by dozens of patients who sat patiently for their name to be called. All the patients were deemed underserved by the government and were issued an invitation to be seen by the American doctors. The group worked quickly to set up each of the five stations that would be staffed by a preceptor, a translator, and two students. Each half day, the students would rotate between triage, pharmacy, the medical lab, or one of two internal medicine stations.

As the patients began to pour in, it was apparent we were as foreign to them as they were to us. With the help of our translators, we were able to bridge the cultural and language gap and obtain the information we needed for proper diagnoses. Along the way, we picked up some basic words such as “Xin chào,” which is hello, and “đau,” which is pain in Vietnamese. With patience, perseverance, and willingness to reach beyond our comfort zones, we successfully diagnosed and treated many very grateful citizens of the Ben Tre Province.

The NSU-COM medical outreach team saw over 1,300 patients during the remaining seven medical days in a variety of locations, including open-air clinics, local community centers, and a home for the elderly and infirm. The students took advantage of every opportunity to learn from an amazing team of preceptors. Dr. Laubach and his wife taught each of us how to do diagnostic lab testing in the field such as hematocrit, blood typing, acid-fast stains, cholesterol, urinalysis, blood glucose, and more. Dr. Snyder shared with us his knowledge of internal medicine and nephrology,

while Dr. Trif pointed out rare medical conditions seen only in the footnotes of pathology books. Each student was able to completely work up each of his or her patients, including history and physical, labs, and prescriptions, as well as perform OMT – all under the guidance of our preceptors.

The hands-on patient contact and variety of conditions seen in Vietnam will prove invaluable as we finish our second year of medical school and begin hospital rotations. However, the trip was not limited to working and seeing patients. Our Vietnamese friends ensured we absorbed as much of the culture and region as possible with a boat trip down the Mekong River, visits to various local markets, dinners out on the town, a tour around Ho Chi Minh City, the war-relic Chu Chi Tunnels, and occasionally, a party or two. Some of our friends invited us to their homes to get to know their families while sharing spring rolls and dried squid.

Henry Miller, an American writer and painter, once said, “One’s destination is never a place, but a new way of seeing things.” This notion rang true through every experience during our trip to Vietnam. By immersing ourselves completely into this foreign environment, we were forced to shed our insecurities, our prejudices, and our learned behaviors. What we gained is a new perspective on ourselves, our world, and our career in medicine. We learned that in spite of what history or politics may tell us, we are not so different after all.

The student and physician participants of the 2012 medical outreach trip to Vietnam would like to extend a special thank you to Joy My Lien Degenhardt, director of Vietnam programs with Aid for Kids, and all of her hardworking translators and physicians who made this trip an incredible success. We would also like to thank the NSU-COM International Medical Outreach Club and especially Robin Jacobs, Ph.D., M.S.W., associate professor and director of international medicine, for without her hard work and dedication, this trip would not have been possible. And of course, we would like to thank our preceptors who worked tirelessly to share with us their expertise and compassion.



Cultural Enlightenment a Byproduct of Peru Medical Outreach Trip

I majored in anthropology in college and gained a tremendous appreciation for the different traditions, languages, and lifestyles that make people unique. But it was not until I first traveled out of the country that I realized the true wonder of *culture*.

There is a certain unexplainable rush people feel when they put themselves in a new environment—and it feels slightly uncomfortable. We become aware of our own culture when we immerse ourselves in a different culture, just as we learn about our individual personality through interaction with a variety of people. My decision to participate in the medical outreach trip to Peru last December was motivated by my strong belief that our lives are enriched when we learn to appreciate diversity.

Yet, as I reflect on my experience in Peru, I realize I was more impressed by the similarities between Peruvians and Americans than the differences. In other words, in my search for the exotic, I found the essential. I learned from several unique interactions with patients that all people—no matter their age, culture, or economic situation—desire to look and feel their best. Human nature drives people to seek health and wellness.

One of my very first interactions in the Peruvian clinic was with a young boy. He approached me as I was passing out hygiene supplies and asked for a toothbrush. I let him choose his favorite color, and he went back to sit with his mother. He approached me again and asked for a glass of water. I gave him water and went back to my task. He then ran toward me a few minutes later with a wet T-shirt and a huge grin and asked if we could take a picture together. He wanted to see his “new teeth.” It was heartwarming to witness the surge of confidence the young boy experienced simply from brushing his teeth.

Later in the week, my colleagues and I had the opportunity to learn from Brent Schillinger, M.D., an experienced dermatologist who saw hundreds of patients over the course

of four days. Many of the patients we saw had common dermatological complaints like rashes and warts. However, an impressive number of patients presented with cosmetic complaints like acne and superficial moles. Dr. Schillinger attended to the patients with cosmetic complaints, just as he did the patients with infectious skin conditions. At first, I questioned Dr. Schillinger’s approach because I study public health and have been taught to think in terms of how to do the most good with the fewest resources.

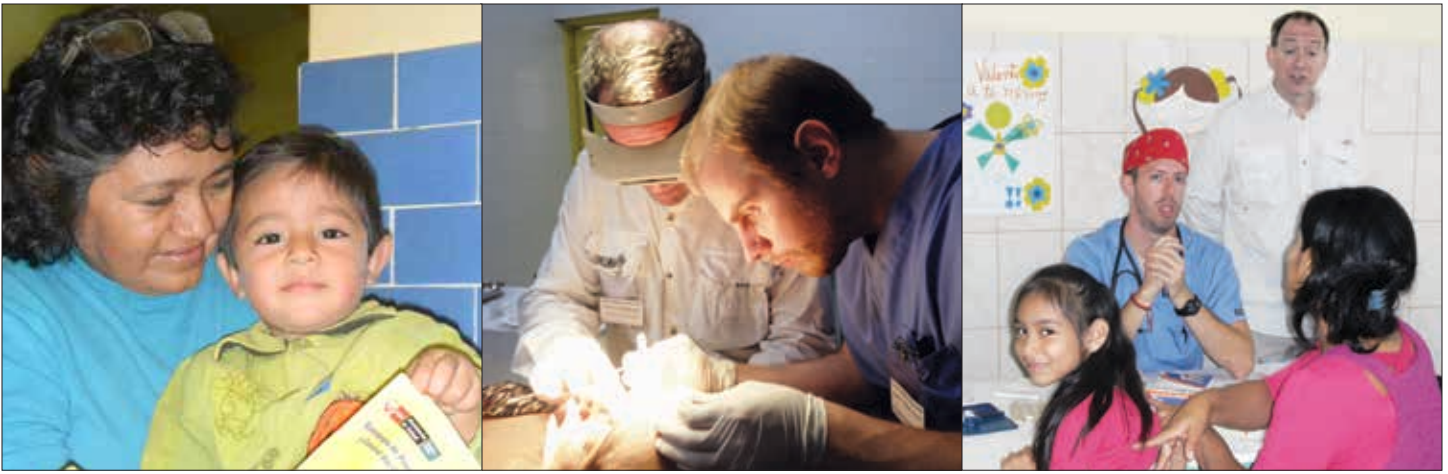
Many would argue that setting up a surgical suite to inject subcutaneous cortisol in acne cysts and excise benign lesions is not the most efficient strategy for a medical outreach team. Perhaps they are right. But I certainly changed my opinion after seeing the transformations of the patients.



What Dr. Schillinger knew, and my colleagues and I came to understand, is that even though an ugly skin tag might not kill a person, it can have a profound effect on one’s self esteem. The osteopathic profession teaches that there is a connection between the mind, body, and soul. Therefore, what affects one’s psyche affects one’s health.

Socioeconomic forces also have a profound effect on one’s health status. The patients we saw in the clinic were very poor and most worked as laborers. I could see how the everyday challenges of poverty took a toll on their wellbeing. Although the assumption is that most of the suffering in the developing world is due to infectious disease, we learned that poor people suffer from many chronic diseases as well.

Dr. Robin J. Jacobs, associate professor and director of international medicine, developed an ongoing research study to investigate common sources of musculoskeletal pain seen in patients in the areas we serve during the outreach trips. I, along with other students, served as research assistants to collect data. The majority of patients I interviewed reported suffering from pain on a daily basis. Chronic pain is as devastating to a person in Piura, Peru, as it is to a person in



the United States. We plan to present the results of the study to the osteopathic community so OMM treatment protocols specific to people in underdeveloped countries can be developed and implemented by future medical outreach teams.

My experience in Peru taught me that while there are real cultural differences in regards to health, all people share a similar desire to be well. This insight into human nature will undoubtedly affect the way I practice medicine. As a physician, I will have the privilege and responsibility of helping people improve their health. Whether it is by giving them a toothbrush, improving their physical appearance, or relieving them of chronic pain, it is all for the purpose of helping them live dignified lives.

Silvagnis Enjoy Medical Outreach Experience

By Debra R. Gibbs, B.A., Medical Communications Coordinator



When Dr. Anthony J. Silvagni, NSU-COM's longtime dean, participated in the medical outreach trip to Peru with OMS-II Brittany Gray and others, he

witnessed the students' "rapid growth in confidence and maturity, increased responsibility, and independence." In addition to working alongside the students and other participants, the dean met with community leaders to discuss NSU-COM's commitment to patient care.

His wife, Dianna L. Silvagni, J.D., clinical assistant professor of medical education, totally enjoyed taking part in her first official medical outreach endeavor. "I wasn't quite sure what to expect on this trip as a nonmedical

person," she said. Knowing that a pediatrician was on the trip, she "came prepared with markers, paper, and stickers" and spent the week organizing supplies for the physicians and students, watching children when parents were busy in examination rooms, and offering toothbrushes and toothpaste, along with some highly desired Disney character stickers. The children beamed as they picked out markers and stickers, making "those smiles worth the trip," Mrs. Silvagni said.

During one of the lunch breaks, the Silvagnis gave an art observation lecture to the participants. "It was very interesting to see the students go directly from the lecture to see patients. The responses were very positive. The students were able to see almost immediately how you could apply the art principles, observation skills, and patient care," she said. "It was very exciting for me to witness that response. The students and other participants in the medical outreach trip have been asked to participate in a program at the Fort Lauderdale Museum of Art during the WARI exhibit, which is pre-Inca Peruvian artworks, to talk about that art observation experience," she added.

Mrs. Silvagni remarked on the dedication exhibited by everyone at the clinic, especially that shown by Las Damas Salesianas, or The Salesian Ladies Association, a civil, nonprofit, humanitarian, and evangelical group of Catholic women that focuses its efforts in the service of poor people—especially women and children. The work of two doctors, Roger Reckis, D.D.S., who joined the group from out of state, and Dr. Schillinger, a dermatologist who has participated in medical outreach trips in the past, was also a highlight of the effort.

Despite suffering a leg injury during his time in Peru, Dr. Silvagni had nothing but fond memories of the outreach experience. "The students are so compassionate and demonstrate a global concern for health care," he said. "The 80-hour community service requirement we established was not created as a mandate, but as a means to give recognition and credit to students for the extensive generosity and commitment they share."



Improving Health and Heightening Clinical Skills in Jamaica

Now in its 12th year, the medical outreach trip to Jamaica, coordinated by Paula Anderson-Worts, D.O., M.P.H., associate professor of family medicine and public health and program director of the NSU-COM/Broward Health Family Practice Residency, continues to offer programs that enrich lives. Over the years, Dr. Anderson-Worts has developed an invaluable relationship with communities and volunteers throughout the country that helps NSU-COM students achieve hands-on clinical experience while providing medical, pharmacy, occupational therapy, dental, and ophthalmology care for underserved Jamaican populations.

During the Jamaica medical outreach excursion, held December 9-17, 2012, a 47-member contingent comprising volunteers, physicians, medical students, optometrists, pharmacy students, pharmacists, a public health attending, and a public health student worked together to serve over 2,000 patients in Westmoreland and St. James. Through dedication and creativity, the group transformed schools, churches, and office buildings into makeshift clinical sites to care for people in need. In addition, the participants provided free services such as medical care for various ailments, medication, preventative medical counseling, and eyeglasses.

"My most meaningful patient encounters in the last year and a half had been with paid actors that were instructed to hold their bellies and groan in agony as an automated voice told me that I 'may now enter the room,'" said OMS-II Joshua Axam when discussing the trip's significance. "All that changed when I booked my flight to Kingston in December. The automated voice was replaced by the words coming from a slew of attending physicians, colleagues, and pharmacists who traveled with me. Patients stopped pretending to scratch fictional rashes and began presenting with a variety of visible dermatological conditions I had only read about up to that point.

"Going on a medical outreach trip was by far the most important, rewarding, and significant event in my medical career thus far," he added. "By breaking away from the student-teacher hierarchy of the classroom, I built confidence in my own abilities and gained knowledge and skills in new areas. I was given the freedom and opportunity to act as a practicing physician, learn from my own mistakes, and seek guidance when needed."

According to OMS-II Patricia Ameida, "The experience exceeded my unclear expectations in a multitude of ways," she admitted. "As a medical student, I had the privilege to provide medical attention to impoverished individuals who would not have otherwise had the means to receive it. All the individuals I encountered were unique and appreciative of my attention. There was not one person who was rude, impatient, or ungrateful; in fact, the Jamaican population, as a whole, has to be one of the most gracious and courteous I have had the pleasure to interact with. Many even called me *doctor*, which made me blush with undeserving humility. I was able to immerse myself in the culture, which allowed me to gain insight on their simple, yet content, ways of life.

"Although I was only there for a week, I feel like I gained mountains of knowledge and experience that could not have been acquired from a textbook," she added. "The first day I was a timid, unsure medical student who did not even know how to write a prescription. By the final day, I was a lot more confident in my ability to approach a patient, make a diagnosis, and come up with a plan of action. I must attribute this immense growth to the overall cohesive-





ness of the medical outreach trip team and everyone's eager willingness to help one another. The trip was a priceless experience I will forever hold dear in my heart. It reaffirmed that I chose this career for the right reasons, and it gave me a renewed sense of appreciation and humbleness."

OMS-II Chris Orpiano echoed the praise offered by his cohorts before putting his own spin on the international medical outreach experience. "The trip was my first medical experience abroad, and I believe it was truly life changing," he explained. "Going through medical school, especially during the first two years, students can forget about the main drive of helping others while we are building our medical foundation. Even though our school provides shadowing opportunities, this was the first time we were put fully in charge of a patient's care.

"The confidence I gained from the experience will stay with me for the rest of my professional career," added Orpiano, who encountered some interesting—and indelible—patient cases. "Having just finished the cardiovascular system in our systems courses, I luckily was able to pick up various heart sounds that ranged from systolic murmurs to an atrial fibrillation. We are always instructed to listen to everyone's hearts and lungs, so it solidified the lesson we have been taught, which is to hear as many normal physiologies as possible so when an abnormal one appears, we will not miss it.

A second case, involving a middle-age woman suffering from upper-thoracic musculoskeletal pain, truly solidified his decision to become an osteopathic physician. "While obtaining the patient history, I realized that

not only could I give her medicine just like any other doctor, but I could also help treat her then and there with my osteopathic principles and practice skills," he said. "Although I couldn't find the proper surface to do my *Kirkville Crunch*, I was able to offer a minor correction on a bed. I found it extremely beneficial to have the tool of OPP in my back pocket. Overall, the medical outreach trip was an extraordinary learning experience. It gave me a confidence I did not have before, a self-assuring feeling that I will become a compassionate and competent physician able to truly help and care for others."





Colonel Bret T. Ackermann, D.O., FAAEM, FACEP ('92) recently

celebrated 20 years of active duty service as an emergency medicine physician in the U.S. Army Medical Corps. His service includes combat deployments in support of U.S. Special Operations Command to Iraq in 2003 and 2006 and Afghanistan in 2004 and 2005. He also was one of two army physicians who attended the 2010 resident class of the U.S. Army War College in Carlisle, Pennsylvania, where he earned a master's degree in Strategic Studies. Currently assigned to Tripler Army Medical Center, in July 2013, he will assume command of the medical brigade headquartered at Fort Shafter, Hawaii, 18th Medical Command (Deployment Support), where he will be responsible for the mission command of all assigned and attached medical units in support of U.S. Army-Pacific.



Deanna Andrews, D.O. ('97), who is board certified by the American Board of Pediatrics and is practicing pediatrics in Nampa, Idaho, earned second-place honors in the *Contemporary Pediatrics Journal* National Photo Contest for the image showcased above.

Fritz Barionette, M.S.B.I., CPHT ('97), a 2011 NSU-COM Biomedical Informatics alumnus, was promoted to the position of integration architect/technical project manager at Cerner Corporation in Kansas

City, Missouri, after working with the organization for less than a year. He also serves as an adjunct instructor in the college's Biomedical Informatics program.

Dana Block-Abraham, D.O. ('07), who is currently doing a maternal-fetal medicine fellowship at the University of Maryland, was appointed to a two-year term on the American Medical Political Action Committee Board of Directors, becoming the first D.O. to ever be appointed to this prestigious board. In addition, she was recently appointed to serve a one-year term on the American College of Obstetricians and Gynecologists' Committee on American Indian/Alaska Native Women's Health Care and is in her sixth year of serving as a sectional delegate to the American Medical Association House of Delegates, representing its Residents and Fellows Section.

Frank X. Conidi, D.O. ('95), who was recently reappointed as the team neurologist for the Florida Panthers' hockey team, was elected vice chair of the American Academy of Neurology Sports Neurology Section and appointed co-chair of the Florida High School Athletic Association's Concussion Committee. In addition, he had his article entitled "Sports Concussion: The Role of the Headache Specialist" published in *Headache: The Journal of Head and Face Pain* and was interviewed on ESPN about the May 2012 death of longtime NFL player Junior Seau and the possible link to chronic traumatic encephalopathy.

Gaston Dana D.O. ('92) was recently certified by the American Registry for Diagnostic Medical Sonography as a registered physician in vascu-

lar interpretation and is now certified in five specialties: internal medicine, emergency medicine, hyperbaric medicine, medical acupuncture, and vascular interpretation. In addition, he was elected as an Indiana Osteopathic Association board member, became a clinical assistant professor at Marian University College of Osteopathic Medicine, and was named chairman of medicine at Johnson Memorial Hospital. He also received the Johnson Memorial Hospital 2012 Service of Excellence Physician of the Year Award and was named chairman of the 116th Annual Convention of the Indiana Osteopathic Association.

Michelle Ferreira, D.O. ('06) had a book chapter titled "An Unusual Cause of Cervical Dystonia: Porencephalic Cyst, Putaminal, Pallidal, and Cerebellar Atrophy, Aqueductal Stenosis, and Obstructive Hydrocephalus" published in *Movement Disorders: Unforgettable Cases and Lessons from the Bedside* by Hubert H. Fernandez M.D., and Marcelo Merello M.D. Dr. Ferreira is a board-certified neurologist and movement disorders specialist practicing in Miami, Florida.



Melinda F. Greenfield, D.O. ('94), a self-employed dermatologist in Albany, Georgia, who

trains year-round in running, swimming, biking, and weightlifting, was awarded an athletic sponsorship through Athleta—a women's-specific athletic clothing company. She was chosen to represent the new store in Atlanta. During her one-year sponsorship, she will participate in a variety of lectures, runs, and triathlons while representing the Athleta brand.

Kevin Friedman, D.O. ('05) recently coauthored an article entitled "2-Year Follow-Up to STeP Trial Shows Sustainability of Structured Self-Monitoring of Blood Glucose Utilization: Results from the STeP Practice Logistics and Usability Survey (STeP PLUS)" in the February issue of *Diabetes Technology & Therapeutics*.



Michael W. Higgins, D.O. ('96), a practicing orthopedic surgeon in Spring Hill, Florida,

is hosting a biweekly radio talk show called *No Bones About It* on WWJB AM 1450/WXJB 99.9 FM where current concepts in orthopedic surgery, diseases, diagnoses, and treatment options are discussed and listeners can call in to ask various questions. The program, which highlights the osteopathic profession, also is available on the Web.



James O. Hill II, D.O. ('00), who served in Baghdad, Iraq, for a year in what is known as

the Green Zone, has accepted a position as ER medical director at Shoals Hospital in Florence, Alabama. In addition, he was recently honored for his military contributions at The Charmettes Incorporated of Broward County Chapter Third Annual Cancer Fundraiser that centered on the theme *Honoring Our Unsung Military Heroes*.

Gregory J. James, D.O., M.P.H., FACOPF dist. ('88) was elected president of the Florida Osteopathic Medical Association (FOMA) during the organization's 110th Annual



Convention held February 20-24 in Weston. Dr. James, who has been a FOMA

member for over 21 years, also serves as a director for the American Osteopathic Board of Family Physicians, as a Florida member of the American Osteopathic Association (AOA) House of Delegates, and on the AOA Council on Postdoctoral Training. He recently received another prestigious accolade when he was named Educator of the Year by the American College of Osteopathic Family Physicians.



Marc G. Kaprow, D.O., FACOI

('01) recently accepted a position as medical director for the United Healthcare of Florida Community and State Long-Term Care Program, which provides long-term care and nursing home diversion support to thousands of Medicaid patients in 62 of 67 Florida counties. Additionally, Dr. Kaprow was reelected to a second term as president of the Broward County Osteopathic Medical Association and was appointed to the American College of Osteopathic Internists Clinical Practice Committee.

Kristophe J. Karami D.O., M.S.

('06) recently became an instructor in the Department of Neurosurgery at the Johns Hopkins University School of Medicine in Baltimore, Maryland. His specialty includes surgical spinal oncology, minimally invasive spinal techniques, and spinal-cord injury research.

Christopher E. Keel, D.O.

('09), who is a urology resi-



dent at Tulane University School of Medicine in New Orleans, Louisiana, recently had

his article entitled "Protective Effects of Reducing Renal Ischemia-Reperfusion Injury During Renal Hilar Clamping: Use of Allopurinol as a Nephroprotective Agent" published in the January 2013 issue of *Urology*.



William Kirby, D.O., FAOCD

('00) recently celebrated his 100th live appearance on QVC,

where he serves as the national spokesman for Neurogena Dermatologics. Additionally, he recently filmed another episode of the nationally syndicated show *The Doctors*, which will air this spring. Dr. Kirby and his investment group also opened their seventh laser tattoo removal clinic named Dr. Tattoff, which now has facilities in California, Texas, and Arizona. Lastly, he authored a textbook chapter on the art and science of laser tattoo removal, which was published in the second edition of *Lasers and Energy Devices for the Skin*.

Christopher D. Robert, D.O.

('99) has been appointed chief of the Department of Anesthesiology at Hennepin County Medical Center, which is a level 1 trauma center in Minneapolis, Minnesota.



Kimberly A. Sackheim, D.O.

('06), who is affiliated with the Department of Pain Management and Palliative Care at

Beth Israel Medical Center in New York, recently published a book entitled *Rehab Clinical Pocket Guide: Rehabilitation Medicine*, which is a reference guide for medical students, residents, fellows, and new attending physicians. Her next book—*Pain Management Clinical Pocket Guide*—will be published later this year.



Brett M. Scotch, D.O., FAOCO

('99) received the 2012 Community Physician of the Year

Award from Florida Hospital Zephyrhills. The award recognizes physicians who foster a culture that supports a learning environment, communicate in a respectful and professional manner with patients, families, and staff members, and optimize patient safety to improve patient outcomes.



William H. Stager, D.O., M.S., M.P.H., FAAFP, FAAMA, FAAO, FACOFP

('89) recently

received his FAAFP fellowship designation, making him the only physician to have the following four fellow designations—Fellow of the American Academy of Family Physicians, Fellow of the American Academy of Medical Acupuncture, Fellow of the American Academy of Osteopathy, and Fellow of the American College of Osteopathic Family Physicians. He currently serves as the second vice president of the Florida Osteopathic Medical Association.

James M. Turner D.O., FACOFP, FACOEP

('88) has been named acting dean of William Carey University College of

Osteopathic Medicine in Hattiesburg, Mississippi, becoming the first NSU-COM graduate to be named dean of an osteopathic medical school. He also serves as the college's associate dean for clinical sciences and associate professor of medicine.

L. Michael Waters, D.O.

('07) was appointed assistant professor of community health and family medicine at the University of Florida College of Medicine and medical director of the University of Florida Crossroads Family Medicine Center.



Tony L. Weaver, D.O.

('11), a general surgery resident at the Mayo Clinic in Jacksonville, Florida, recently presented his poster entitled "Needle Before the Knife: Image-Guided Management of Pneumoperitoneum" at the Southeastern Surgical Congress in Jacksonville. He also authored a similarly titled paper that was accepted for publication in *Surgical Laparoscopy Endoscopy and Percutaneous Techniques*.



Jason Zell, D.O., M.P.H.

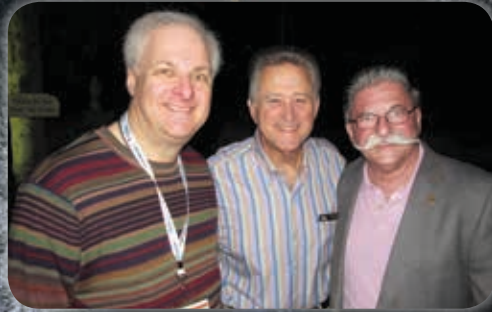
('01) was among 12 physicians from across the country

to receive a Cancer Clinical Investigator Team Leadership Award in January from the National Cancer Institute. The award recognizes exceptional cancer investigators for their contributions to the advancement of clinical research. Dr. Zell is a medical oncologist and co-leader of the Colon Cancer Disease-Oriented Team at the University of California, Irvine's Chao Family Comprehensive Cancer Center.

Alumni Reception at the 110th Florida Osteopathic Medical Association Convention

February 22, 2013 - Hyatt Regency Bonaventure - Weston

On February 22, NSU-COM held its annual alumni reception at the Florida Osteopathic Medical Association Convention, which attracted about 125 attendees. In addition to alumni and students, FOMA representatives, Ray Stowers, D.O., president of the American Osteopathic Association, and other AOA delegates attended the waterside reception. "The FOMA gathering gives us the opportunity to get together as an osteopathic family, reminisce, and share some good times," said Howard Neer, D.O., FACOFP, associate dean of alumni affairs. "It also provides our students with excellent opportunities to network during both the conference and the reception."



NSU-COM Training Leads to Invention of Scrotal Rehabilitation Device

New device offers comfort to soldiers suffering from genitourinary trauma



Dr. Stringer, circa 2006.

Since starting my urology residency at San Antonio Military Medical Center (SAMMC – formerly known as Brooke Army Medical Center) in Texas, I’ve been shocked by the number of wounded soldiers returning from Afghanistan with genitourinary trauma caused by improvised explosive devices. Many of the soldiers arrive at SAMMC from overseas with single or double lower-extremity amputations and open abdominal/groin wounds. In addition to treating renal, ureteral, and vesicular trauma, my urology service is kept very busy caring for the scrotal and penile wounds that so often affect our soldiers. In fact, it is not uncommon for a wounded soldier to arrive at SAMMC with a scrotum swollen roughly to the size of a melon.

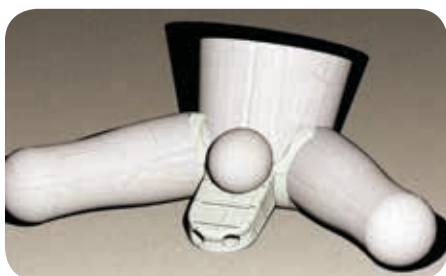
These wounded soldiers are often 18 to 21 years old, some married just before their deployment, and their fertility and sexual function are central to their recovery and morale. In caring for these patients, I was challenged by the lack of technology available for scrotal wound care because progress in this domain stopped long ago at the bag of frozen peas. In 2012, I started to brainstorm about inventing a new device to improve scrotal wound care. In my *free time* outside an 80-plus-hour work week, I began to read the existing medical literature on this topic and learn about the medical-device industry, intellectual property, and medical-trial design.

A year later, I now have a pending patent in over 100 countries for the AeroLift® device and have formed a partnership with the University of Texas San Antonio to build my first prototypes. My orthopedic colleagues at SAMMC refer to the device as a “scrotal orthotic,” and I think the term is very descriptive. The AeroLift® device elevates, cools, and dries the injured swollen scrotum. I’m seeking

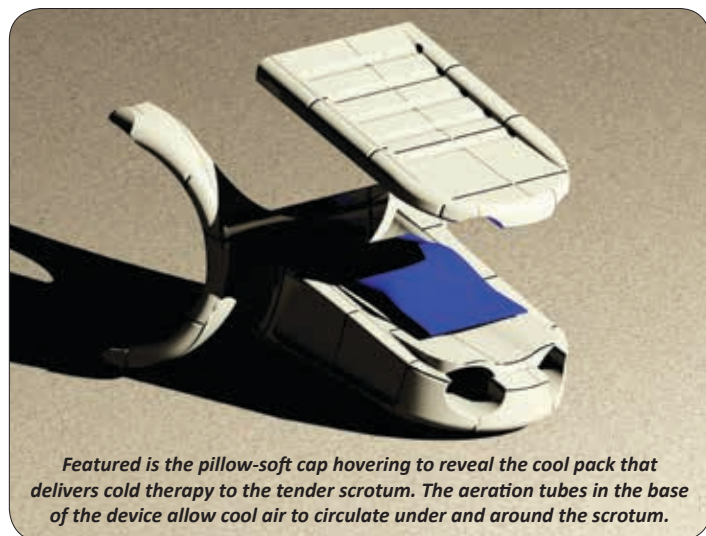
investor support to continue developing this device and possess great hope that within two years, I will have a finished product to be able to offer our wounded soldiers who deserve much more than a towel and an ice bag to treat their genitourinary injuries.

I went to an osteopathic medical school because I wanted to balance the science and the art of medicine. I also wanted to keep my creativity alive in my surgical practice, and I felt that NSU-COM would nurture that goal. Clearly, I chose wisely when I selected NSU-COM for my medical education. Every time I sit down to work on this project, I am using science, creativity, my medical education, my sense of caring for the whole patient, and the strong work ethic that was fostered at NSU-COM. Taking this device from a sketch on a napkin to a patented prototype has allowed me to meld my creative entrepreneurial talents into a grueling military surgical training program. The greatest measure of success I believe is whether or not I can do all of the above while maintaining confidence as a caring husband and a father to two beautiful children. It is very much an osteopathic principle to balance all of these commitments, and I feel lucky to have had such strong training in this area.

If you have questions about the device or are interested in funding the next phase of development, please contact Dr. Stringer at mattstringer2@gmail.com.



investor support to continue developing this device and possess great hope that within two years, I will have a finished product to be able to offer our wounded soldiers who deserve much more than a towel and an ice bag to treat their genitourinary injuries.



Featured is the pillow-soft cap hovering to reveal the cool pack that delivers cold therapy to the tender scrotum. The aeration tubes in the base of the device allow cool air to circulate under and around the scrotum.

Getting to Know...

1993 Alumnus Dr. Andrew Gross



Fast Facts: Andrew S. Gross, D.O., FACOFP, who graduated from NSU-COM in 1993, lives in Dunedin, Florida, with his wife Cynthia and son Colton, who also goes by the moniker Cody. “Cody has been following my involvement in osteopathic medicine organizations since weeks after his birth when we brought him to his first Pinellas County Osteopathic Medical Society convention,” Dr. Gross stated. “Lately, if we don’t bring Cody to one of our events, everyone asks where he is and why he isn’t with us.”

Please summarize how you became interested in medicine and decided to become a physician. My father, a pharmacist, was my inspiration to pursue a career in medicine. As I was growing up, I had the opportunity to read and review his old college textbooks from when he went to the Brooklyn College of Pharmacy. I especially remember reading his textbooks from a course he took in pharmacognosy, which included the study of herbal substances and how they developed into medical uses. He actually kept many of his herbs in cellophane bags over the years, which I used in a high school presentation as part of a medieval fair demonstrating herbal medical treatments used during medieval times. It was such fun to incorporate the studies of my father into my high school studies.

While attending Piper High School in Sunrise, Florida, I was very active in the high school band program. By the time I was a junior in high school, I played mallets in the marching band, bassoon in the symphonic band, and piano/tenor sax in the jazz band. I earned the John Phillip Souza Award as a junior in high school for my efforts with the band programs, which was a rare feat since this was usually given to a senior. However, I knew that if I continued in the band, I was being considered for either drum major or band captain, which would have been too much of a distraction for my eventual choice to prepare to pursue premed in college.

As much as I loved music, I knew my future would be in medicine and decided to leave the band during my senior year. I then pushed myself into advanced placement biology, advanced placement physics, and advanced placement calculus while also doing a course as a laboratory assistant in the chemistry lab. By the time I graduated high school, I finished my challenging senior year with straight A grades, boosted my GPA, and was accepted to the University of South Florida (USF) for my undergraduate studies.

Why did you decide to attend SECOM (NSU-COM), and how did you come to learn about osteopathic medicine? My personal family doctor as I was growing up was a D.O. My father used to tell me he wanted to make sure we went to a D.O. because from his practice as a pharmacist, osteopathic physicians were friendlier people, seemed to spend more time with their patients, and seemed to listen more. My role models were always osteopathic physicians, and the only schools I chose to apply to were osteopathic programs. Since I grew up in Sunrise, Florida, it was an easy choice to apply to the Southeastern University of Health Sciences College of Osteopathic Medicine in North Miami. When I was accepted, I was thrilled to have the opportunity to learn about my career choice near the place I grew up.

What was the most memorable aspect of your osteopathic education at SECOM (NSU-COM)? The most memorable aspect of my medical school education was the people around me. The professors had a true love to teach and possessed a desire to see us do well. Our class was cohesive and worked well together. We also didn’t compete against each other, which was the most frustrating part about life during my undergraduate premedical program. We studied together as colleagues and pushed each other to help us all succeed.

My father was right. I suppose the reason osteopathic physicians are friendlier doctors goes back to how we were trained. The spirit of working together through the difficult curriculum is probably the most memorable part of medical school and is a part of how I continue to work with colleagues, residents, and students.

Please describe in detail what you are doing professionally at the moment and why you enjoy it. My practice has certainly evolved over the years since graduating in 1993. I am currently practicing in a large group family medicine practice specializing in managing rehabilitation and skilled nursing patients in many nursing homes throughout the Tampa Bay area. Personally, I follow patients in about 16 nursing homes in



Dr. Silvagni shares a fun moment with Cody.

“The most memorable aspect of my medical school education was the people around me. The professors had a true love to teach and possessed a desire to see us do well.” DR. ANDREW GROSS

Pinellas County. Our group sees patients at many more facilities throughout Pinellas, Hillsborough, and Pasco counties. My major enjoyment comes from watching my patients recover from their short-term rehab and overcome their debilities and then being discharged home.

I had been in private practice for about 14 years when I was approached with an opportunity to join the group family medicine practice under Vincent DiLella, D.O., in 2010. I was quite concerned about how I would be able to continue to run my solo practice with all the questions lingering at the time about health care reform. This opportunity allowed me to continue my hospital practice, continue teaching our future colleagues in postgraduate medical education, and grow with the osteopathic medicine organizations I have always supported. It was probably the most difficult decision I ever made to give up my private practice, but in retrospect it was the happiest decision I ever made since my practice is thriving and I am challenged by how much more it can grow. The most rewarding part of my career is how many patients from my old private practice still drive 40 minutes north through suburban traffic to remain my patient—a loyalty which still humbles me.

What has been the most fulfilling aspect of being a physician? Making an impact in someone’s life.

Has there been a specific case that truly made you appreciate the reason you became a physician? If so, please provide some specific details. Years ago, one of my patients asked my office staff if I would see her son, who normally visited his pediatrician. He was having abdominal pain and nausea and not improving.

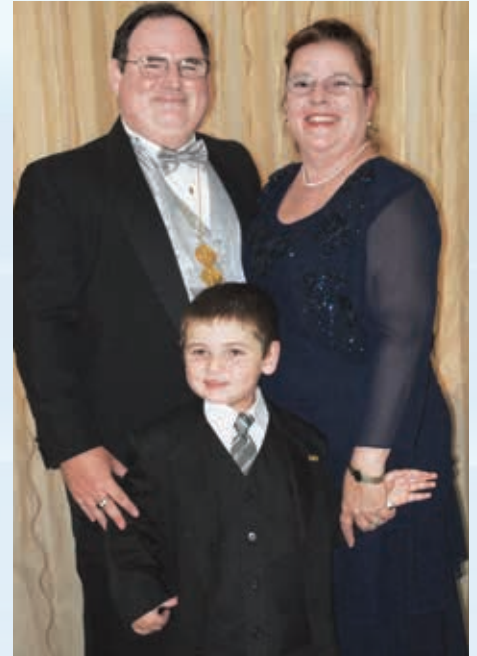
She called his pediatrician and received a response from a service telling her to continue to give him his ranitidine and come back to the office as planned a week later. I saw this patient with my resident that same day.

When I walked into the exam room, he was lying in a fetal position with obvious discomfort. He clearly had the signs of an acute abdomen issue, which his pediatrician not only didn’t find, but more importantly, didn’t allow the opportunity to detect since the patient was not given the chance to go back to the pediatrician’s office. We called EMS and had the boy transferred to the local children’s hospital. He was diagnosed with acute peritonitis from a ruptured appendix, placed on IV antibiotics for about a week, and then brought back during his school spring break for an elective appendectomy after his infection calmed down. He stopped following with his pediatrician and stayed in my practice for years to follow.

I have shared this story with many house staff members on my service when his family comes in since the learning message is so clear: If a patient isn’t getting better, don’t ignore the symptoms. It’s important to take another look since the exam could change and you can see the problem more clearly.

What personal and professional achievements are you the proudest about? My proudest achievement is being able to fall in love with the most wonderful wife a person can share his life with and raise such a wonderful son. I hope I can inspire my son to follow his dreams much the same way my parents inspired me.

What goals are you looking to achieve as the incoming president of



NSU-COM’s Alumni Association, and why are you so willing to give back to the college in this manner? I hope to inspire my colleagues to continue to serve our profession, students, and each other in a way similar to how our mentors inspired us to remain involved. I remember my days in medical school when I served as the editor of the *Signs and Symptoms* school newspaper and joined my colleagues in getting involved in many activities and organizational functions while in school. To this day, I continue to serve as the current president of the Florida Society of the American College of Family Physicians, a past president of the Pinellas County Osteopathic Medical Society, a trustee of the Florida Osteopathic Medical Association, and serve on committees as local as my community hospital to the national ACOFP. I hope to inspire my fellow alumni to stay involved with each other just as we did when we were in school since this fellowship is part of what makes our profession so special.

Alumni Association Fund Honor Roll

In the spring of 1999, NSU-COM launched an alumni-based fund-raising effort to generate dollars that would be used to create an endowment fund to reduce future tuition costs for NSU-COM students and produce a funding pool that would be utilized for discretionary purposes as determined by the Alumni Association Executive Committee. Every effort has been made to ensure the accuracy of the following list of donors; however, if you notice an error or omission, please contact **Lynne Cawley** in the Office of Alumni Affairs at **(954) 262-1029**.

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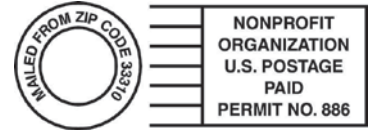
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Health Professions Division
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2013 Calendar of Events

May 16, 2013

Senior Awards Ceremony

1:30 p.m.

Steele Auditorium – Health Professions Division

May 17, 2013

Senior Awards/Dinner Dance

7:00 p.m.

Westin Diplomat Resort and Spa in Hollywood, Florida

May 19, 2013

Commencement Ceremony

Noon – 3:30 p.m.

BB&T Center – Sunrise, Florida

August 11, 2013

Class of 2017 White Coat Ceremony

10:00 a.m.

Signature Grand - Davie, Florida