

Winter 2015

# COM Outlook Fall 2014/Winter 2015

College of Osteopathic Medicine

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## NSUWorks Citation

College of Osteopathic Medicine, "COM Outlook Fall 2014/Winter 2015" (2015). *COM Outlook*. 48.  
[https://nsuworks.nova.edu/hpd\\_com\\_outlook/48](https://nsuworks.nova.edu/hpd_com_outlook/48)

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Fall 2014/Winter 2015

# COM Outlook

Nova Southeastern University College of Osteopathic Medicine

## Fun Fantasy

### What Would NSU-COM Students Do if They *Ruled the School*?



REMEMBERING...DR. ROSEBUD FOSTER

ALSO IN THIS ISSUE

Biomedical Informatics Program Update • Getting to Know...Dr. Jay Fleisher • Breaking Barriers...Dr. Joshua Lenchus

# Dean's Message

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

## Curricular Changes on the Horizon to Meet 21<sup>st</sup> Century Demands



Medicine today is growing in its complexity, and expectations of the 21<sup>st</sup> century physician far exceed any other time in history. Additionally, the demands placed on the medical student today in terms of time and finances are beyond what anyone would have imagined 15 or 20 years ago.

We at NSU-COM are considering the development of a curricular change that will develop the high-quality physicians we currently produce with a more realistic expectation of what must be accomplished to reach demanding and rewarding goals of medicine's future.

The challenge today in medical education is to present to the student a balance of factual knowledge, the ability to discriminate, the skills for scientific inquiry and the usage of technology, the coordination to perform procedures and techniques, and the confidence to be a lifelong self-learner. These learning objectives need to be done in an integrated program so the graduating physicians remain patient-centered and compassionate while prepared to practice medicine throughout the 21<sup>st</sup> century. The implementation of this curriculum will require a very difficult, but necessary, critique of our current curriculum.

There are areas that need to be added, and areas that need to be reexamined or possibly reduced, with respect to their content. I have charged the Academic Curriculum Committee to begin an evaluation by examining courses that can reasonably be decreased without a reduction in the knowledge necessary to educate excellent physicians. We are excited to embark upon the transformation.

A perfect example of the blend of traditional and new ways of training physicians was reported by National Public Radio (NPR) in a story broadcast on September 29. In the report, a neurologist on rounds with a group of medical students was teaching the strength of effective bedside clinical medicine. The experience showed the benefits of laboratory and radiologic in-

formation as a tool rather than a perfect solution in diagnosing patients' ailments. The adage that says the purpose of laboratory and radiologic information is to confirm and not make a diagnosis holds true, even with today's technology.

The case presented on NPR involved a woman with muscular weakness. The neurologist was consulted to evaluate the possibility she had suffered a stroke based on a CAT scan with contrast. On examination, the neurologist asked the patient to squeeze the bulb of a blood-pressure cuff 10 times. The physician then asked the students to monitor the test and determine the patient's rate of muscular fatigue during the examination. As the students read the gauge, they noticed the patient's muscle fatigue increased and her strength decreased rapidly during the last five compressions of the bulb. The neurologist then explained the medical basis for his bedside test and ordered a test that confirmed myasthenia gravis instead of a stroke.

This case underlines our purpose as we examine the methods of basic tenets and practices of training and combine them with our new clinical approaches. We are adding to our curriculum, including the principles of art observation to improve visual diagnostic skills and cognition, the increased use of standardized patient procedures, and the increased use of computerized mannequins to improve skilled procedures prior to introduction to the clinical environment.

We also realize we cannot continue to add courses without a serious evaluation of what we are presently offering. The current courses—along with more genetics, knowledge about genome therapy, selection of pharmaceuticals based on DNA receptor information, and other scientific breakthroughs—must also be included in the assessment.

Choosing the correct content must go hand-in-hand with the successful use of time. First- and second-year students currently take full schedules of approximately 25 credits per semester, along with the requisite quizzes and exams. As we seek to use instruction time to the best advantage, we must create the most innovative and successful curriculum to continue to be the leaders we are in the education of 21<sup>st</sup> century physicians. We are leaders—and leaders we will remain.

COM Outlook is produced by  
Nova Southeastern University  
College of Osteopathic Medicine  
3200 South University Drive  
Fort Lauderdale, FL 33328-2018

<http://medicine.nova.edu>

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NSU's College of Osteopathic Medicine was established  
in 1979 and matriculated its first class in 1981.



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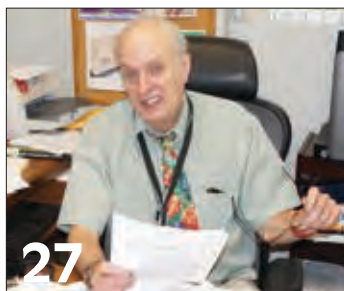
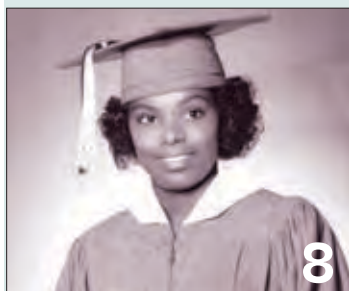
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## HPD Chancellor's Communiqué

*Frederick Lippman, R.Ph., Ed.D.*

### Dr. Rosebud Foster...Remembering a Kind, Competent Colleague



Dr. Rosebud Foster, who served as special assistant to my office and as deputy director of the College of Osteopathic Medicine's AHEC Program, was a uniquely skilled and intellectually brilliant woman of incredible human-

ity and personal capabilities. She also played a major role in the construct of NSU's Health Professions Division.

I first met Dr. Foster, who passed away on July 20, in the early 1980s during a time when she was serving as the pioneer academic and administrative leader charged with establishing a series of programs at Florida International University in Miami, including its nursing program. I happened to be working in public service as a member of the Florida House of Representatives at the time, and she came to me because my jurisdiction was health issues.

Working with my legislative colleagues, we supported the establishment of a nursing program at FIU. Several years later, Dr. Foster and I got to know each other better when I came to work at Southeastern University of the Health Sciences. At the time, Dr. Foster was serving as a consultant in our AHEC Program relative to her previous service as a nurse professional and FIU educator and administrator.

Although she remained a full-time FIU administrator, the university's leadership allowed her to spend a portion of her work-week with us in the AHEC Program to address the needs of rural and underserved areas of interest to the Florida Legislature. In the late 1990s, when I became executive vice chancellor and provost of NSU's Health Professions Division, I asked Dr. Foster to join us full-time as she was already contemplating her retirement from FIU.

In 2001, this became a reality, with Dr. Foster serving as an academic and informational diplomat for the Health Professions Division due to the national recognition she had achieved as an individual who understood health care disparities that existed in minority and underserved areas. Throughout her distinguished career, she sat on a number of presidential commissions and served as a respected information source for the executive offices of various Florida governors because they trusted her wealth of knowledge, which was not anecdotal. It was always supported with well-documented facts as well as a lifetime of experience in dealing with the delivery of—and addressing the disparities that existed within—health care.

Dr. Foster was a multifaceted individual who worked closely with Dr. Steven Zucker and others on our hugely successful tobacco cessation initiatives. She also taught in our Master of Public Health Program from its inception and served as a pillar of strength to coordinate, along with Dr. Cyril Blavo, the ascension of the program to the esteemed and accredited entity it is today. Additionally, she served as my office's special assistant in acting as the chairperson for the pro-forma committee that was established to provide information relative to the viability of creating a nursing program at the Health Professions Division.

Because of her well-regarded reputation with the nursing profession and other health care professionals, she assembled a wonderful team of individuals that provided us with fact-based information related to the marketplace conditions and the resultant needs of the nursing professional community in the state of Florida. The efforts of Dr. Foster and her pro-forma committee would soon lead to the successful creation of our nursing program, which would eventually evolve into the College of Nursing.

Dr. Foster was an incredibly valuable asset to the Health Professions Division and my office. She will be sorely missed not only personally to me as a person who always displayed her kindness, guidance, and abilities, but by the individuals who received the advice and advocacy of a very competent health care professional and thoughtful human being.

# Selective Rotation in South Korea Offers Fourth-Year Student Keen Insights

By OMS-IV Hanjo Kwon-Anderson

## Why I Chose to Do This Rotation

I recently chose to rotate at Severance Hospital, which is a university hospital of Yonsei Medical School located in Seoul, South Korea, because I believed the site would provide me exposure to serving the urban population in South Korea, where I am from originally. I also felt that as a future U.S. pediatrician, I would draw patients seeking physicians that speak Korean, which means I'll need to be familiar with the common diseases and the treatment modality widely used in South Korea in order to better understand my patients and their conditions. I also felt this experience would aid my understanding of epidemiology for some of the common illnesses they encounter in South Korea.

## Common Diseases in South Korea

On my first day, I was surprised to see the large number of patients that had aseptic meningitis, hand-foot-and-mouth disease, herpangina, and Kawasaki disease. My preceptor told me aseptic meningitis is still very common in South Korea and asked me how many aseptic meningitis patients I saw during my pediatric rotation. I recalled several patients with bacterial meningitis and maybe a couple more with aseptic meningitis, but not to this extent.

Later, I learned from my personal research that there had been numerous outbreaks of enterovirus 71 (EV71) infection in Asia, including China, Taiwan, Singapore, Malaysia, and South Korea in the recent past. EV71 infection in these countries is still quite prevalent. Consequently, due to the fatal nature of the neurological compli-

cations from the disease, China started developing vaccinations for EV71. I also saw many patients with Kawasaki disease. Although it is rarely seen in the United States, it is pretty common in South Korea as the disease is most prevalent in the Asian population. It was also surprising to see quite a few cases of active and latent tuberculosis during my rotation.

## The Relational Aspects of Patient Care in South Korea

I found that South Korean doctors have a very casual approach to speaking to patients and their family members. They would not only speak about the patients' condition, but would often carry on a conversation about the children's schooling, their emotional well-being, and family matters even during rounding. Interestingly, although my preceptor and his senior were asked to see 20-plus patients during rounding and 40 to 50 patients during outpatient clinic time, they never failed to smile and act kindly to patients. They were not too casual with their dealings with students and residents, however, and were very stern about careless mistakes made by residents.

## The Importance of Research and Critical-Thinking Skills in Patient Care

One of the things I learned from this rotation is that one should never lose passion for medicine and hunger for knowledge. At every sit-down rounds in the mornings, my preceptor would question the way residents managed patients and would ask them to explain their logic behind choosing a certain



medication over others. He would teach them not to blindly follow the current recommendations, but to ask oneself why certain medications are given for certain symptoms and how they would affect the patients both short and long term.

## Summarizing Health Care and the Medical Education System in South Korea

South Korea has a National Health Insurance system, and everyone is required by law to participate in the program. The system is funded by compulsory contributions from all residents and government subsidies. Payments are made by an individual's employer unless one is self-employed, and it is scaled according to each person's income level. Everyone, including foreigners, can register and receive equal benefits. As a result, medical care is very affordable and patients at Severance Hospital could stay for free if they are hospitalized in a six-bed room. However, there is still a need for financial assistance for patients who cannot afford even a very small fee.

This rotation more than satisfied my hopes and expectations. Not only did I experience different aspects of patient care and disease characteristics in the population, but I was also able to learn about the medical and academic medical system of South Korea.



## NSU-COM Ranks First in Community Outreach



**Nova Southeastern University** prides itself on being an educational institution that provides continuing community outreach locally, nationally, and internationally via clinical programs and research, as does the College of Osteopathic Medicine, which has been a community outreach exemplar since its inception.

Proof of this fact was evidenced in September when NSU-COM claimed the top spot in the university's Fiscal Year 2014 Community Collaboration Database, which serves as a compilation of the community outreach endeavors conducted annually by NSU's 18 colleges, schools, and centers. "Thanks to the diligent efforts of our faculty, staff, and administration, NSU-COM partnerships, collaborations, and community engagement are well-represented in the database," said Dr. Anthony J. Silvagni, NSU-COM dean, in regard to the 608 approved projects submitted by the college. "Once again, our college leads the way in service to our community."

Each year, NSU completes an assessment of community collaborations and shares the results with leadership, academic, and administrative/support units in order to improve the quality of its service in the community. The database keeps university leadership, as well as the Carnegie Foundation, informed about the many presentations and projects that occur throughout the year.

**On July 19**, delegates representing the nation's more than 104,000 osteopathic physicians and osteopathic medical students voted to support a decision by the American Osteopathic Association (AOA) Board of Trustees to pursue a single accreditation system for graduate medical education.

The historic vote occurred during the annual meeting of the AOA House of Delegates in Chicago, Illinois, which came after an announcement in February that the AOA, the Accreditation Council for Graduate Medical Education (ACGME), and the American Association of Colleges of Osteopathic Medicine reached an agreement to work together to prepare future generations of physicians.

When fully implemented in July 2020, the new system will allow graduates of osteopathic and allopathic medical schools to complete their residency and/or fellowship education in ACGME-accredited programs and demonstrate achievement of common milestones and competencies. Through osteopathic-focused residency programs, the new GME accreditation system will recognize the unique principles and practices of the osteopathic medical profession and its contributions to health care in the United States.

## Single GME Accreditation System Becomes a Reality



## Rural Medicine Retreat Informs Attendees



*Pictured (from left) are Dr. Anthony J. Silvagni, Donald Pyle II, D.O., Paul "Chip" Roberts III, D.O., program director for the NSU-COM Florida Department of Corrections Psychiatry Residency Program, and Joseph De Gaetano, D.O., M.S.Ed, FAAFP, FACOFP, associate dean for clinical curriculum and graduate medical education.*

On June 20-22, the college's Department of Rural and Urban Underserved Medicine hosted its annual conference and recognition weekend for physicians, physician assistants, nurses, and administrators from its network of rural and urban underserved training partners. These clinical centers participate in the education of NSU-COM medical students and afford them the opportunity to render service in medically underserved communities.

The Rural and Urban Underserved Medicine Retreat and CME Weekend, held at the Lago Mar Resort Hotel and Club in Fort Lauderdale, Florida, was coordinated and hosted by James Howell, M.D., M.P.H., assistant dean of professional relations and chair of the Department of Rural and Urban Underserved Medicine, and Doris Newman, D.O., FAAO, director of the Department of Rural and Urban Underserved Medicine. During the dinner banquet, Donald Pyle II, D.O., was awarded the inaugural completion certificate as the first graduating resident from the NSU-COM/Florida Department of Corrections Psychiatry Residency Program.

The retreat, which attracted 190 attendees, is part of the AHEC Program's mission to extend academic resources to rural and urban underserved safety net sites throughout the state.

## News of Note

In June, the college's **Master of Public Health Program** was reaccredited by the Council on Education for Public Health for a seven-year period extending to July 1, 2021.

**Larkin Community Hospital** in South Miami, which is a member of the college's Consortium for Excellence in Medical Education, received approval from the American Osteopathic Association's Program and Trainee Review Committee to establish two new osteopathic medical residency training programs in orthopedic surgery and pediatric dermatology. Larkin is one of Florida's 12 designated statutory teaching hospitals and the largest teaching hospital for osteopathic physicians in the United States, offering the largest number of training programs in 32 different specialties.

The college's **Area Health Education Centers (AHEC) Program**, which entered its 30<sup>th</sup> year of operation on September 2, has received \$4.5 million in funding for the 2014-15 project year, making it the second-highest annual funding level in the program's history. Since its inception, the AHEC Program has received over \$84 million in state and federal funding.

On October 24, a number of NSU-COM students and affiliated individuals were recognized at the **American Osteopathic Foundation (AOF) Honors** ceremony in Seattle, Washington, which recognizes excellence among osteopathic physicians, educators, students, and other individuals. Listed are the recipients as well as the scholarship amounts they received: **OMS-III Nhi-Kieu T. Nguyen** (\$2,000 *Welch Scholars Grant*); **OMS-IV Samantha Berr** (\$900 *HumanTouch Student Leadership Project*); **OMS-II Rajeswari Murugan** (\$900 *HumanTouch Student Leadership Project*); and **Lance Rogers**, spouse of Francesca Okolie, D.O. (*Donna Jones Moritsugu Memorial Award*).

On September 12, **OMS-I Daniel Bral** was featured on WSVN (Fox 7) during its 10:00 p.m. newscast. Bral, who is originally from California and earned his master's degree at Georgetown, had non-Hodgkin lymphoma as a pre-teen and has given back as a leader in organizations that support teens and young adults facing cancer. Drs. David Boesler and Edye Groseclose were also featured, as was a short clip of Bral talking to Dr. Anthony J. Silvagni.

On August 10, the class of 2018 was officially welcomed into the osteopathic profession at the **34<sup>th</sup> Annual White Coat Ceremony**, which was held at NSU's Don Taft University Center Arena. For the 230-plus students comprising the class of 2018, the White Coat Ceremony served as an auspicious experience that officially marked their entry into the medical profession.



Dr. Foster with Irving Rosenbaum, D.P.A., Ed.D., M.P.A.,  
HPD provost and executive dean for administration, at  
the May 2005 HPD graduation dinner dance.





# DR. ROSEBUD FOSTER

## Remembering a Revered Colleague

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

On July 20, a bright light in the health care firmament was forever dimmed when Rosebud Lightbourn Foster, Ed.D. — a true champion for the delivery of health care to society's most vulnerable and needy populations — passed away at the age of 79.

"Dr. Foster was an incredibly valuable asset to the Health Professions Division and my office," said Dr. Frederick Lippman, HPD chancellor. "She will be sorely missed not only personally to me as a person who always displayed her kindness, guidance, and abilities, but by the individuals who received the advice and advocacy of a very competent health care professional and kind human being."





Dr. Foster, who served as special assistant to the Health Professions Division (HPD) chancellor, deputy director of the College of Osteopathic Medicine's AHEC Program, and a member of the HPD Board of Governors, was a highly respected leader in local, state, and national academic and health care policy circles. For over 20 years, she played an instrumental role in the successful development of the NSU Health Professions Division, contributing greatly to the initial establishment of several HPD colleges and numerous HPD programs and initiatives. Dr. Foster also played a pivotal role in making the NSU AHEC Program one of the most successful and highly regarded AHECs in the nation.

Born in Miami, Florida, as the second oldest of four siblings, Dr. Foster's desire to help others was exemplified by her educational journey, which included earning a Bachelor of Science in Nursing from Meharry Medical College in Nashville, Tennessee, and her Master of Science in Nursing Education from Wayne State University in Detroit, Michigan.

During her time working as a nurse in Detroit, she met and married Harris Emilio Foster, which resulted in a 28-year union that produced four children—Harris E. Foster, Jr. M.D., Sheila R. Foster, Esq., Byron E. Foster, and Lorna L. Foster-Holliday, M.D. Eventually, Dr. Foster returned to South Florida and continued her educational pursuits, earning her doctorate in Higher Education Administration from the University of Miami.

In 1973, she began a fruitful association with Florida International University (FIU) that lasted until 2001. During her nearly three-decade

affiliation with FIU, Dr. Foster served in a number of leadership roles that included stints as dean of the School of Health and Social Services and vice provost of the university's north campus. She also played a pivotal role in establishing the FIU School of Nursing, which opened with 75 full- and part-time students.

Her relationship with Southeastern College of Osteopathic Medicine (the precursor to NSU's College of Osteopathic Medicine and the Health Professions Division) officially began in 1985 when she became a special project consultant for the college's AHEC Program. Over the ensuing 30 years, however, Dr. Foster would become an increasingly active presence at NSU-COM and the HPD, serving as professor of family medicine and public health and assistant director of program affairs for the college's Master of Public Health Program.

In 2001, she accepted an additional position as special assistant to Dr. Lippman, where she was responsible for an array of tasks that included the coordination, planning, and implementation of various academic and community-based initiatives.





Although her innumerable professional and community accomplishments made her a beloved and revered colleague, perhaps the trait that best exemplified Dr. Foster was her steadfast devotion to her family as well as those in need of her help. According to those who knew her best, Dr. Foster left an indelible impression of fortitude and generosity on many, even serving as a surrogate mother to those requiring a loving dose of maternal attention.

"Dr. Rosebud Foster was one of the most competent leaders I've ever known," said Dr. Anthony J. Silvagni, NSU-COM dean. "She played a major role in so many aspects of our college and in the Health Professions Division that it is impossible to present them all. Her ability to bring people together and her ability to take an idea and turn it into a reality was extraordinary. Dr. Foster was so respected and trusted by legislators at the state and federal level that she was frequently called upon to help them understand and guide them in many health care and academic matters.

"To me, she was much more than an inspiration," he added. "Without her, we would have had a more difficult task in the pursuit of many of our quality programs. She always made herself available to give counsel on challenging academic, accreditation, or interprofessional plans or programs. Her absence has created a void that can never be filled, but her contributions have made a path that we may use for many years to continue our growth. I say goodbye to a special lady who was here at the time we needed her most, but who will never leave any of us that knew her."

## Colleagues Bid Fond Farewell

**"Dr. Rosebud Foster was a woman of integrity, dignity, and action. It has been a personal privilege, honor, and sincere blessing to have known her and to have shared many precious moments with her. I have the utmost respect for Dr. Foster, who was my mentor. She was motherly to me, and I cherished her love and kindness. She had a deep compassion and concern for people in despair, and her work ethic was incredible. Her principles were strong, and her faith was unshakeable. Among her many remarkable achievements, we owe the success of our public health program to her leadership, determination, and sacrifice. Her wisdom and counsel have yielded great and enduring outcomes for so many students. My fond memories of Dr. Foster will endure. May God grant her everlasting peace, and may all her loved ones be comforted. To God be the glory." – Cyril Blavo, D.O., M.S., M.P.H. and T.M., FACOP, director of the Master of Public Health Program**



**"I met Dr. Foster for the first time at FIU while working on my Master of Health Services Administration degree 18 years ago. During that initial encounter, it was evident she was not just another professor, but someone of importance and influence in health care in South Florida. Years later, I began working for NSU-COM's AHEC Program, where she was an administrator. I was able to work closely with her on many projects over the years; however, some of my fondest memories of her were on our trips to Tallahassee and Washington, D.C. I learned quite a bit from her as we met with many of the movers and shakers. Dr. Foster was in her prime just sitting in front of Andrews Capital Grill & Bar in Tallahassee, sipping on a merlot under an oak tree meeting with colleagues and dignitaries. – Steve Bronsburg, Ph.D., M.H.S.A., assistant professor of biomedical informatics**

# Remembrances of Rosebud



"I had the pleasure of observing Dr. Foster in her class many times, and I learned something from her every time. She was a fantastic teacher who really cared about her students, but at the same time she insisted they measure up to a high standard. Her door was open to any student who needed help, and she spent many hours of her time giving that help. In 1984, we applied for an AHEC grant, but we needed to partner with another university to complete our application. Dr. Mort Terry and Dr. Foster were good friends, so when I approached her at Florida International University, where she was an administrator, to partner with us, she accepted and we sent the application to Washington the next day. We later recruited her to work on the AHEC grant with Dr. Steven Zucker, and that program has since received over \$80 million dollars in funding over the last 30 years. This is really only a small part of her legacy. We have lost a great human being who will be remembered forever." – **Stan Cohen, Ed.D., HPD executive vice dean**



"Class, compassion, and collegiality. These are the three traits I'll remember most about Dr. Foster, who always shared a warm hug whenever we ran into each other in the hallways on the fifth floor of the Terry Building. She was—and will forever remain—an integral figure in the HPD's rich history." – **Scott Colton, B.A., APR, COM/HPD director of medical communications and public relations**

"I am truly blessed to have had Rosebud as a colleague, confidante, and friend. Whether it was working on a special project, mentoring a future health professional, sharing stories of our family, or relaxing together in our time off, she was always in the moment. I think I am a better person for having had Rosebud in my life. I will miss her laughter but admire her always." – **Marti Echols, Ph.D., M.Ed., assistant dean for medical education**

"Several years ago, Dr. Foster—better known to me as "Rose"—and I developed a lasting



friendship with a lot of fond memories. We not only worked together in different capacities, but we socialized in many ways—checking out various restaurants, shopping for various jewelry items, *harassing* the Target optical shop to buy sunglasses or some funky frames, sharing a cup of coffee and discussing various things that occurred in our work and/or our family life, enjoying dinner following the graduation ceremony every year with some close friends—as well as enjoying the *frock swaps* amongst a circle of friends. Rose and I enjoyed long conversations and lots of laughs. She was a great lady and will be missed by everyone she touched. She was a big asset to the HPD and our college and will not be forgotten." – **Johneta Goodwin, director of administrative operations**

"Unlike many within the college and the university who served alongside Dr. Foster, I only knew her for four years. However, it was obvious and constantly clear that she was a powerful leader for the field of public health,





# Remembrances of Rosebud



tobacco cessation, and, in particular, our Master of Public Health Program, both within the university and throughout the communities she served. But, one thing that always touched me about Dr. Foster was how she would drive all the way from South Miami to Davie and back every day out of dedication to the AHEC, the Master of Public Health Program, and to NSU, but also out of motherly tenderness to maintain the family home-  
stead so her children always had a place to come home to.” – **T. Lucas Hollar, Ph.D., assistant professor of public health**

“Integrity, educator, advocate, and champion for the disenfranchised are just a few attributes of this amazing colleague. I had the wonderful experience of working on projects both at the state and NSU level with Dr. Foster for well over three decades. In recent years, Dr. Foster was instrumental in the development of the Florida Department of Health’s cutting-edge tobacco initiatives. I considered Dr. Foster a professional sister and will miss her greatly. Her passing is a great

loss for NSU and our state’s public health programs.” – **James Howell, M.D., M.P.H., assistant dean of professional relations**

“It is so hard to believe that Rose Foster is gone. She was like a part of the very structure of the college. Not only will she be missed by all of us, but also by the entire public health community that she served so well.” – **Leonard Levy, D.P.M., M.P.H., associate dean for education, planning, and research**

“Room 1588 in the Terry Building will not be the same. We lost a great and powerful person because Dr. Rosebud Foster was one in a million. I am thankful for the opportunity of working with her and experiencing the knowledge she shared.” – **Shauntae Roberts, AHEC administrative coordinator**

“Our friend and colleague has passed, but her spirit lives on. May her dedication, love of life, and passion to make a difference be our guiding force as we enter into the next 50 years of NSU’s history. She will certainly

be missed, but her interprofessional spirit remains forever in our hearts. I feel so honored to have known her and to call her a special friend.” – **Cecilia Rokusek, Ed.D., R.D., assistant dean for education, planning, and research**

“I was fortunate to work directly with Dr. Foster at times. For all of her accomplishments, her titles, her achievements, who she was in the community and here at NSU, she always treated people with respect. Great success and achievements can sometimes cause pretentiousness in a person. Not her. I wasn’t someone she viewed as *just a secretary*. She asked about my children and actually listened and cared. She was a real person in this sometimes superficial world we live in. I had and have a great deal of respect and admiration for Dr. Foster. She was the real deal.” – **Nancy Roussell, coordinator of academic programming, Tobacco Training and Cessation Program, AHEC Program**





## Reverential Recollections of a Woman Named Rosebud

By Steven Zucker, D.M.D., M.Ed.

Associate Dean for Community Affairs and AHEC Program Director

***“Don’t Cry Because it’s Over...Smile Because it Happened” – Dr. Seuss***

How could one ever fully capture the essence of Dr. Rosebud Foster? How could you sum up her essence as our beautiful Rose, whose radiance, brilliance, grace, and elegance have shined so brightly throughout all of our community for so many years? Which of the so many beautiful petals of our Rose would you speak about?

**Would you focus on her extraordinary career and professional accomplishments in higher education and the community?**

**As a nationally recognized leader** in higher education at three Florida universities, including here at NSU as well as at Florida International University and the University of Miami, where she played a pivotal role in establishing numerous health professions training programs and served as a dynamic member of national academic accreditation site-visit teams.

**Or her widespread recognition** as one of the most respected health policy advocates for underserved and disenfranchised populations in our state and nation for nearly 50 years, including her integral role in securing approximately \$250 million from national, state, and foundation funding sources for academic and community-based programs here in South Florida and across the state.

**Or her extraordinary service to community groups**, such as the Miami-Dade County Public Health Trust that oversees

Jackson Memorial Hospital, the Miami-Dade Alliance for Aging, South Florida health planning councils, and scores of others, as well as her service on four gubernatorial advisory councils (selected by three different Florida governors, both Republican and Democrat), and on the White House Council on Aging.

**Or her being the recipient of over 30 prestigious awards** from major organizations throughout our state and nation, including her selection as the inaugural recipient of the Sherman Winn I Care Award and the Greater Miami-Dade Chamber of Commerce Health Industry Groups’ Health Care Heroes Lifetime Achievement Award.

**Or her prolific role as a presenter and keynote speaker** at conferences and workshops throughout the state and nation, including being a fixture as a presenter at annual meetings of the American Public Health Association.

**Would you focus on her extraordinary devotion to her family and friends?**

**How devoted she was** to her four beautiful and successful children, her grandchildren, brothers, and extended family, all of whom she loved so very much.

**How about her tireless trips** throughout the country to visit her family whenever the opportunities arose or the need occurred.



**Or her boundless energy and joy** through the Christmas shopping period and whenever birthdays arose.

**Or her visiting her parents’ graves each Sunday** after church services, which she continued doing faithfully for so many years.

**Or how she cared for** her grandchildren, nephews, and extended family wherever and whenever family issues necessitated her help.

**Or the most amazing way** she personally moved into my house as a true friend and cared so compassionately for my very ill mother and nursed her so tenderly for an entire week when I unexpectedly had to undergo a coronary bypass operation and remain in the hospital.

**Would you focus on her love and devotion to religion and the church?**

**The way Rose was so proud** of her family’s role in the evolution of the beautiful Historic St. Agnes Episcopal Church in Overtown, because she was a true child of God and a person of great and deep faith.

**Because of Rose's evangelical spirit** and zest, I now know more about the Stations of the Cross than I do about Passover (and I'm Jewish and run our family's Passover services).

### **Would you focus on her fabulous love of teaching?**

**Where Dr. Foster has taught** and inspired so many students in medicine, nursing, public health, dental, and other health care fields.

**Where she always pushed her students** to the maximum, along the lines of "good, better, best—and never let it rest—until your good becomes better and your better becomes best."

### **Would you focus on her love of culture, travel, and the vibrancy of life?**

**How Rose spent so many occasions** with me in the Impressionist room at the National Gallery of Art in Washington, D.C., sitting quietly and staring at Monet's and Renoir's masterpieces for long stretches of time.

**How she loved going to the National Theater and the Kennedy Center in Washington**, where she spent most of her evenings after working so hard at meetings and in Congress, truly loving their plays, musicals, symphonies, operas, and comedies.

**Her sheer exhilaration, joy, and unforgettable laughter** while letting loose and having fun, be it drinking her beloved red cabernet, dancing the Texas Two-Step at Billy Bob's in Fort Worth, or spinning out magical winning rolls of the dice at Caesar's Palace in Las Vegas, Nevada.

**Or her unique ability to so effortlessly forge friendships** and have such camaraderie and fun with the likes of stars such as Plácido Domingo and Michael Bolton.

**Or her frequent trips to New York City** to visit her family, where she would also get to exuberantly spend hours upon hours walking the streets of the city, visiting its

museums and theaters, and picking up its endless energy and vibes.

**Or her love for her trips throughout Europe** to provide academic programming for health professionals and to learn about other cultures.

### **Would you focus on her role as one of the truly great role models for young people?**

**On pursuing one's education** to the maximum extent possible.

**On conducting oneself** with class, dignity, and grace at all times.

**For Dr. Rosebud Foster's role in inspiring scores of women and minorities** to envision and then pursue advanced careers in the health care field and in how to live one's life was truly awe-inspiring to all who admired, loved, and respected her so very much.

**From a young child** who was forced to swim at segregated Miami beaches, **she quickly blossomed into that beautiful and brilliant Rose**, who broke through every glass ceiling she ever faced and achieved

the top echelons of numerous academic and community groups through her brilliance, boundless energy, enthusiasm, and goodwill.

I suppose if those who knew her best had but a brief moment, they would have to focus on how Dr. Rosebud Foster made them feel because everyone she ever came into contact with wound up loving her, admiring her, and wanting to be with and work with her. Because Rose conducted herself in a manner very similar to the famous Maya Angelou quote, which she loved, that says, "I've learned that people will forget what you said, people will forget what you did, but people will never forget how you made them feel." And, boy, did Rose make you feel good when she graced your presence with her brilliance, warmth, and radiance.

The truth is you can't truly capture the full essence of our dear Rose briefly—but you can always remember her beautiful warmth, smile, and extraordinary Rose Foster bear hugs and how they always made you feel. So I would suggest you can remember her, honor her, and keep in your heart forever if you make sure to give someone one of her special bear hugs every day—and then this true rosebud and wonderful angel will be with you forever.



# Fun Fantasy

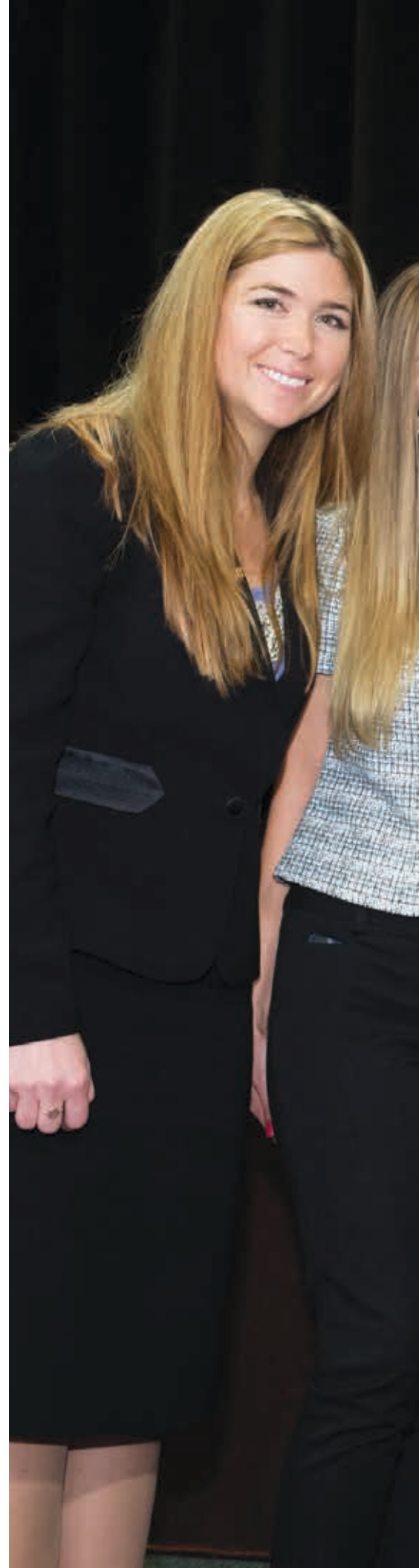
## What Would NSU-COM Students Do if They *Ruled the School?*

By Scott Colton, B.A., APR

COM/HPD Director of Medical Communications and Public Relations

It's a scenario that occurs frequently when it comes to students attending medical school at the numerous allopathic and osteopathic colleges located throughout the United States. No matter how prestigious an institution is — or how acclaimed its programs are — the students, who toil for years to earn their coveted D.O. or M.D. degrees, possess universally strong opinions on the perceived strengths and deficiencies that exist at their chosen colleges.

Some may point to flawed admissions processes or too-stringent attendance policies, while others may find fault with particular curricular requirements, exorbitant tuition rates, or large class sizes. In fact, with over 970 students currently working toward their degrees in all four classes, it would be impossible for NSU's College of Osteopathic Medicine — or any medical school for that matter — to earn universal praise from every member of its student body.







**Dynamism on Display:** Carisa Champion-Lippmann, national chair of AACOM's Council of Osteopathic Student Government Presidents, Elyse Julian, past SGA president, Dr. Anthony J. Silvagni, NSU-COM's progressive dean, Dianna Silvagni, J.D., and Trevine Albert, current SGA president.



**OPP EXCELLENCE:** According to Jason Faucheux (pictured above performing OMM on the student in the red T-shirt), “Students of each year consistently agree that the education we receive throughout the first and second years in OPP prepares us well for the COMLEX and for our rotations.”

In an effort to gain an honest critique regarding how NSU-COM is perceived by those pursuing their osteopathic education, *COM Outlook* reached out to several student leaders to obtain constructive feedback about what the College of Osteopathic Medicine does well. More intriguingly, we offered these same students an opportunity to offer suggestions as to what they would eliminate, enhance, or add if they were allowed unfettered access to *rule the school*.

Not surprisingly, the feedback we received reflected a wealth of opinions that ran the gamut from extraordinarily frank and thought-provoking to remarkably humorous.

### NSU-COM Earns Abundant Praise

Due to the student-centered and open-minded philosophy of NSU-COM’s administrators, the college received high marks in a variety of areas that ranged from technology such as Tegrity, osteopathic principles and practice, and the creation

of residencies and new specialties to compensated travel for national and international conferences, quality educational and research opportunities, and true concern for the students.

Carisa Champion-Lippmann, a third-year student who served as president of the college’s Student Government Association (SGA) several years ago and is the national chair

of AACOM’s Council of Osteopathic Student Government Presidents that represents all osteopathic medical students in the country, credits much of the college’s success to its dynamic dean—Dr. Anthony J. Silvagni. “Our dean is very student centered and extremely active with our student body,” she explained. “From coordinating Dean’s Hours and having lunch with the various academical societies to his open-door policy, these are aspects many students don’t understand are not commonplace at other medical schools. The fact that our dean and many other administrators listen to us and makes changes based on student concerns is one of the best things about our school.

“Our school also puts a lot of time and effort into advocating and lobbying and actively making things happen as far as D.O. international practice rights,” she added. “In addition, the college sets up all our core rotations for us whereas other schools allow students to do that for themselves. Cores are desirable because



**COLLEGE CAMARADERIE:** Pictured (from left) at OMED 2014, which was held October 25-29 in Seattle, Washington, are Jordan Mathis, administrative assistant for alumni affairs, Lauren Boudreau, Delfina Wilson, Ph.D., M.A., director of student services, and OMS-II Saamia Shaikh.



you don't have to uproot yourself and/or your family to do them, plus all the core sites are teaching institutions that know our curriculum and the objectives of what we need to learn during rotations. Our COM also is known to be the one with most robust international rotations."

In terms of curricula requirements, Champion-Lippmann is a big fan of the college's Principles of Clinical Medicine course that is offered in the second year. "It's a great class that is presented in a small-group, case-based style where each group goes through patient cases together with a physician facilitator and discusses topics such as the differential diagnosis and physiology," she explained. "This class is the best at bringing together everything for students and

According to third-year student Trevine Albert, who serves as the current SGA president, the college has much to recommend it as well. "I feel that NSU-COM has been excellent at providing quality educational and research opportunities for its students that are unmatched by other COMs in the country," he said. "For instance, the college has gathered some of the leading experts in various fields to cultivate a rich medical community and quietly fostered first-of-its-kind programs such as the combined osteopathic medicine/law degree. In addition, NSU broke ground on a cutting-edge research facility that will bring the latest advances from the bench to the bedside. These enhancements will profoundly affect this generation of medical students—the



years in OPP prepares us well for the COMLEX and for our rotations."

Engendering an atmosphere that places the students' interests at the forefront of the educational experience helps explain why fourth-year student Elyse Julian, a past SGA president, is a true fan of both the college and the university. "One of my

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**"Our dean is very student centered and extremely active with our student body. The fact that our dean and many other administrators listen to us and makes changes based on student concerns is one of the best things about our school." - Carisa Champion-Lippmann**

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helps us understand how to use what we have learned more than any other class. Interestingly, this is a comment I have consistently heard from many students through the years."



**INTERNATIONAL FLAVOR:** The abundance of global learning opportunities offered is an aspect students frequently cite as a core strength of the College of Osteopathic Medicine.

ones who will inherit health care at a time of great change."

On a similar note, third-year student Jason Faucheux, who is participating in the college's Predoctoral Osteopathic Principles and Practice Fellowship (OPP) program, stated that "NSU-COM is a medical college dedicated to education, improving health care, and developing the osteopathic community. In the spirit of osteopathic medicine, I believe NSU-COM has gotten it right when it comes to the education we receive in regard to what makes D.O.s unique as osteopathic physicians in the health care community," he said. "Students of each year consistently agree that the education we receive throughout the first and second

favorite things about NSU is its interest in student concerns," she stated. "Not only does the administration actively seek student feedback, but there are also numerous leadership opportunities for students interested in affecting the curriculum."

Based on the positive feedback provided by the students interviewed for this article, the college has clearly fostered a laudable learning environment that challenges and inspires its students to be the best they can be. "I truly enjoy being with my classmates on a regular basis," said Lauren Boudreau, a second-year student who is president elect of the college's SGA. "It is such a powerful feeling to sit in class and realize you are surrounded by hundreds of other people who will





**RESEARCH ON THE RISE:** NSU's Center for Collaborative Research, which is currently under construction and scheduled to be completed in 2016, will house an IBM supercomputer, one of Florida's largest wet labs, and some of the world's most accomplished researchers.

one day be called *doctor*. It is unique to feel the energy of so many others who share similar passions in helping others to find good health. Additionally, I believe we have aspects of our curriculum that are second to none. Our simulated-patient experiences and opportunities to interact with mannequins in the Simulation Lab will be invaluable resources as we move forward in our careers to rotations, residency, and active practice. We are more fortunate than we often realize to be earning an osteopathic medical education from NSU's College of Osteopathic Medicine."

### Constructive Critique Proves Illuminating

Although the students interviewed were effusive in their NSU-COM praise, they were equally as enthusiastic to share their unabashed sentiments concerning the policies, procedures, and programs they would like to see eliminated, implemented, or enhanced. Topics mentioned covered the gamut from

board-exam prep and third- and fourth-year rotations to establishing a student-led clinic and instituting evening classes for struggling students.

"Listening to what the student body discusses regarding time spent studying and testing, I looked into what has been consistent over the years," Faucheux said. "Each year, students desire clinically related and board-relevant material that will prepare them for board exams, clinical rotations, and life as a doctor. One area students consistently bring up is the sciences of OMS-I year, with biochemistry as the focus of conversation. One student-focused change I would implement would be to look into developing a more board-relevant and clinically related biochemistry curriculum, which would help focus the course along with fine-tuning the teaching style to match the majority of students."

If Julian had the authority to implement a specific change, it would be to "add an elective rotation into the first semester of our third year.

Throughout our first two years of medical school, we are told to keep an open mind about the field we would like to go into," she explained. "Although this is great advice, we soon start our third year and find out we must begin setting up audition rotations in January. Suddenly, our open minds must begin narrowing in on the field of our choosing with only a couple of core rotations under our belt. An elective during the first semester of our third year would relieve a lot of stress by allowing students to experience fields they are considering prior to setting up their audition rotations."

Champion-Lippmann, who was named NSU Student of the Year in April at the university's 15<sup>th</sup> Annual Student Life Achievement Awards, has a unique perspective to share because, in her role as an esteemed national student leader, she has been intricately involved with the 30 colleges of osteopathic medicine that currently exist in the United States. Consequently, she has networked with numerous students from NSU-COM's sister schools and gained firsthand knowledge of how these colleges operate.

Because of the inimitable vantage point she has attained in her NSU student career, Champion-Lippmann freely offered her assessment on various aspects of the NSU-COM educational experience. "I think it's important to pay more attention to individual students' learning styles as many learn better in small groups with physician facilitators or on their own," she said. "In addition, I don't think it's necessary for the college to require attendance (except for labs), e-books, or specific board prep

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materials. If a student needs to be force-fed these things, an admissions error was made.

"I would also take a look at putting international programs back in the students' hands," she added. "In the last few years, the college's student-run International Medical Outreach Club has been phased out of planning many aspects of the trips we do abroad. The goal of these trips should not just be to serve the underserved – although that's a huge part of it – but to engage students in the process and empower them to give this care and plan the trips logistically."

Others offered more whimsical enhancements, such as Boudreau's suggestion that the college implement puppy-therapy Fridays. "On Fridays, both the first- and second-year classes have the mandatory Foundations and Applications in Clinical Reasoning course," she

water from a fire hydrant.' As both a medical student and student-body representative, I have a responsibility to advocate for my peers to be best prepared to excel, bridge dialogue between faculty members and students, and instill measures to protect our students during their most vulnerable times," he explained. "At the same time, I have seen firsthand the rare occasions when students find it difficult to sustain a successful level of productivity, often spiraling down an isolated road marred with academic difficulties. If given the opportunity to implement specific, student-centric changes, I would focus on building preventative measures to catch these students before they fall through the proverbial cracks."

#### Dean for a Day Daydream

Continuing in a similar vein, we also offered our interviewees the opportunity to answer the follow-

he said. "The curriculum would use a problem-based learning approach to explain concepts currently being taught in class as clinical cases, providing added context to their studies. Additionally, it would pair students with faculty mentors who can uniquely tailor learning agendas to the strengths of each student while also improving upon their weaknesses."

For Boudreau, her proposed change is actually a lament heard from medical students across the globe – reducing class sizes. "I would like to see smaller class sizes because I feel it can often be an overwhelming environment when all 240 students are in one classroom," she admitted. "With smaller class sizes, the students develop more intimate relationships with our lecturers and may even feel more open to asking questions. Unfortunately, with our type of education, this is not a reasonable request as many of our lecturers, particularly

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**"I have seen firsthand the rare occasions when students find it difficult to sustain a successful level of productivity, often spiraling down an isolated road marred with academic difficulties. If given the opportunity to implement specific, student-centric changes, I would focus on building preventative measures to catch these students before they fall through the proverbial cracks." - Trevine Albert**

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stated. "I think Fridays should be celebrated with breakfast and puppies. I think this experience would be guaranteed to bring a smile to our students' faces, which is often much needed during the rigors of medical school."

On a more pragmatic note, Albert discussed the importance of providing struggling students with additional resources to ensure their ultimate success. "Excelling through the rigors of medical education has often been compared to 'drinking

ing query: *Imagine you are dean of NSU-COM and have the unadulterated power to make one specific change you feel would benefit students the most. What would it be?* For Albert, the current SGA president, his response was tailor-made to complement his aforementioned statement.

"As dean of NSU-COM, I would address the changes I just mentioned by creating an evening program for students who find themselves struggling with their academics and empower them to get back on track,"

in second year, are practicing physicians who do not have the time to allocate to multiple class sessions."

Not surprisingly, because of the depth and breadth of her student leadership experiences, Champion-Lippman had a difficult time limiting her deanship priorities to just one issue, choosing instead to focus on several areas such as curriculum, student progress, and a student-run clinic. "I would take a hard look at our curriculum and redo it as well as create more transparency in our Stu-



dent Progress Committee process by adding a student to the committee like other COMs throughout the country and colleges at NSU do," she explained. "I'd also establish a student-led clinic like so many other medical schools have done because student-led clinics help students in their first two years of school integrate what they are learning. It also offers a service to the homeless and underserved, so our students would have the opportunity to practice OMT on someone other than their peers because many students do not feel comfortable treating their own family members let alone a patient when they have only practiced on their classmates."

As an OPP fellow, Faucheux is an exemplar of the holistic approach to medicine, which may be why his idea for his fictional day as dean is decidedly more fanciful than the rest. "As dean of the college, I think my first order of business would be to implement a true South Florida experience to the classroom," he



**CUTTING-EDGE SIMULATION:** "Our simulated-patient experiences and opportunities to interact with mannequins in the Simulation Lab will be invaluable resources as we move forward in our careers to rotations, residency, and active practice." - Elyse Julian

said. "We are blessed to have the opportunity to attend medical school in a tropical environment in the Sunshine State, which medical students around the country admire. I can remember numerous occasions of being in class all day in the Morris and Steele auditoriums and wishing we could have had class outside."

"I would begin development of a plan to build an outdoor classroom where students could attend lectures and still be connected with the nature of South Florida," he added. "For example, I would offer the small groups that comprise the second-year Principles of Clinical Medicine course the option to hold class outside under the palm trees. I feel that bringing this change to the classroom experience would allow students to feel more relaxed and happy each day and encourage them to attend lectures. When you are connected to the environment, you are more connected with yourself."

When Champion-Lippmann was initially asked to serve as an interviewee for this article, she was beyond excited to have an opportunity to share her thoughts on the university she has called home for many years due to her pursuit of three degrees, which she will proudly earn in May 2016. "I have interviewed many students from different classes over the years about what they like and would change about NSU-COM," she explained. "And I have filtered that feedback through my seven years of experience with NSU-COM as a spouse to a student, as a medical student and SGA president, as chair of the Health Professions Division SGA Committee, and as a student at other NSU colleges."

"I've also been able to provide insights to the college and university through my experiences in the national Council of Osteopathic Student Government Presidents, where I hear about the good and bad of every osteopathic medical school in the country as well as collaborate with student leaders from M.D. schools," she continued. "Although there is always room for improvement, thanks to my experiences and ability to compare our college to other NSU colleges and other osteopathic medical schools, I know NSU's College of Osteopathic Medicine is truly doing a lot of things right."

### Champion-Lippmann's Five Additional Points of Importance

*Eliminate a family medicine or geriatrics core rotation so an elective rotation can be added to the third year.*

*Ensure that no students have to do both rural underserved and emergency medicine rotations during their golden months.*

*Stop limiting rotations in one discipline to two months as many disciplines don't have subspecialties.*

*Make rotations last four weeks instead of month by month.*

*Change the way tuition is configured in the fourth year as it is broken down differently than in the first three years. As a result, the students end up owing money to the school instead of having funds to live off of during the most expensive year of medical school due to the expenses associated with elective rotations and residency interviews.*





## WHAT WE'RE D.O.ING

### *Biomedical Informatics Program Continues to Lead the Way*

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

In 2006, the Master of Science in Biomedical Informatics (M.S.B.I.) degree program—the only biomedical informatics program in existence at an osteopathic medical school—was established in collaboration with NSU's Graduate School of Computer and Information Science. Those eight

years seem light years away when we consider the meteoric growth of the program—from 3 students in 2006 to nearly 200 today. NSU-COM's Biomedical Informatics Program leads the profession in the evolution of the health care environment, uniting technological and medical advancements to

maximize efficiency, deliver services, and develop research pathways.

The Biomedical Informatics Program—led by its director Jennie Q. Lou, M.D., M.Sc., professor of biomedical informatics, public health, and internal medicine—currently comprises 191 students and 31 faculty members. The program trains professionals in the development, dissemination, and evaluation of information technology as it relates to the health care environment—including hospitals, health care delivery systems, health information technology system vendors, ehealth companies, insurers, pharma-

ceutical companies, and academic institutions.

The program's fully online format enables working professionals to earn a master's degree without career disruption. Students may also pursue an M.S.N. in Nursing Informatics or Graduate Certificate in Public Health Informatics or Medical Informatics. A diverse student body hails from 23 nations, including the United States, Saudi Arabia, Pakistan, Puerto Rico, Bahamas, Colombia, Haiti, Jamaica, Brazil, Canada, Cuba, India, Mexico, Nigeria, Spain, Sudan, Sweden, Taiwan, United Kingdom, and Uzbekistan. For those



who prefer a face-to-face option, on-campus courses are also available.

Dr. Lou views biomedical informatics as the bridge between medicine and technology and expects the need for experts in the field “to skyrocket,” especially with the development and acceptance of the Affordable Care Act (ACA). The far-reaching provisions for the ACA include gathering data and measuring quality of care, requiring an increase in health information careers expected to grow by 36 percent to deal with health disparities, epidemiology, and laboratory capacity.

Because collaboration is a key component of a program’s success, NSU-COM’s Biomedical Informatics Program continues to partner with the American Medical Informatics Association 10 x 10 Certificate Program, which aims to train 10,000 health care professionals in applied health and medical informatics. The prestigious honor keeps the college’s program on par with several major academic institutions nationwide—including Stanford University Medical School, University of Alabama at Birmingham, Oregon Health and

Science University, and the University of Illinois at Chicago.

“Through this partnership, the quality of our program is recognized nationally,” Dr. Lou said. That national recognition increased in the past year, as three NSU-COM affiliates completed the inaugural clinical informatics subspecialty board exams administered by the American Board of Preventive Medicine in October 2013. Jacques Orces, D.O. (’96) is currently a student in the Biomedical Informatics Program and serves as the chief medical informatics officer and a pediatrician at

Miami Children’s Hospital. Danielle Oryn, D.O., M.P.H. (’02), chief medical informatics officer at Petaluma Health Center in California, received a graduate certificate in medical informatics, while James Seltzer, D.O., M.S.B.I., clinical assistant professor of obstetrics and gynecology, is a 2011 M.S.B.I. graduate.

Another organization, the Healthcare Information and Management Society (HIMSS), has also noticed and commended the strength of NSU-COM’s Biomedical Informatics Program. The HIMSS Foundation awards annual scholarships to student members who have achieved academic excellence and demonstrate leadership potential in the health care information and management industry. Over the past several years, two NSU-COM Biomedical Informatics Program students were scholarship recipients: Mark Carnemolla, M.S.B.I., a 2013 graduate, and Mohammed Islam, M.S.B.I., a 2010 graduate.

The celebration of success continued in 2014 when the Biomedical Informatics Program awarded 29 Master of Science degrees and high-





lighted the group's achievements with four awards for research, service, and recognition. The majority of the newest graduates earned their degrees with distinction as 12 attained highest honors and 10 finished with honors. This year, an additional accolade was created – the Director's Award – to honor a student or students who have overcome significant challenges in the pursuit of their degree. Clarissa Alexander, M.S.B.I. ('14) overcame a brain tumor, pursued an internship, published a paper about her experiences while at the National Institutes of Health, and graduated with honors, while Stephen Amoah, M.S.B.I. ('14) suffered a stroke that impaired his physical and cognitive functions, especially

his speech. Along with accommodations the program made to meet his particular needs, his tenacity and perseverance enabled him to attain his ambitions and earn his degree.

The remarkable achievements of those in the program, coupled with Dr. Lou's guidance and goals for growth, have kept NSU-COM at the forefront of the field. "We want to build a very solid program that will provide students the skills they need to accomplish various health information technology implementation tasks," she explained.

The interprofessional pathways Dr. Lou builds throughout the university and nationwide foster collaboration with computer science, public health, business management,

nursing, and education. The Biomedical Informatics Program offers an invaluable opportunity to work on the cutting edge of health care. "We want our students to have more hands-on experience before they graduate by establishing relationships for internships and practicum experiences at more than 100 sites, including Cleveland Clinic Florida, Palmetto General Hospital, the National Institutes of Health, and the Mayo Clinic," Dr. Lou said proudly. "Where we once begged for spots, we now have the hospitals contacting us."

Last year, Dr. Lou and her team collaborated with NSU's Center for Psychological Studies and NSU-COM's Area Health Education Centers Program on a poster

## Getting to Know...the Biomedical Informatics Team

**Jennie Q. Lou, M.D., M.Sc.**, who serves as founding director for the Biomedical Informatics Program, is a professor of biomedical informatics, public health, and internal medicine. In addition to teaching and advising students, Dr. Lou oversees the recruiting and marketing for students and faculty members, curriculum development and quality assurance, research, and student practicum site establishment.

**Steve E. Bronsborg, Ph.D., M.S., M.H.S.A.**, assistant professor and academic adviser, is responsible for teaching courses, assigning student project practicums, and pursuing scholarly research. He is also involved in developing community relationships in an effort to recruit students and establish practicum sites.

**Jesse Singer, D.O., M.P.H.**, associate professor, joined the team in October. Most recently, he worked in New York City, serving as the assistant commissioner

for the bureau of the Primary Care Informatics Project at the NYC Department of Health and Mental Hygiene. He is board certified in public health and preventive medicine.

**Christine Nelson, B.S.**, program manager, assists Dr. Lou with the daily workings of the program. She likes to say her job is to do whatever needs to be done in order to make

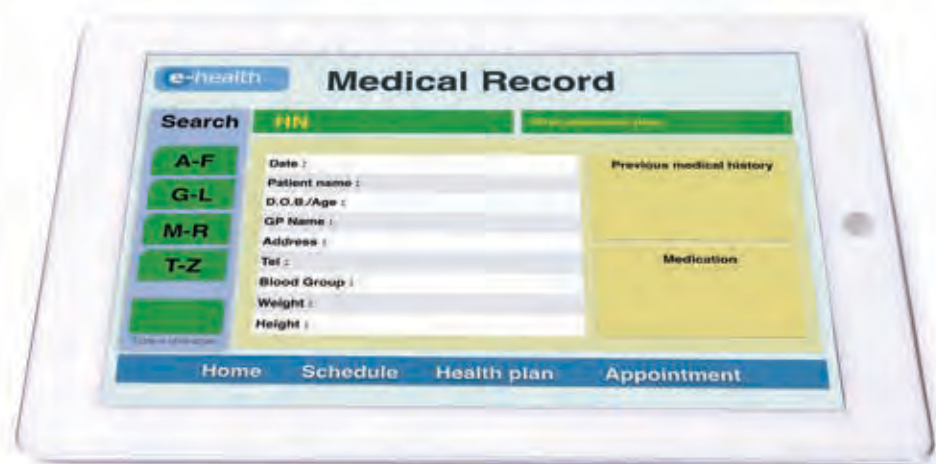
the program run. In addition, she recently became an NSU-COM Biomedical Informatics Program student and hopes to someday expand her role into research and teaching.

**Mirlyn Hurry** serves as administrative assistant for the program, supports Dr. Lou, and works closely with the other team members.



*Pictured (from left) are Drs. Lou and Bronsborg, Mirlyn Hurry, Christine Nelson, and Dr. Singer.*





entitled “Self-Change: Randomized Control Trial of an iPhone App Using an Evidence-Based Alcohol Intervention” at the 47<sup>th</sup> annual meeting of the Association for Behavioral and Cognitive Therapies (ABCT) held November 21-24, 2013, in Nashville, Tennessee.

The poster illustrated research on addictive or alcohol-related behaviors and received the prestigious ABCT Addictive Behaviors SIG Outstanding Student Poster Award. The project was funded by an NSU President’s Faculty Research and Development Grant.

Recent graduate Troy Rubizovsky, M.S.B.I. (’14) also worked with Dr. Lou and Steve E. Bronsberg, Ph.D., M.S., M.H.S.A. — the co-primary investigators — to build the mobile app, which included developing story boards, producing a basic layout of the application, creating a detailed design, programming the initial app, field-testing the program, making adjustments based on the field-test results, and activating it for study participants.

Teamwork is paramount in the Biomedical Informatics program, and department members are dedicated to recruitment, creating new courses and practices, representation at health fairs, participating

in professional presentations, and collaboration on research. In regard to research, Dr. Bronsberg said he is preparing a paper for publication to highlight details of the aforementioned mobile app.

With hopes to build a larger group of those ready to meet the future health care needs of a growing and aging population, Dr. Lou is working on a proposal to create a Ph.D. in Biomedical Informatics. Such development will enhance

research and training in clinical informatics concepts, methods, and tools in order to analyze, design, implement, and evaluate information and communication systems that promote safer, more efficient, effective, timely, patient-centered, and equitable care.

Graduates already know the program is an investment that pays — and pays well. According to a national survey, the median salary in the health information technology field has increased in direct relation to the need of the specialty, with graduates starting at \$85,000 and many physicians earning \$250,000.

“We are constantly revamping the program by identifying what skills are most sought by employers,” Dr. Lou said. “There is a tsunami of information out there.”

With intelligence, talent, and technology, Dr. Lou and her team are committed to training students to ride the waves.

## Alumni Testimonials

“NSU’s Biomedical Informatics Program gave me the tools and knowledge to navigate the health informatics industry with confidence. It prepared me to provide meaningful contributions to seasoned professionals and organizations. Two years after graduating, my relationship with the program is still going strong.” — **Teresa Blanco, M.S.B.I.** (’12), who is currently living in Kansas City, Missouri, and working for Cerner as a charge services support analyst

“The training is on target to meet a single goal: The right information, to the right person, at the right time.” — **April M. Green, M.S.B.I.** (’13)

“This program allowed me to gain the experience I needed in order to follow the career path I wanted to take.” — **Anthony Meglino, M.S.B.I., NCP** (’14), a Next-Gen EHR template developer consultant at Dell

“The program helped me turn an adversary into an opportunity. Tenacity and a strong drive led to my success in the Biomedical Informatics Program and in my world.” — **Stephen Amoah, M.S.B.I.** (’14)



## FACULTY IN FOCUS

### ***Dr. Jay Fleisher Transforms from Struggling Student to Renowned Researcher***

*By Scott Colton, B.A., APR*

*COM/HPD Director of Medical Communications and Public Relations*

**A**s a child growing up in a working-class family in Brooklyn, New York, Jay Fleisher, Ph.D., M.S., M.S., associate professor of public health, never envisioned a future that would include earning several graduate degrees and becoming a top researcher in his field.

Throughout his formative years, Dr. Fleisher seemed set to follow the prevailing mindset of his family, where the importance of obtaining

primarily blue-collar positions that ensured job security was emphasized over education. During those early years, his familial role models were his father, who worked as a cook at New York University (NYU) Medical Center, his mother, who worked as a secretary, and his brother, who is a retired foreman from the New York City Sanitation Department.

Consequently, Dr. Fleisher had little interest in pursuing a career in

academics, which is not surprising when you realize he barely scraped through high school with a less-than-lofty average grade of 65. After graduating and landing a job delivering supplies at NYU Medical Center, however, he quickly recognized that a blue-collar career was not where his destiny lay, and that obtaining a college degree would be his ticket to enhanced career opportunities.

Not surprisingly, based on the marginal grades he received in high school, Dr. Fleisher understood that getting accepted into college would prove to be a difficult proposition. "The only college that would take me was NYC Community College, where it took me three years to complete a two-year degree in construction technology," explained Dr. Fleisher of his academic difficulties. After earning his two-year degree, Dr. Fleisher entered the U.S. Coast





*Pictured at his daughter Jennifer's wedding are (from left) sons Mathew and Adam, wife Robin, Dr. Fleisher, daughter Jennifer, and son Scott.*

Guard, which is an experience he credited for “teaching me confidence and – most importantly – discipline.”

Armed with a newfound sense of self-belief and self-awareness, Dr. Fleisher decided to continue his education when he was released from active Coast Guard duty. After being accepted into the experimental branch of the City University of New York's Richmond College in Staten Island, he was suddenly transformed from struggling student to high achiever. “My experience at Richmond College changed my life,” said Dr. Fleisher, who married young and had four children, which required him to do all his pre- and postgraduate education on a part-time basis while maintaining a full-time job. “The college was set up to take underachieving students with promise,

and I ended up graduating with honors, earning a bachelor's degree in Environmental Health.”

### Botched Graduate Project Proves Fortuitous

With his passion for academia now in full flight, Dr. Fleisher began pursuing his Master of Science degree in Environmental Science at Richmond College, which is where he met a faculty member who would go on to have a profound impact on his life and career. “While attaining my master's degree, I became a lab assistant to a very special teacher who truly changed my life,” he explained. “He became my adviser and mentor. As part of his teaching method, he almost never answered any questions I asked while I was working on my master's thesis. What

he did was make me learn to teach myself, and for that I am forever grateful. It is truly amazing how one great teacher can change a person's outlook and life.”

Interestingly, because of the research he conducted to form the basis of his master's thesis, Dr. Fleisher would unwittingly stumble into a research project that would result in him becoming an international expert several years later. “Initially, I chose to analyze a stream in Staten Island that started as a clean-water course and meandered down to the ocean, which was about five miles downstream,” said Dr. Fleisher of his thesis project, which would result in some comical ramifications. “Along the way downstream, people were illegally dumping raw sewage into the stream, so as it progressed toward the ocean, it became more and more polluted.

“The project I had chosen to do looked at changes in microorganisms as the stream got progressively more polluted,” he added. “I spent one summer collecting samples and looking at these changes. I did not, however, have a big enough sample size, so I had to wait a year before I continued to collect water samples. What I did not take into account is that Staten Island at that time was in the middle of a construction boom, and when I returned the next summer, my stream was nowhere to be found.”

After relaying this information to his faculty mentor, who laughed openly and uncontrollably upon hearing the news, Dr. Fleisher chose a new topic that involved investigating the precision of water-quality indicators. “I found there was a real lack of precision in terms of setting



...With mom and brother

...Broad smile for the camera

...On the cusp of adulthood

...Wedded bliss with wife Robin

the recreational water-quality indicators used by the United States Environmental Protection Agency (USEPA)—and most, if not all, states—to assess the quality of recreational waters of questionable utility,” he explained. “So I published my thesis and went on to other things.”

Approximately five years later, Dr. Fleisher read a research paper by the USEPA that turned out to be the inaugural epidemiological study that analyzed the topic of disease transmission via contact to recreational waters. “I read the USEPA

assessing recreational water quality were based upon this one study.”

After publishing the results of his analysis of the USEPA study, Dr. Fleisher became a celebrity of sorts in the research world. Consequently, he teamed up with researchers in the United Kingdom (UK) and throughout Europe to collaborate with the World Health Organization (WHO) and conduct the first randomized trial of an environmental pollutant, which was subsequently replicated in the UK, Germany, and several other European countries.

favors the prepared mind” applied. But then again, who knows? This also launched my interest in epidemiological methods and statistical methods, which remains to this day.”

Initially, Dr. Fleisher thought his career path would involve applying statistical methods to problems related to ecology and population biology. Once he was introduced to epidemiology while working at the State University of New York’s Downstate College of Medicine, however, a new passion took root. “While working as an assistant pro-

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**“As I get older, I want to maintain my activities in research, but I am increasingly interested in teaching the generation that will replace me. My aim is to explore evidenced-based teaching and try to make learning a fun and lifelong process.”**

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study, but the results seemed too good to be true based on the analysis I had done for my master’s thesis,” he stated. “It took me six months to reanalyze the data upon which this study was based and to assess the study design. I found the USEPA study to be very poor both in epidemiological design and analysis of the data. In fact, the study was so flawed that the validity of the results was quite questionable. Moreover, the USEPA criteria for

“Our study design was endorsed by the WHO and the European Union as the preferred study design, much to the chagrin of the USEPA,” he proudly stated. “On a personal note, this led to an international, all-expenses-paid junket of speaking engagements and lectures that turned out to be a truly fun experience. So the moral of the story is a stream that disappeared launched my research career. I would like to think that Louis Pasteur’s famous quote “Chance

fessor at Downstate, I was exposed to the various aspects of preventive medicine—namely epidemiology and biostatistics,” he explained. “It was there where I met another person who would change the course of my life—my department chair. He became a mentor who encouraged me to get my master’s degree in Epidemiology at the Columbia School of Public Health, and my Ph.D. in Epidemiology and Biostatistics from New York University.”





Dr. Fleisher with his granddaughter, Kayla.

Throughout his two-decade career at Downstate College of Medicine's Department of Preventive Medicine, Dr. Fleisher was able to enrich himself on a number of levels. "I loved that job because I was able to conduct significant research in both clinical and environmental epidemiology," he said.

### Finding Fulfillment at NSU

After spending 20 years as a faculty member at Downstate, Dr. Fleisher opted to take an early retirement and accept a job with the Department of Defense as an epidemiologist at the Naval Environmental Health Center in Norfolk, Virginia, where he worked on both classified and unclassified projects. Although he enjoyed his time in Virginia, a yearning to return to the academic milieu would culminate in him relocating to South Florida to become an associate professor in NSU-COM's Master of Public Health Program in May 2004.

Since his arrival at NSU-COM, Dr. Fleisher has helped enhance the M.P.H. curriculum by developing and teaching courses such as Environmental Health, Epidemiology, Outbreak Investigation, and Introduction to the SAS Statistical

Package. He also serves as a research mentor to many of the program's students and collaborates with faculty members from the college and NSU's Oceanographic Center on various projects. "I have enjoyed being a faculty member at NSU," he stated. "Perhaps the most enjoyable part for me has been my interactions with both the faculty and staff members. In my 34 years in academia, I have never worked with a friendlier and nicer group of people."

In terms of his own research interests, Dr. Fleisher, who holds volunteer associate professor appointments at NSU's Oceanographic Center, the University of Miami, and the University of Wales in the United Kingdom, continues to focus on disease transmission via exposure to recreational waters. In addition, he serves on the *Journal of Community Health* Editorial Board and as a peer reviewer for publications that include *Water Research*, the *Journal of Epidemiology and Community Health*, the *Journal of Water and Health Research*, and *Environmental Science & Technology*.

Over the years, Dr. Fleisher has gained international status as a respected expert on the transmission of infectious disease via contact with recreational waters, which is a hard-earned reputation of which he is deservedly proud. "I have published numerous papers in clinical epidemiology as well as epidemiological and statistical methods, including 15 peer-reviewed articles, during my tenure at NSU," he stated. Proof of Dr. Fleisher's research prowess is evidenced by the notification he received earlier this year from Scopus — the largest abstract and citation database of peer-reviewed litera-

ture — that his body of research has been cited 1,037 times in 758 journals.

"I think my greatest achievement in the research environment, however, is the fact that an organization called ResearchGate, which has 1.2 million researchers worldwide, has rated my research among the top 2.5 percent of all members," he added. "ResearchGate is an organization that rates the quality of one's research rather than the quantity. Rating quality, not quantity, has been a growing trend throughout the research community with the advent of journal impact factors and ratings on Scopus and ResearchGate."

According to Dr. Fleisher, this is a promising trend he fully supports. "My pet peeve today is that too many researchers are judged by the quantity of their publications — and not the quality," he explained. "Too many researchers chase grant monies, leading them to conduct research in areas they are only partially educated in; thus, expertise in a single area of science is being diluted by the chase for grants. I think this is true nationwide and is having an effect on research in general. With the advent of journal impact factors, ResearchGate, and Scopus, we now have several methods of judging a researcher by the quality of his or her research."

As he enters his 11<sup>th</sup> year as an NSU-COM faculty member, Dr. Fleisher says he has no plans to slow down anytime soon. "As I get older, I want to maintain my activities in research, but I am increasingly interested in teaching the generation that will replace me," he concluded. "My aim is to explore evidenced-based teaching and try to make learning a fun and lifelong process."



**Colton**

**Scott Colton, B.A., APR**, COM/HPD director of medical communications and public relations, was reelected as chair of the American Association of Colleges of Osteopathic Medicine's Marketing and Communications Advisory Council in October.

**Halpern**

**John Halpern, D.O.**, a clinical assistant professor of family medicine and emergency room physician who also volunteers with the Florida Highway Patrol (FHP) Auxiliary, was featured on WSVN 7 News in early September for saving the life of an 89-year-old woman who fainted and stopped

**Levin**

breathing at a restaurant where he and his FHP partner were having lunch.

**William Levin, D.O.**, a longtime NSU-COM clinical associate professor of family medicine who served as president of the Dade County Osteopathic Medical Association in 1968, passed away on August 24 following complications from a prolonged illness.

**Anthony N. Ottaviani, D.O., M.P.H., MACOI, FCCP**, clinical professor of internal medicine, regional dean, and director of medical education at Largo Medical Center,

**Ottaviani****Qureshi**

was selected to serve on the Accreditation Council for Graduate Medical Education's Osteopathic Principles Committee.

**Yasmin Qureshi, D.P.T., M.H.S., M.P.T.**, was promoted from assistant to associate professor of osteopathic principles and practice in July.

**Sandhouse**

**Mark Sandhouse, D.O., M.S.**, associate professor and chair of the Department of Osteopathic Principles and Practice, was appointed medical director of the NSU-COM Health Care Centers in July.

## INTRODUCING...New Faculty Members



**Darren Cohen, D.O.**, who joined the Department of Medical Education and the Department of Family Medicine in September, is a 2005 NSU-COM alumnus who completed his emergency medicine residency in 2008.



**Kira Fenton, D.O.**, who joined the Department of Internal Medicine in early November, is a 2010 NSU-COM alumna who completed her internship and residency at Broward Health Medical Center.



**Phyllis Filker, D.M.D., M.P.H.**, who joined the Master of Public Health Program on July 15, had been associated with the

NSU College of Dental Medicine for several years and holds the academic rank of associate professor. In her new role, Dr. Filker serves as director of graduate and community programs.



**Traci-lyn Eisenberg, D.O.**, who joined the Department of Family Medicine on July 21, is a 2011 NSU-COM alumna who completed her residency at Broward Health Medical Center.

**Beau Gedrick, D.O.**, a one-year sports medicine fellow, is a 2010 NSU-COM alumnus who completed his residency training at Henry Ford Macomb Hospital in Michigan.

**Lisa Gronski, D.O.**, a one-year sports medicine fellow, is a 2010 NSU-COM alumna who completed her internship and residency training at the University of Connecticut.

**Brian J. Medlin, D.O.**, who joined the college's Florida Department of Corrections

Psychiatry Residency Program in July, received his D.O. degree from Lake Erie College of Osteopathic Medicine.

**Sharmayn Sayers-Erfourth, D.O.**, who joined the college's Florida Department of Corrections Psychiatry Residency Program in July, graduated from William Carey University College of Osteopathic Medicine.



**Jesse Singer, D.O., M.P.H.**, a 1999 NSU-COM alumnus, recently joined the faculty of the college's Biomedical Informatics Program.



**April Thomson, D.O.**, a 2010 NSU-COM alumna who joined the Department of Internal Medicine in July, previously worked at Broward Health Community Health Services.




**Atherley-Todd**

**Cheryl Atherley-Todd, M.D., C.M.D.**, assistant professor of family medicine and geriatrics, presented a paper on “Modern Trends in the Treatment of Dementia” at the OMICS International Conference on Geriatrics and Gerontology held July 8-11 in Chicago, Illinois.


**Bertman**

**Sandra Bertman, Ph.D.**, clinical associate professor of psychiatry, authored an article entitled “Communicating with the Dead: Timeless Insights and Interventions from the Arts” in *Omega* (2014) and a book chapter entitled “Using the Arts and Humanities with the Dying, Bereaved...and Ourselves” in *Death, Dying, and Bereavement: Contemporary Perspectives, Institutions, and Practices*. Additionally, she received lifetime achievement awards from the Arts & Health Alliance and the International Workgroup of Death, Dying, and Bereavement.

**OMS-II Debra Cheng** coauthored an article entitled “Quantitative and Temporal Requirements Revealed for ZAP70 Catalytic

Activity During T-Cell Development” that was published in the July issue of *Nature Immunology*. She also served as a contributing author for the article “A Sharp T-Cell Antigen Receptor Signaling Threshold for T-Cell Proliferation,” which was published in the August issue of *PNAS*.

**Marie Florent-Carre, D.O., M.P.H., AAHIVS**, assistant professor of family medicine, served as a volunteer in Les Cayes, Haiti, with Gaskov Clerge Foundation (GCF)—a nonprofit organization that has been serving the underserved rural population of Haiti’s southern coast for more than 14 years. Dr. Florent-Carre, along with 50 other health care professionals from various specialties, provided care to approximately 3,000 patients during a medical outreach trip in August.

**Michelle Gagnon Blodgett, Psy.D.**, who serves as coordinator of geriatric clinical services and assistant clinical professor in the Department of Geriatrics and director of the NSU Counseling


**Corbitt**

Center for Older Adults, currently chairs the Broward County Hoarding Task Force, which includes members from various university-wide programs and stakeholders from a variety of organizations in Southeast Florida.

**OMS-II Alexandra Grammenos** and **OMS-II Kelly Corbitt** presented a case study entitled “Atypical Recurrence of Invasive Ductal Carcinoma Presents as Dermal/Epidermal Adenocarcinoma” at the 18<sup>th</sup> SIS World Congress on Breast Healthcare in Lake Buena Vista, Florida, held October 16-19. The conference, which featured representation from over 50 countries, addressed breast health care across the globe and explored a variety of topics such as oncology, pathology, and psycho-social implications.

**T. Lucas Hollar, Ph.D.**, assistant professor of public health, presented “Evaluation of Early Childcare Centers’ Adoption of Nutrition Policies” as part of the Centers for Disease Control and


**Florent-Carre**

Prevention, Division of Community Health, Evaluation Webinar Series entitled “Maximizing Scientific Rigor in Outcomes-Based Evaluation” on September 18. The presentation was based on the collaborative work he and **Nicole Cook, Ph.D., M.P.A.**, assistant professor of public health, conducted for Transforming Our Community’s Health evaluation activities. He also accepted an invitation to serve as an outside reviewer for grant proposals submitted to the Health Foundation of South Florida.

**James T. Howell, M.D., M.P.H.**, assistant dean for professional relationships and chair of the Department of Rural and Urban Underserved Medicine, moderated a panel discussion on “The Future of Medical Education in Palm Beach County” at the Future of Medicine Summit VIII held October 9-10 in West Palm Beach, Florida.

**Robin J. Jacobs, Ph.D., M.S.W., M.S.B.I.**, associate professor of psychiatry and


**Gagnon Blodgett**

**Grammenos**

**Hollar**

**Howell**

**Jacobs**

**Klimas**

**Leiva**



Lou



Marriott



Newman



Qureshi



Rana



Ray

behavioral medicine, biomedical informatics, and public health and director of international medicine, received her M.S. in Biomedical Informatics degree in August. She also coauthored a paper with **Jennie Lou, M.D., M.Sc.**, entitled "A Systematic Review of eHealth Interventions to Improve Health Literacy for Better Health Outcomes," which was published in the *Health Informatics Journal*. In addition, Dr. Jacobs served as a scientist reviewer for the Patient-Centered Outcomes Research Institute on August 11-12 in Washington, D.C.

**Nancy Klimas, M.D.**, chair of the Department of Clinical Immunology and director of the Institute for Neuro-Immune Medicine (INIM), and **Gordon Broderick, Ph.D.**, director of the INIM Clinical Systems Biology Group and a professor at NSU's Center for Psychological Studies and College of Pharmacy, coauthored an article entitled "Theory-Driven Models for Correcting 'Fight or Flight' Imbalance in Gulf War Illness" that is highlighted on the U.S. Department of Defense's Congressionally Directed Medical Research Programs Web site.

**OMS-III Daniel F. Leiva** coauthored the American College of Preventive Medicine's position statement entitled "Preventing Texting While Driving: A Statement of the American College of

Preventive Medicine" that was published in the November 2014 issue of the *American Journal of Preventive Medicine*.

**Oneka B. Marriott, D.O., M.P.H., FACOP, FAAP**, assistant professor of pediatrics and public health and assistant director of medical education for the NSU-COM/Palm Beach County Health Department Preventive Medicine Residency Program, received her certificate of completion for the NYIT-COM/AOA Health Policy Fellowship in September. In addition, she was awarded the second-place prize for her health policy poster entitled "Foreign Medical Schools: A Good Investment or Bad Medicine for Taxpayers" that was presented at OMED 2014, which was held October 25-29 in Seattle, Washington.

**Doris Newman, D.O., FAAO**, associate professor of osteopathic principles and practice and director of the Department of Rural and Urban Underserved Medicine, was nominated by Robert Juhasz, D.O., president of the American Osteopathic Association (AOA), to serve on the Nominating Task Force for the Osteopathic Principles under the Accreditation Council for Graduate Medical Education in the new single accreditation system. She also was an invited lecturer at the AOA's Osteopathic Medical Education conference (OMED)

held October 25-29 in Seattle, Washington, for the joint lecture series of the American Academy of Osteopathy and the American College of Pediatricians. In July, she was selected to serve as alternate delegate to the American Osteopathic Association's House of Delegates, held July 15-20 in Chicago, Illinois, for the American Academy of Osteopathy.

**Yasmin Qureshi, D.P.T., M.H.S., M.P.T.**, associate professor of osteopathic principles and practice, **Andrew Kusien-ski, D.O.**, assistant professor of osteopathic principles and practice and chair of the Department of Sports Medicine, and **OMS-IV Julianne L. Bemski** coauthored an article entitled "Effects of Somatic Dysfunction on Leg Length and Weight Bearing" that was published in the August issue of the *Journal of the American Osteopathic Association*. Dr. Kusien-ski also served as a volunteer physician for the United States Olympic Committee at its training facility in Colorado Springs, Colorado, from July 21 to August 5.

**Arif M. Rana, Ph.D., Ed.S., M.S.**, assistant professor of biomedical informatics and medical education and director of faculty development, coauthored a peer-reviewed paper entitled "Development and Implementation of a Clinical and Business Intelligence

System for the Florida Health Data Warehouse" that was published in the October issue of the *Online Journal of Public Health Informatics*. He coauthored the article with **Raed H. AlHazme, M.S.B.I.** ('12) and **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. On August 9, Dr. Rana received the Meritorious Service Award from International Health Initiatives, which is a nonprofit organization whose mission is to promote, develop, and support health promotion and disease prevention initiatives for underserved populations domestically and internationally.

**OMS-II Kristi Ray** served as a platform presenter during Columbia University's teleconference on International Sustainable Development, where she presented her research on sustainable agriculture and malnutrition indicators that was conducted in Bali, Indonesia, this past summer. Her project, entitled "United Nations Millennium Goal: Health for All," was presented to more than 100 United Nations representatives that participated in the teleconference. She also received first-place honors in the Best Care Practices in the Geriatrics Continuum conference held October 16-19 in Lake Buena Vista, Florida, for her coauthored poster entitled "Primary Aldosteron-





Roseman



Rokusek



Skettini



Sprague



Tewary



Thomas-Purcell

ism in a Patient with Refractory Hypertension.” Ray coauthored the project with **PGY-2 Sushil Deshmukh, D.O., Elizabeth Hames, D.O., and Naushira Pandya, M.D., CMD, FACP**. In addition, Ray and **OMS-II Caitlin Leclair** presented at the OMED-BIOM international research seminar held in Seattle, Washington, at the end of October on the topic “Sustainable Development: Nutrition and Health Care in a Developing World.”

**Janet Roseman, Ph.D., R-DMT**, assistant professor of medical education, was named a Humanistic Clinician by the *Journal of Pain and Symptom Management* and was invited to publish her research on the pilot program for the Sidney Project in Spirituality and Medicine and Compassionate Care™. In addition, her article entitled “Can We Talk? Can We Give Voice to the Taboo Topics That Are Usually Not Embraced in Residency Medical Education?” appeared in the September edition of the peer-reviewed journal.

**Cecilia Rokusek, Ed.D., R.D.**, assistant dean for education, planning, and research, coauthored a paper entitled “Creating an Ongoing Sustainable Culture of Interprofessional Education and Practice” with **Kamilah B. Thomas-Purcell, Ph.D., M.P.H., CHES**, and **Stacey Pinnoch, M.S.W.**,

that was presented at the annual interprofessional conference held October 11-12 at Thomas Jefferson University in Philadelphia, Pennsylvania. Dr. Rokusek also presented a weeklong program focused on international collaboration at Comenius University School of Medicine in Bratislava, Slovakia, on July 1-8. In addition, she was appointed to the Health Resources and Services Administration Alzheimer’s Disease and Related Dementia Uniform Curriculum Advisory Panel.

**OMS-II Julia Skettini** received a third-place award for her research project entitled “Long-Term Evaluation of Standing Systolic Blood Pressure Using 24-Hour Ambulatory Blood Pressure Monitoring in Patients with Parkinson’s Disease and Symptomatic Neurogenic Orthostatic Hypotension Treated with Droxidopa.” She presented her research at the Best Care Practices in the Geriatrics Continuum conference held October 16-19 in Lake Buena Vista, Florida.

**Peter Sprague, D.P.T., PT, OSC**, assistant professor of osteopathic principles and practice in the Department of Sports Medicine, authored an article entitled “The Relationship Between Glenohumeral Joint Rotational Range of Motion and the Functional Movement Screen Shoulder Mobility Test” that was

published in the October issue of the *International Journal of Sports Physical Therapy*. He also coauthored a study entitled “Changes in Functional Movement Screen Scores Over a Season in Collegiate Soccer and Volleyball Athletes” that was published this fall in the *Journal of Strength and Conditioning Research*. In addition, Dr. Sprague was invited to serve as a peer reviewer for the journal *Physical Therapy in Sport*.

**Sweta Tewary, Ph.D., M.S.W.**, clinical assistant professor and evidence-based practice project director, coauthored a book chapter entitled “Research in Advance Dementia: Lessons Learned from the Community” that was

published in the book *Dementia: Prevalence, Risk Factors, and Management Strategies* in August 2014. Additional coauthors were **Nicole Cook, Ph.D., M.P.A., Naushira Pandya, M.D., CMD, FACP**, and **Cecilia Rokusek, Ed.D., R.D.**

**Kamilah B. Thomas-Purcell, Ph.D., M.P.H., CHES**, assistant professor of public health and director of interprofessional primary care education, discussed the topic “Evaluation of Pathways: An HIV Risk Reduction Educational Program for MSM in Grenada, West Indies” at AIDS 2014—the 20<sup>th</sup> International Conference on HIV/AIDS held July 21-25 in Melbourne, Australia.

## Slovakian Symbiosis



During the past several months, three medical students from Slovakia studied at NSU-COM to enhance their learning experiences. Lucia Kukulova and Zuzana Malisova from Comenius University in Bratislava did a one-month rotation in the NSU-COM clinics, while Jana Rusinkova, a Ph.D. student from the University of Zilina in Slovakia, spent five months conducting research for her dissertation that examines e-learning in Slovakia and the United States. *Pictured (above from left) are Jana Rusinkova, Lucia Kukulova, Dr. Anthony Silvagni, Zuzana Malisova, Dr. Cecilia Rokusek, and Dr. Leonard Levy.*

# NSU-COM Receives \$1.95 Million Grant to Investigate CFS/ME

## *National Institutes of Health Award Will Fund Study of the Disease in Men*

**Mary Ann Fletcher, Ph.D.** (pictured right), who serves as the Schemel Professor for NSU-COM's Institute for Neuro-Immune Medicine, and her research team recently were awarded a \$1.95 million grant from the National Institutes of Health (NIH)/National Institute of Neurological Disorders and Stroke to study complex biomarkers of chronic fatigue syndrome/myalgic encephalomyelitis (CFS/ME) in men.

Dr. Fletcher and her team will combine the findings from this 100 percent federally funded four-year study with data the team previously compiled from its other sponsored programs in Gulf War Illness, a related neuro-immune disorder. Grants for these four studies total nearly \$10 million and have been funded by the U.S. Department of Defense, U.S. Department of Veterans Affairs, and the NIH.

"Our goal is to pin down precisely what are the differences between men and women facing these diseases and to develop more effective and specific treatment plans using existing drugs that are currently being used to treat other related conditions and symptoms," Dr. Fletcher said.

According to the Centers for Disease Control (CDC), CFS/ME is a "debilitating complex disorder char-

acterized by profound fatigue that is not improved by bed rest and that may be worsened by physical or mental activity. Symptoms affect several body systems and may include weakness, muscle pain, impaired memory and/or mental concentration, and insomnia, which can result in reduced participation in daily activities."

CFS/ME occurs most often in people who are in their 40s and 50s, but it can arise at any age according to the CDC. The disease affects more than one million Americans and is four times more likely to occur in women than in men. Many experts believe a significant number of cases go undiagnosed and the actual number of Americans with the disease is much higher.

Since flare-ups of the disease often occur during physical activity, the new grant will involve a cross-sectional study that investigates biological indicators in patients before, during, and after an exercise protocol. These indicators, also known as biomarkers, will allow the institute's researchers to target the root causes of the disease using computational biology models.

The NSU-COM Institute for Neuro-Immune Medicine's research consortium consists of Dr. Fletcher and the following individuals:



**Nancy Klimas, M.D.**, director of the Institute for Neuro-Immune Medicine, chair of department of clinical immunology, and professor of medicine.

**Mariana Morris, Ph.D.**, professor and director of the institute's pre-clinical research laboratory.

**Gordon Broderick, Ph.D.**, director of the institute's Clinical Systems Biology Group and professor at the NSU Center for Psychological Studies and College of Pharmacy.

**Travis Craddock, Ph.D.**, associate director of the institute's Clinical Systems Biology Group and assistant professor at the NSU Center for Psychological Studies and NSU's Graduate School of Computer and Information Sciences.

Additionally, the team is affiliated with the research service of the Bruce W. Carter Department of Veterans Affairs Medical Center and Miami VA Healthcare System.



## The Walmart-ization of Primary Care

By Nichole Geary, J.D.

Although retail medical clinics are not a novel idea, Walmart is taking the concept to a whole new level.



Nichole Geary is a health law attorney in the West Palm Beach office of Broad and Cassel.

has been small, and for primary care providers, nonexistent. More recently, the entrance of Walmart has changed the landscape dramatically.

Walmart has been quietly increasing its retail medicine footprint, opening primary care clinics in rural health areas of South Carolina and Texas. These clinics are designed to be customer-centric, advertising walk-in checkups for \$40 and seven-days-a-week accessibility. Currently, Walmart does not accept private insurance at its clinic locations; however, it is enrolling clinics in state Medicaid programs. The retail giant is working with QuadMed to staff the primary care clinics with nurse practitioners and anticipates rolling out three more locations within the next year.

Consumer-directed medicine and chronic-disease management comprise a large market, representing hundreds of billions of dollars spent annually, and Walmart has the marketing reach and store foot traffic to emerge as a strong player. Combine Walmart's marketing reach and the influx of new health care exchange enrollees with high deductible plans, and these new clinics could potentially change the way primary care services are provided on a national level.

While Walmart's ultimate success as a primary care retailer and the effects of its \$40 checkup on the national cost of health care remain to be seen, companies and in-

dividuals looking to follow Walmart's example should take note – Walmart's entry into the medical world raises several complicated legal hurdles. For example, many states such as South Carolina and Texas have laws that ban the corporate practice of medicine. These laws prohibit non-physician-owned companies such as Walmart from owning or exerting control over medical facilities or employing medical professionals. In these states, all medical facility policies, even those affecting only clinic hours or payment rates, must be made by a physician.

Moreover, several states have fee-splitting laws that may limit Walmart's ability to retain a percentage of clinic revenue. In addition, many states' laws prohibit payment for patient referral and control or limit the marketing of medical services. In these states, marketing contracts that are based upon a per-lead fee may be prohibited. Penalties for violation of these anti-referral laws range from civil fines to criminal prosecution.

Finally, scope-of-service issues may arise based upon the provision of primary care by nurse practitioners and the level of physician supervision required in each state. Walmart's ability to successfully navigate these legal issues will certainly play a part in its ultimate success as it attempts to *rollback* the prices of primary care.





# Breaking Barriers

## ***Dr. Joshua Lenchus Helps Propel the Osteopathic Profession Forward***

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

Shattering glass ceilings and effecting change are traits that have turned ordinary individuals into nationally renowned figures throughout history.

Who can forget the indomitable civil rights figure Rosa Parks—a local National Association for the Advancement of Colored People leader who was arrested for refusing to give up her seat to a white passenger on a city bus in Montgomery, Alabama on December 1, 1955?

This event, as well as many others, would prove to be a seminal moment in U.S. history that helped propel the civil rights movement and the fight for racial equality to the forefront of the nation's consciousness.

On a similar but less-incendiary level, osteopathic physicians have worked tirelessly over the years to battle rampant prejudice at every turn, which has allowed the osteopathic profession to achieve legislative parity with its allopathic brethren as well as near-universal acceptance nationwide.

One individual leading the osteopathic charge is 2000 NSU-COM alumnus Joshua D. Lenchus, D.O., R.Ph., FACP, SFHM, who achieved a major milestone in June 2012 when he became the first osteopathic physician to be named president





*According to Dr. Lenchus, simulation-based instruction plays a key role in his career. "In 2007, we launched a simulation-based invasive bedside procedural curriculum, teaching learners how to perform common procedures using mannequins in a standardized and formal manner," he said.*

of the Jackson Health System medical staff in the institution's history.

"Throughout medical school, I internalized the feeling I had to push the envelope because I was going to be a D.O.," said Dr. Lenchus, who intends to be the first D.O. to serve as president of the Florida Medical Association, which was established in 1874. "Some of my classmates thought we had to prove ourselves because of our degree, but I was never one to recognize limits, believing that most are self-imposed. Being able to pave the way as the first D.O. to do something is incredibly rewarding personally and professionally."

Becoming chief of staff for the Miami, Florida-based Jackson Health System, however, is but one of the D.O. firsts he's achieved, which includes being named associate program director of Jackson's Internal Medicine Residency Program, chairman of the American College of Physicians' Council of Early Career Physicians, and an officer of the Broward County Medical Association.

Based on his current status as an osteopathic trailblazer, was there a significant event that occurred in his formative years that compelled him to become such a formidable figure in the profession? Not according to Dr. Lenchus, who admitted he "knew next to nothing about osteopathic medicine before entering NSU-COM."

### Medical Calling Proves Instinctive

Although he cannot pinpoint a specific event that inspired him to pursue medicine, Dr. Lenchus intuitively knew becoming a physician would be his inevitable destiny. "As far back as I can recall, I wanted to be a doctor," he explained. "It was the altruistic notion of helping others—and the mysteries of the human body—that proved most fascinating to me. My earliest consideration was that of an obstetrician, probably because I was the eldest of four boys and my mom delivered us all in 10 years, but there were no physicians in my family who influenced me. I enjoyed math

and science, so health care seemed like a natural course to pursue."

When it came time to begin his undergraduate studies, Dr. Lenchus chose to attain a bachelor's degree in Pharmacy from the University of Florida because of the interactions he had with his high school chemistry teacher—a Vietnam veteran who conducted early research about napalm and its effects. "His scientific stories intrigued me, so I asked him what I could do with a degree in chemistry," said Dr. Lenchus, who worked as a pharmacy technician while attending community college. "He told me I could teach, do research, or pursue pharmacy, so I chose the latter.

"I always knew I'd ultimately become a physician, despite this beginning," he added. "Everyone needs to complete undergraduate work before medical school, and I thought having a pharmacy background made the most sense. In fact, I wrote of my desire to pursue medical school education in my personal statement to pharmacy school. And they still accepted me."

Prior to attending medical school, Dr. Lenchus spent three years work-



**TYING THE KNOT:** Dr. Lenchus and his wife on their wedding day: January 12, 2003.

## Looking Back...at a Lifetime of Memories



*Fun photo with brothers and grandmother*



*1990 graduation from Broward College*



*1993 graduation from University of FL*



*At 2000 NSU-COM graduation with his mom*



*Teaching simulation at Jackson Memorial*



*2014 Broward College Alumni Merit Award*

ing in the pharmacy realm, which included serving as a clinical pharmacist in the mid-1990s at Wellington Regional Medical Center in Palm Beach County, Florida. Because the medical center housed an osteopathic family medicine residency program, Dr. Lenchus worked with several physicians such as Robert Campitelli, D.O., who had a profound impact on his impending career course. "In fact, it was Bob, a registered pharmacist who had returned to medical school, who had the most influence on my decision to become a D.O.," Dr. Lenchus explained. "We were very similar and had many discussions about osteopathic medicine."

After applying to NSU's College of Osteopathic Medicine in 1995, he was accepted into the program in 1996. When asked to explain the most memorable aspect of his

osteopathic education at NSU-COM, his response was unequivocal. "The teaching!" he exclaimed. "Many of our professors were incredibly gifted and passionate, inspiring us to do our best, and feeding the fire of our unyielding inquisitiveness."

"I especially enjoyed talking Dr. Gerald Conover (professor and chair of the Department of Anatomy at NSU's College of Medical Sciences) into allowing me to serve as an approved anatomy tutor," he added. "This was unusual because tutors were those who had accepted a summer dissection job after having completed the first year of anatomy class. In my case, I simply enjoyed the course so much, performed fairly well, and really loved teaching. During anatomy lab, I would teach our small group. After a short time, others would come over and ask

questions and I'd help them. Before long, other classes (physical therapy and physician assistant) solicited my assistance as well, so I asked for approval to teach them, and it was granted. It was an incredibly rewarding experience."

### Trailblazing Career Provides Fulfillment

Following his 2000 graduation from NSU-COM, Dr. Lenchus completed a rotating internship at Broward General (now Broward Health) Medical Center and his internal medicine residency training at Jackson Memorial Hospital in Miami in 2004. In the ensuing decade, he has become a renowned and respected figure in the massive Jackson Health System operation due to his forward-thinking approach and dedication to excellence.





"I have the best job in the world," he admitted. "I truly enjoy waking up each day to do what I do. While I wear a number of different hats reflecting involvement internally, within the hospital, and with external medical organizations, my *day* job is divided into clinical, teaching, education, research, and administrative roles."

As president of Jackson Health System's medical staff, Dr. Lenchus serves as the liaison between its 2,500 credentialed health care providers and the chief executive officer for one of the largest teaching health systems in the United States. "This position

Internal Medicine Residency Program and associate director of the University of Miami-Jackson Memorial Hospital Center for Patient Safety, where he is in charge of the center's daily operations. "Having developed a crisis management simulation exercise some 10 years ago, I quickly became fascinated with the use of simulation and its applicability to patient safety," he explained. "In 2007, we launched a simulation-based invasive bedside procedural curriculum, teaching learners how to perform common procedures using mannequins in a standardized and formal manner. Some of

reviewed medical journals, garnered awards and external grant funding, and allowed Dr. Lenchus to speak at, as well as mentor, other institutions across the country.

"Ultimately, the ability to affect medical care for those whom you do not directly serve is an amazing responsibility—a concept imparted upon me by one of my former chairs of internal medicine," he stated. "The opportunity to change health care is incredible. Mentoring and teaching others round out the reasons why I love my chosen profession."

Although work responsibilities monopolize much of his time, Dr.

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**"The lesson is that we are unstoppable if we have the drive, motivation, determination, persistence, and fortitude. Glass ceilings are exactly that because they can be broken. Once someone else achieves a position formerly thought impossible, others can follow. It is in this way that one person can effect a tremendous change." - Dr. Lenchus talking about his philosophical approach to life**

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affords me unfettered access to the department chairs and service chiefs and provides me with some authority to assist them in addressing issues that require intervention," said Dr. Lenchus, who was recently reelected as medical staff president. "It has exponentially improved the camaraderie with my more senior colleagues, from whom I learn every day."

In addition to his chief-of-staff responsibilities, he serves as associate program director for Jackson's

those trained form the nucleus of a procedure team—a consult service that can be called by anyone in the hospital to perform a procedure."

Now in its eighth year, the Center for Patient Safety has trained more than 1,500 people, received more than 7,500 calls, and demonstrated a significant improvement in the provision of patient safety care. Because of its success, the center's work has been presented at local, state, and national conferences, published in peer-

Lenchus is extremely aware of the importance of maintaining a healthy work/life balance. Consequently, spending time with his wife Deborah, who he met during his fourth year as an NSU-COM student, and their four children—Isaac, Aaron, Samuel, and Hannah—who range in age from almost two to eight, is a major priority. "Without their collective unwavering love and support, I would not have been able to accomplish anything in my professional

career," he acknowledged. "I am confident that my level of involvement is much more than my wife bargained for when we got married."

### Ruminations on Being a Physician

In a career brimming with achievement, Dr. Lenchus said the most fulfilling aspect of being a physician is the ability to effect change. "There is the influence we have on our patients—to materially alter their lives—whether helping a noncompliant patient understand the importance of medication adherence, or assisting a family in dealing with

It is difficult to speak about my day if I've been present as someone's loved one died. Even more challenging is empathizing with others on that day. Colleagues can draw on us for support and assistance, or be the source of both when needed. True mentors have an unselfish nature, looking out for what is best for you, even when you do not know what that may be. There is a basic trust and respect in that relationship."

Because of his humanistic approach to medicine and patient care, Dr. Lenchus aspires daily to be an earnest mentor to those who enter his professional circle. "I try to go

out of my way to learn about others and make myself available at all hours, anytime, for those who need me," said Dr. Lenchus, who has received numerous accolades for his people-first approach, including both the 2014

Broward College Hall of Distinction Distinguished Alumni Merit Award and the Soref Jewish Community Center Humanitarian of the Year honor. "Especially in a teaching environment, I make it a point to let people know they should never feel as if they are alone. There is always someplace to turn, and I have been fortunate to have had opportunities to assist others in their time of need.

"Additionally, my involvement in organized medicine, especially legislative advocacy, has proved incredibly beneficial," he continued. "Aside from gaining an inside look

at how intimately politics affects the practice of medicine, I have been fortunate to be part of organizations that help craft legislation, or the implementation thereof, such as the Florida Osteopathic Medical Association, Florida Medical Association, American College of Physicians, and Society of Hospital Medicine."

Winning awards for doing something you love is a dividend, an outgrowth of an individual's unabashed commitment to being the best he or she can be. That certainly explains why he has been the recipient of numerous honors and awards over the past few years. "Any accolades received are due to those who served as my mentors," said Dr. Lenchus, who received the Jackson Internal Medicine Residency Program Faculty Award for Excellence in Teaching in 2012-13. "My parents taught me valuable life lessons that I have now passed on to others. Some of my instructors at each level of schooling have had profound impacts on the man I have become. And I remain in contact with a number of my classmates, who continue to inspire me."

As for being an osteopathic trailblazer, Dr. Lenchus humbly downplayed his contributions, choosing instead to impart his philosophical approach to life. "The lesson is that we are unstoppable if we have the drive, motivation, determination, persistence, and fortitude," he eloquently concluded. "Glass ceilings are exactly that because they can be broken. Once someone else achieves a position formerly thought impossible, others can follow. It is in this way that one person can effect a tremendous change. My parents taught me that."



end-of-life issues, physicians have an inherent nature of being with patients at the beginning, middle, and end of a disease process," he explained.

"Patients, colleagues, and mentors all teach us valuable lessons—generally when we least expect them," he added. "Patients typically keep us grounded in reality. After seeing them, our own issues are put into a clearer perspective in regard to importance. Selecting a restaurant at which we will eat dinner is meaningless after caring for someone who does not know from where his next meal will come.





Behnam-Terneus



Cymet



Drowos



Gozleveli



Hasty

**Maria Behnam-Terneus, D.O.** ('09) is currently serving as the academic hospitalist fellowship associate program director and pediatric residency associate program director at Miami Children's Hospital.

**Tyler Cymet, D.O., FACP, FACOF** ('88) was elected as the 167<sup>th</sup> president of the Maryland State Medical Society, also known as MedChi, in October. MedChi is a nonprofit organization whose goal is to serve as Maryland's foremost advocate and resource for physicians, patients, and the public's health.

**Victoria M. Dreisbach, D.O.** ('97) had a legal digest article published in the *Journal of the American Academy of Psychiatry and the Law* entitled "Not Mentally Ill, Not Dangerous...and Not Discharged."

**Joanna Drowos, D.O., M.B.A., M.P.H.** ('04) was named associate chair of the Integrated Medical Science Department at Florida Atlantic Univer-

sity's (FAU) Charles E. Schmidt College of Medicine. Dr. Drowos previously served as director of FAU's community and preventive medicine clerkship, center medical director for the Riviera Beach Health Center, and director of medical education for the NSU-COM/Palm Beach County Health Department Preventive Medicine Residency Program.

**Tamer Gozleveli, D.O.** ('87), who owned a three-site family practice called Primary Care Offices in Broward County, Florida, passed away on July 7. In addition to running his busy practice, Dr. Gozleveli served as an NSU-COM clinical assistant professor and as chief of Memorial Hospital West's Department of Family Medicine. Because he served in a variety of leadership roles both in the community and on a national level—including a stint as president of the Broward County Osteopathic Medical Association—Dr. Gozleveli was instrumental in regard to educating health care provid-

ers in the areas of quality care and patient satisfaction.

**Eric Harris, D.O.** ('08), a hematologist/oncologist, recently joined the Florida Hospital HealthCare Partners medical staff at Florida Hospital Memorial Medical Center in Daytona Beach.

**Robert Hasty, D.O., FACOI, FACP** ('00), who received the 2014 American College of Osteopathic Internists' (ACOI) Educator of the Year Award, has been appointed as associate dean for postgraduate affairs for Campbell University's Jerry M. Wallace School of Osteopathic Medicine in Buies Creek, North Carolina. Additionally, he was selected to serve on the Accreditation Council for Graduate Medical Education's Osteopathic Principles Committee.

**Marlow Hernandez, D.O., M.P.H., M.B.A., CPH** ('11) recently established what he calls a "one-stop shop for primary care" called Cano Health in Pembroke Pines, Florida, that provides pro-

gressive medical, dental, vision, and chiropractic care. In addition, he is in the process of creating a nationally televised medical reality show entitled *Medicina Moderna* that will feature 12 contestants and be filmed over a span of several months. Each contestant will be paid \$100 per episode and will compete for the grand prize of \$10,000—and the right to be crowned Champion of Modern Medicine. He also received his board certification in internal medicine from the American Board of Internal Medicine.

**Christopher E. Keel, D.O.** ('09), who recently completed his urology residency at Tulane University School of Medicine in New Orleans, Louisiana, joined Academic Urologists at Erlanger Hospital in Chattanooga, Tennessee, where he is serving as the new specialist in robotic and minimally-invasive urologic oncology and reconstruction.

**Michele J. Lapayowker, D.O., FACOOG** ('90), who recently relocated her gynecology



Hernandez



Keel



Lapayowker



Moskow



Nadkarni



Pescatore



Peterson



Ruiz



Sasser



Zahn

practice to Plantation, Florida, authored an article entitled “Back to School and Back to Taking Care of Yourself” that appeared in the October issue of *Our City Plantation*.

**Rachel Pierre Latibeaudiere D.O.** ('12) was the lead author in the research article entitled “Surveillance Cultures with Carbapenem-Resistant *Acinetobacter baumannii* Predict the Development of Clinical Infections: A Cohort Study” that was published in *Clinical Infectious Diseases*.

**Laura E. Michael, D.O., FCAP** ('93) was elected president of the American Osteopathic College of Pathology at the AOA's Osteopathic Medical Conference and Exposition held October 25-29 in Seattle, Washington. She also accepted a gastrointestinal pathologist position at EndoChoice—an international medtech company in Alpharetta, Georgia.

**Jaclynn Moskow, D.O.** ('13), who was recently named an NSU-COM clinical instructor in public health, served as a scientific adviser to a movie entitled *The Perfect 46* that was released in the spring of 2014. In addition, because she is a skilled professional poker player, Dr. Moskow will be featured on the next season of *Poker Night in America* on CBS Sports.

**Lorraine Silliman Nadkarni, D.O.** ('93) passed away on April 10 after losing a valiant four-year battle with brain cancer. A captain in the U.S. Navy Medical Corps, Dr. Nadkarni's career included tours at Guantanamo Bay, Parris Island and the Naval Hospital in Beaufort, South Carolina, the Naval Health Clinic in Pearl Harbor in Hawaii, and in Yokosuka, Japan. She also served on the Secretary of the Navy's Council Review Board-Physical Evaluation Board in Washington, D.C., and was deployed in support of Operation Iraqi Freedom to Kuwait. Her military service earned her many prestigious military awards, including the Legion of Merit, the Meritorious Service Medal, and the Navy and Marine Corps Commendation Medal with two gold stars. Dr. Nadkarni is survived by her husband, Dipak D. Nadkarni, D.O. ('93), who currently serves as a captain in the U.S. Navy Medical Corps and is based in Quantico, Virginia.

**Earle M. Pescatore, Jr., D.O., M.H.A., FACOG** ('89) who is affiliated with Women's Continence and Robotics Surgical Specialists, LLC—a leading South Florida practice for gynecological services and urinary incontinence—earned his board certification in female pelvic medicine

and reconstructive surgery from the American Board of Obstetrics and Gynecology in October.

**Patrick Peterson, D.O.** ('97) passed away on August 5 at the age of 50 at his residence in Harrisburg, Illinois. He is survived by his mother, two children, and a sister.

**Berry Pierre, D.O., M.P.H.** ('11), who completed his internal medicine residency training at Columbia Hospital in West Palm Beach, Florida, is now working as an attending physician at Bethesda Health Physician Group in West Palm Beach.

**Jeffrey G. Pirofsky, D.O.** ('89) was elected vice president of the American Osteopathic College of Physical Medicine.

**Camilo A. Ruiz, D.O., FACOI** ('07) was chosen to be an official spokesperson for the American Academy of Sleep Medicine. In August, he served as a guest speaker on RCN Radio Columbia discussing optimal sleep duration to an audience of over one-million listeners.

**Lona Sasser, D.O.** ('98), who recently celebrated the one-year anniversary of opening her OB/GYN solo practice in Coral Springs, Florida, coordinated a local Monster Mash 5k run to

encourage patient health and give back to the community.

**Deepa Sharma, D.O.** ('05), who relocated to Maui, Hawaii, in August to accept a position as a family physician at Kaiser Permanente, currently hosts a weekly radio segment called “Feeling Good with Doctor Deeps” on *Dirty Pop* with Lance Bass on SiriusXM.

**Shani Studnik, D.O.** ('97), a prominent South Florida dermatologist and skincare specialist, has opened a practice in Aventura, Florida, in partnership with Horwitz Dermatology, where he is providing cutting-edge medical and cosmetic dermatology services.

**Yvette Tivoli, D.O.** ('08) discussed the topic “Acral Myxoinflammatory Fibroblastic Sarcoma Successfully Treated with Mohs Micrographic Surgery” at the American Osteopathic College of Dermatology Annual Meeting held October 26-28 in Seattle, Washington. She also coauthored an article entitled “How to Make Calcium Hydroxylapatite Injections Safer” that was published in the September issue of the *Journal of Drugs in Dermatology*.

**Elise J. Zahn, D.O., M.B.A., FACEOP-D** ('96) was named as a National Hockey League team physician for the Tampa Bay Lightning.





# Return to Japan Reveals Triumph and Tragedy

By Joshua Kretchmar, Ph.D., D.O., Class of 2014

**O**n March 11, 2011, I coincidentally arrived in Japan on the day the infamous earthquake struck that precipitated a nuclear disaster and devastating tsunami, which created a tidal wave that killed almost 19,000 people.

Three years later, Pacific Ocean shipping channels are still filled with navigation hazards and enormous toxic *islands* of tsunami wreckage, and the world is still trying to determine the scope and consequence of the Fukushima Daihatsu Nuclear Reactor meltdown. This was a natural and human disaster of epic proportions, with fallout that

will take many decades, or even centuries, to handle.

Scientists are already reporting problems with birds and amphibians in the area, while feral herd animals are displaying peculiar skin diseases. Even outside the so-called radioactive zone, some crops and livestock have been deemed unsafe for human consumption, while radioactive deep-sea fishes are being found in the food supply. As a result, there will be long-term, worldwide medical consequences to what the Japanese call 3/11.

I landed in the middle of this disaster purely by chance. There was

no real choice but to forget my itinerary and help. It was not bravery or bravado. All I did was put one foot in front of the other and help where I could. This year, I returned to Japan to complete my final clinical rotation before graduation—my rural selective. I wanted to further my understanding of the Japanese health care system, study the country's problems and successes with the rural and underserved, and return to the now highly restricted site of the nuclear disaster to assess what had, and had not, been done. I also wanted to again lend a hand if I could—and make a little peace with the starker memories I still carry.

## Gaining a New Perspective

As my arrival drew near, I grew apprehensive for a number of reasons. I was returning to places where

I witnessed heartbreaking destruction and loss of life. It's also daunting, but admittedly exciting, to tackle a language I do not speak well. It's also fatiguing to navigate the nuances of one of the most sophisticated cultures on the planet. Coming from Western culture that prides itself on individuality, I remember the cultural contrasts that became apparent from the very first idiom I ever learned in Japanese: "The nail that sticks out gets pounded down." I wondered if such a culture would be willing to disclose its problems. There are many claims by Western scientists that things are far worse than the Japanese authorities claim, but I assumed that asking pointed questions would not get frank answers from my Japanese hosts. How then would I get the information I wanted?

This time I crossed the country, studying the nuances of the health care structure. I started by observing the care of people on outer islands where it is cost-prohibitive to keep stroke centers, stock a tPA (tissue plasminogen activator), or maintain cath labs where there are few specialists, but where a growing elderly population needs both acute

and chronic care in all specialties. Japan's solution was an interesting combination of aggressive geriatric preventative medicine that included a well-coordinated system of communication with health care on the mainland as well as well-maintained fast-care helicopters.

Next, I worked at a health screening outpost for farming villages. This was an impressive and uniquely Japanese thing. They literally outfitted tour buses with EKGs, X-rays, CTs, complete medical labs, communication satellites, and every modern piece of medical and dental screening equipment one could imagine—but NO doctors. The buses are staffed by nurses, PAs, phlebotomists, lab techs, etc. Each village then makes a yearly appointment with the buses, sends out notices to the community, and everyone appears with medical records in hand at a prearranged field where the buses are parked for an annual health screening. It's a brilliant way to get health screenings to everyone on the larger islands of Japan.

On the other hand, some Japanese argue that not everyone needs such extensive screening and that the country is wasting a lot of money. In-

deed, the Japanese system is by and large free to the individual citizens, paid for by a substantial tax burden. There is a sliding-fee scale based on income, which means the wealthiest people pay at most 30 percent of their modestly and governmentally priced fixed medical care, while those at the lower end of the economic spectrum pay nothing out of pocket. Interestingly, the Japanese see their doctors on average four times more often than most of the developed world does.

### A Focus on Geriatrics

My next stop was a chronic care hospital for geriatric patients—a huge and growing percentage of the Japanese population. The Japanese take a very different approach to geriatrics than Americans do. On one hand, there is a tremendous respect for the elderly in Japan. The result is astonishing and wonderful as patients, and not insurance companies or doctors, are at the center of their health care model. I often saw nurses and various therapists literally running to get something for a patient. In fact, there was a tea ceremony room in the hospital, where staff

## Somber—and Amusing—Images from Japan



Geiger counter (right) tracks radiation levels



A grammatically challenged English translation



Piles of bagged radioactive dirt dot the landscape



members were periodically trained to perform the elaborate, quasi-Zen tea ceremonies in order to encourage calm, sustained, and profound attention to detail. Elderly patients were also encouraged to participate in the tea ceremonies as part of their occupational and physical rehabilitation.

Elderly patients with terminal illness are simply not kept alive by any means necessary. High-profile euthanasia is not tolerated either. Indeed, the terminally ill and extremely feeble are approached rather differently in Japan than anywhere I have seen, especially in the United States. Where the American system tends to keep people alive unless people specifically ask for a DNR (do not resuscitate) order that is witnessed and approved by a health care provider, the Japanese tend to use a much more conservative approach to care. The chronic-care facility where I worked never ran codes and fully expected people to pass away. And there was no separate hospice care facility, at least in that province. To my initial surprise, I saw more than one doctor firmly explain to families that aggressive life-sustaining measures were not in some patients' best interests.

On the other hand, those patients with any chance of benefiting from rehabilitation were quickly provided with well-staffed, caring physical therapy and placed in surroundings the Japanese believe encourage rehabilitation. In short, patients were well-fed, well cared for, well-kept, and entertained.

I also saw something that at first sounds inefficient but makes unbelievable sense and works perfectly in practice. Doctors literally wait for patients to arrive rather than making

patients make an appointment and wait for the doctor in a waiting or exam room. In the case of inpatients, there is always a doctor available for those that wish to be seen. In the case of office visits, it is understood that the doctor will be in the office during normal business hours, and that a patient may walk in at any time on a first-come, first-served basis.

### Disaster Zone Visit Proves Instructive

As for my visit to the disaster zone, I thought my return to survey the tsunami and earthquake damage was going to be a challenge.



**MAKING A DIFFERENCE:** Dr. Joshua Kretchmar

The region was now fenced off and patrolled, and only restricted access was allowed. My preceptor, however, also wanted to see the area, as did his friend—a former national health insurance administrator from the region. After significant wrangling, they had all our names placed on a government pass list, and several weeks later I found myself driving with my preceptor past multiple sites where radioactive dirt was bagged and piled up the lengths of football fields.

We then drove past checkpoints, where all our IDs were repeatedly checked. Finally, with Geiger counter in hand, we entered the restricted area around the nuclear reactor, followed by a car trip up and down the coast through the areas hardest hit by the tidal wave. We saw eerie ghost towns and pulled up to peer into a vacant 7-Eleven store, noting that the shelves were fully stocked while a relatively new car remained parked in a driveway.

With our Geiger counter slowing rising and showing low but still unacceptable levels of radiation for long-term habitants, we drove deeper into the restricted zone. Soon, we did see the radiation levels rise, particularly in areas where the air was more still, but it never reached severe levels. That is, it was never as high as the exposure one would get from a CT scan.

As for the tsunami damage, it was much better than I remembered—and yet was still beyond words. On the one hand, the Japanese have done amazing amounts of repair, rebuilding, and relocation when you consider the thousands of square hectares of damage these prefectures faced. They have now added large berms along as much of the coast as possible to act as wave breaks against future tsunamis. But that does not change the fact that a region famous for rice production was turned into a salt marsh, and that several kilometers inland one can still find large fishing boats sitting abandoned on their sides.

### Memorable Trip Elicits Profound Reflection

I wish I had some catchy anecdote or meaningful transition with which to round out this story. Of



course, my respect for the Japanese medical system grew in many ways as I witnessed the incredible preventative efforts, the patient-centered health care, the people's discipline, and the absolute generosity of a culture that spares no expense for the health of its population.

Contrary to my expectations, I received amazingly frank assessments from my Japanese hosts. In particular, I was amused by the overtures of young doctors sent by their hospitals on the mainland to *stand-in* for a day or two every week or at the island private clinics. After looking both ways to ensure their elders were not present, they asked me if they could answer any of my questions and sometimes would offer unsolicited information about differences

developed countries, is voluntary and up to each hospital, though he added most do try to comply.

The litigious nature of the American ego that focuses on *self* and *blame* is not a good thing in any capacity, but it does ensure the majority of physicians know the current standard of care, albeit for the wrong reasons. The Japanese system, with its tremendous respect of hierarchy and age, leads to physicians that dole out orders to patients that say, "Yes, doctor." No one asks if a treatment is the most modern or best one to do. It is taken as a given that the doctor knows best.

For all of that, I'd still rather be treated in Japan. Anyone needing and unable to get a same-day appointment in the United States will understand why. I don't need an

and use in his or her home, getting the certification required to use them in the office is often problematic and cost-prohibitive. Japan has no such issues. In the absence of costly and problematic regulations and complex reimbursement procedures, X-ray machines are common in most family practice/internal medicine-type offices, blood work is often done in-house, and patients get their diagnosis and treatment faster.

In 2011, I said the Japanese system was not perfect, just close. A slightly better grasp of the language and slightly closer look at the system reveals it is not as close to perfect as I wanted to believe. It is, however, still closer than most systems. And in every way I know how to assess, it remains one of the best in the world.

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**"...with Geiger counter in hand, we entered the restricted area around the nuclear reactor, followed by a car trip up and down the coast through the areas hardest hit by the tidal wave. We saw eerie ghost towns and pulled up to peer into a vacant 7-Eleven store, noting that the shelves were fully stocked while a relatively new car remained parked in a driveway."**

---

in rural versus mainland care. None of them believed the government assessment of the radiation damage, and public outcry has now forced the closing of about 50 nuclear facilities.

My respect for this system notwithstanding, I saw jaw-dropping disparities in individual physicians' choice of treatment modality. I asked younger physicians and hospital administrators about this. One administrator, not a physician himself, pointed out that upon receipt of their board certification, physicians have no requirement to pursue continuing education. He added that compliance with a set standard, such as the various quality-assurance programs one sees in most

appointment to see my doctor in Japan. Physicians go to their office in the morning, usually about 8:00, and stay there until 6:00 or 8:00 p.m. depending on the day. I never saw a patient wait very long to see a physician, although I did see many a doctor sitting at his desk, patiently waiting for patients.

All physicians in the United States at some point or another have encountered some regulation or reimbursement issue that stopped them from using a simple tool to arrive at a straightforward diagnosis and treatment. For example, even though a microscope is a relatively inexpensive and unregulated off-the-shelf purchase that anyone can have

That said, Japan is guaranteed to see more natural and manmade disasters. The country is situated on geological fault lines, has more than a few active volcanoes, has upward of tens of millions of people living along coastlines of island chains that will be hard-hit by global warming, and are at a nexus of international politics simply because they are off the coast of China, friends of Taiwan, off the coast of North Korea, and close friends with South Korea.

Whatever happens in the Pacific, Japan is in the middle of it, and its medical system will have to answer the call. If and when something catastrophic occurs, I will be there to assist in any way possible.



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 the Office of Alumni Affairs at **(954) 262-1029**.

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## OMED Alumni Reception in Seattle, Washington

*October 27, 2014 - Seattle Aquarium*





# Funding Updates...Puerto Rico Regional Campus...Dateline Health Honored

## HPD's Dateline Health Wins Telly Award



In June, the HPD's community service TV program **Dateline Health** was named a People's Telly Silver winner in the 35<sup>th</sup> Annual Telly Awards for its program entitled "Joint Preservation and Pain Management." **Dateline Health** is a 30-minute program dedicated to promoting the community's overall health and well-being that covers a wide range of contemporary health care issues through interviews with health care experts, researchers, and policymakers.

This was **Dateline Health's** fourth Telly Award, having received two in 2008 and another in 2012. The winning episode featured host Frederick Lippman, R.Ph., Ed.D., HPD chancellor (*pictured above*), interviewing physicians from Holy Cross Hospital in Fort Lauderdale on topics ranging from joint preservation and the harmful effects of opioids to new treatment options for mitigating pain.

The Telly Awards were founded in 1979 and is the premier award honoring outstanding local, regional, and cable TV commercials and programs, the finest video and film productions, and online commercials, video, and films. Winners represent the best work of the most respected advertising agencies, production companies, television stations, cable operators, and corporate video departments worldwide. This year, nearly 12,000 entries were received from all 50 states and numerous countries.

## NSU Receives \$2.85 Million Grant from U.S. Department of Education

NSU was awarded a \$2.85 million Post-Baccalaureate Opportunities for Hispanic Americans grant from the U.S. Department of Education's Title V program. The grant, led by NSU's Gregory Simco, Ph.D., and Meline Kevorkian, Ed.D., who serve as co-administrators of the grant, will be used to expand post-baccalaureate educational opportunities and post-baccalaureate academic offerings for Hispanic college students and students from ethnically diverse populations who are attending institutions of higher education.

As our technology-driven society becomes increasingly complex, an advanced degree has become an expectation for many competitive and financially rewarding computer science positions. When compared to overall population diversity, however, the number and proportion of Hispanics/Latinos seeking and earning graduate degrees, especially in fields related to the computer sciences, remains sorely lacking.

Because NSU serves as an Hispanic-Serving Institution (HSI) as defined by the U.S. Department of Education, the grant will allow Hispanic and Latino students at NSU—as well as students from other underrepresented populations—to benefit from sustainable changes to curriculum content and instructional approaches. Students will also benefit from an expanded support model that identifies and effectively addresses student needs upon admission through graduation.

The U.S. Department of Education's Title V program provides grants to assist HSIs to expand educational opportunities for, and im-





# NSU OVERVIEW

prove the attainment of, Hispanic students. These grants also enable HSIs to expand and enhance their academic offerings, program quality, and institutional stability.

## College of Optometry Receives Major Grant From National Eye Institute



The National Eye Institute of the National Institutes of Health has awarded approximately \$556,532 to investigators at NSU's College of Optometry to study the relationship between the vision condition, convergence insufficiency, and reading performance and attention. Convergence insufficiency is a common vision disorder in which the eyes turn slightly outward when a person is reading or doing work close to his or her eyes.

The grant will fund the Convergence Insufficiency Treatment Trial—Attention and Reading Trial, which is a national, multicenter clinical trial that involves optometry, ophthalmology, psychiatry, and education in determining how this eye-teaming problem impacts a child's attention and reading performance. NSU is one of seven clinical sites participating across the United States.

## NSU Opens Regional Campus in Puerto Rico



NSU reconfirmed its commitment to Puerto Rico with the grand opening of a new regional campus in San Juan, which represents an expansion of its educational offerings and also provides increased opportunities for students university-wide.

A ribbon-cutting ceremony was held at the campus on August 28 to celebrate the opening of a new four-story, state-of-the-art building that will be offering master's and doctoral degrees in pharmacy and education at the campus located in San Juan's Professional Offices Park IV. It is estimated that the regional campus will have a \$27 million economic impact on the island this fiscal year.



Pictured (from left) are: Winel Segarra, NSU College of Pharmacy student; Andrés Malavé, Ph.D., executive director of NSU's Puerto Rico Regional Campus in San Juan; George L. Hanbury II, Ph.D., NSU president and CEO; Jacqueline Travisano, M.B.A., CPA, NSU executive vice president and chief operating officer; and Alexis-Morales-Fresse, NSU Abraham S. Fischler School of Education student.





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## Collaboration Is the Key to Interprofessional Education



NSU sent an interprofessional team of leaders from multiple programs to the Interprofessional Education Collaborative (IPEC) Interprofessional Education: Building a Framework for Collaboration Institute, which was held October 1-3 in Herndon, Virginia.

**Dr. Kamilah Thomas-Purcell**, director of interprofessional primary care education at NSU-COM's Center for Interprofessional Education and Practice, was the team

leader for the IPE Sharks team. NSU attendees included **Dr. Anthony J. Silvagni, D.N.P., A.R.N.P.**, associate dean of academic affairs at the College of Nursing, **Karen Grosby, Ed.D.**, dean of the Center for Psychological Studies, and **Terry Morrow Nelson, Ph.D.**, assistant dean of student affairs at the College of Health Care Sciences.

At the conference's conclusion, the team created an action report to develop and sustain interprofessional education and practice at NSU. The action plan will be launched in 2015. *Pictured are Dr. Karen Grosby, Dr. Anthony J. Silvagni, Dr. Kamilah B. Thomas-Purcell, Dr. Terry Morrow Nelson, and Dr. Barbara Barrett.*

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