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APRIL 2000

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PLE - NOT JUST SYMPTOMS

VOLUME I, NUMBER 2

A Candid Conversation with Dean Silvagni

By Scott Colton Director of Education Communications

ragedy can often be a double-edged sword. For some, a calamitous event sends them into a tailspin from which they never fully recover. For others, what at first seems like a cruel twist of fate eventually leads to a totally unexpected rebirth.

During one fateful afternoon in 1974, Dr. Anthony J. Silvagni experienced one of those life-altering occurrences while skiing down a snowpacked Vermont mountain. In one frightful instant, a friendly amateur downhill competition turned fearsome as Dr. Silvagni skidded off the slippery slope and confronted every skier's worst nightmare: a crippling fall.

Although he was fortunate to avoid any career threatening impairment, the damage to his upper body was extensive. The overall diagnosis included a hairline fracture of the cervical spine, massive tissue damage in the shoulder and back, diminished nerve conduction, and worst of all, extensive injury to his dominant left arm.

Over the next few years, Dr. Silvagni underwent a series of treatments that ran the gamut from medications and injections to sports medicine and neurosurgery. Still, no amount of medical intervention could ease the incessant pain that made even the simplest of daily tasks difficult. Although he continued to pursue his pharmacy career by working as associate director of clinical pharmacy at Peter Bent Brigham Hospital and as chairman of the Department of Clinical Practice at Massachusetts College of Pharmacy in Boston, Massachusetts, chronic pain defined his every movement.





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ITEWS BRIEFS

Kenneth Johnson, D.O., who serves as assistant professor in the Department of Obstetrics and Gynecology at NSU-COM, was recently elevated to the position of vice chief of obstetrics and gynecology at the North Broward Hospital District.

In March, Morton Morris, D.O., J.D., who serves as vice chancellor and deputy provost of the Health Professions Divison, was presented with a Lifetime Achievement Award from the Florida Osteopathic Medical Association (FOMA). The award reads as follows: "In recognition and appreciation of your involvement as past president of the FOMA, and your leadership, service, dedication, and compassion to your students, patients, profession, and the Florida Osteopathic Medical Association."

Mark Sandhouse, D.O., assistant professor in the Division of Osteopathic Manipulative Medicine, served as a presenter at two recent events. On the weekend of February 26-27, Dr. Sandhouse participated in the 80th Florida Academy of Family Physicians (FAFP) Weekend, where he coordinated a manipulation workshop. He also served as a presenter at "Evening with the Stars" at the American Academy of Osteopathy (AAO) annual convocation March 22-26.

A. Alvin Greber, D.O., professor and chair of the Department of General Internal Medicine, was a featured presenter at two recent educational forums. In February, Dr. Greber was a speaker at University of Miami School of Medicine's Teaching Conference in Clinical Cardiology. In April, he spoke at the Blake Medical Center in Longboat Key, Florida, where he addressed the issue of Management of CHF in the New Millennium.

Alan Morrison, D.O., assistant professor in the Department of General Internal Medicine, recently served as a speaker at three Broward County sites. On March 21, he addressed the Kiwanis Club of Hollywood on the topic "Internal Medicine and You." On March 22, he visited the Hallandale Cultural Center, where he spoke to the Brandeis University Women's Committee on the subject "Internal Medicine and Preventative Health Care." On April 2, Dr. Morrison visited the Meyerhoff Senior Center in Hollywood, where he presented an informative lecture on the "Warning Signs of Heart Attack" to the Jewish War Veterans.

John Crescitelli, D.O., a 1996 NSU-COM graduate who is in the process of completing his family practice residency at Broward General Medical Center, was named the winner of the Intern/Resident Medical Writing Award from the American College of Osteopathic Family Physicians (ACOFP). Dr. Crescitelli received a recognition plaque during the ACOFP Convention, held March 26-31 at Bally's Hotel in Las Vegas.

On March 10, NSU-COM coordinated its annual Hospital Day, which affords first, second, and third-year students an opportunity to meet with representatives from various hospitals throughout the United States regarding future rotation, internship, and residency possibilities. Over 300 students attended Hospital Day, which attracted 95 representatives from 32 U.S. hospitals. Clinical Education Director Elaine Lefkowitz (third from left), who received able clerical support from Katy Twist and Barbara Wenderoth, coordinated the event.



The 5th annual NSU-COM student convention entitled Kaleidoscope 2000: Medicine in the New Millennium was held at the Hilton Hotel in Sunrise, Florida, on March 8.

A variety of enlightening discussions were conducted by a range of respected medical professionals, who discussed trends and issues facing physicians in the 21st century. Topics addressed were: "Growing Old in the 21st Century" by Charlotte Paolini, D.O.; "Current Issues in Women's Health" by Kenneth Johnson, D.O.; "Recognizing Eating Disorders" by Alan Morrison, D.O.; "Medical Technology in the New Millennium" by Emmet Kenney, M.D.; and "Medicine in the New Millennium" by William Anderson, D.O.

Parkstone, Wyeth-Ayerst Pharmaceuticals, and Jones Pharmaceuticals Inc. graciously sponsored Kaleidoscope 2000. NSU-COM is pleased to welcome two new faculty members to the osteopathic team. Effective February 1, Jean M. Malecki, M.D., came on board as chair of the Department of Preventive Medicine. Dr. Malecki, who currently serves as director of the Palm Beach County Health Department, received her American Board of Preventive Medicine certification in 1987. She received her M.D. degree from New York Medical College in 1979 and her M.P.H. from the University of Miami School of Medicine in 1985. Dr. Malecki served her internship at St. Vincent's Medical

Center in New York and completed her residency in preventive medicine/public health at the Palm Beach County Health Department.

Robert Trenschel, D.O.



Jean M. Malecki, M.D.

The other faculty addition is Robert Trenschel, D.O., who has been tapped to serve as program director of the new Osteopathic Preventive Medicine and Public Health Residency Training Program. In conjunction with his responsibilities at NSU-COM, Dr. Trenschel also serves as medical

> director of the Palm Beach County Health Care District and Healthy Palm Beaches, Inc. He earned his D.O. degree from NSU-COM in 1989 and received his M.P.H. from Florida International University in 1998. From 1990-93, Dr. Trenschel was in private practice in Tavenier, Florida.

Continued from page 1 - A Candid Conversation with Dean Silvagni

Eventually, as nerve conduction in his left arm worsened and atrophy set in, even the act of gripping a steering wheel became a complicated chore. Fortunately, a timely relocation to Arizona in 1976 with his wife, Dianna, would provide Dr. Silvagni with a successful treatment for his pervasive pain - and a permanent detour into the wondrous world of osteopathic medicine.

When Dr. Silvagni accepted a position as clinical pharmacist at the University of Arizona Medical Center, not even he could have foreseen how that decision would dramatically transform both his health and career. Within a year of joining forces with the University of Arizona, Dr. Silvagni was assigned to develop clinical research projects and supervise the teaching of medical nursing and pharmacy students at Tucson General, an osteopathic teaching hospital.

During this time, he struck up a fortuitous friendship with Dr. Chris Hilling, a D.O. who was affiliated with the hospital. After hearing Dr. Silvagni discuss the cavalcade of unsuccessful treatments that had been administered to strengthen his arm and alleviate the pain, his associate proposed a noninvasive form of therapy called Osteopathic Manipulative Medicine (OMM).

Figuring he had nothing to lose and everything to gain, Dr. Silvagni agreed to undergo OMM treatment. Incredibly, within just two months, his pain had diminished considerably. Within four months, all his previously irregular nerve conduction studies were coming back normal. Having endured persistent pain for almost four years, the compassionate healing process he had witnessed firsthand inspired Dr. Silvagni, then 37, to pursue a career in osteopathic medicine.

"I never had a burning desire to be a physician," he admitted. "But my exposure to the osteopathic discipline really impressed me. Watching this holistic approach to the patient seemed to really fit in so much with what I believed health care should be. I had never seen this people-oriented philosophical approach to medicine being practiced in a group setting before."

Although he had invested almost two decades in the pharmacy field, Dr. Silvagni -- with his wife's blessing -- chose to follow his heart and totally revamp his life. After passing the MCAT's and gaining acceptance into the Philadelphia College of Osteopathic Medicine, Dr. Silvagni packed up a Ryder truck and made the cross-country trek to launch the next phase of his medical career.

Since earning his D.O. degree in 1982, Dr. Silvagni has become a true



The talented and dedicated members who comprise the Dean's Office are (clockwise from left): Lawrence Jacobson, D.O., associate dean for medical education: Debi Carey, secretary; Dean Anthony J. Silvagni, D.O.; Val Butler, program specialist and faculty credentialing; Annette Clarke, secretary; Johneta Goodwin, executive assistant to the dean; Dominique Esposito, assistant to the dean; and Iris Berman, receptionist.

leader in the osteopathic field. His passion for the profession has led him on a fulfilling journey that included a five-year stint in solo family practice as well as administrative appointments at the University of Osteopathic Medicine and Health Sciences in Des Moines, Iowa, and the University of Health Sciences College of Osteopathic Medicine in Kansas City, Missouri.

In July 1998, Dr. Silvagni was recruited from Kansas City to come on board as dean of Nova Southeastern University's College of Osteopathic Medicine. During the ensuing two years, his visionary approach has resulted in the creation of innumerable programs and the expansion of existing areas like geriatrics, rural medicine, and small-group teaching.

So what was the major enticement that convinced him to join the NSU-COM team? Although the weather is certainly balmier in South Florida than it is in Kansas City, the real selling point, admitted Dr. Silvagni, was the school's adherence to an interdisciplinary form of education. "I really believe a physician needs to be educated in an environment with other health professionals because I don't think an individual should be indoctrinated to think he can take care of someone alone. It has to be a team approach. What you need are people with different skills coming in and then meeting an objective. In addition, the administration here had been extremely progressive and visionary in its career -- and that's how I am.

"I've been absolutely thrilled to be here because I see what the university is doing internationally as well as nationally, and the things that they're not afraid of," he added. "I have seen so many academic centers always trying to keep programs enclosed rather than seeing what else they can do to be innovative without losing control of quality. At NSU, I am able to be creative while maintaining accountability and staying fiscally responsible." Once he took over the administrative reins, Dr. Silvagni assessed the college's overall operation and began formulating a strategic plan that would boldly lead the institution into the 21st century. "There were several areas that I thought were going very well, and I wanted to make sure that whatever we did, we didn't lose sight of those things. They were the rural medicine program, the emphasis on geriatrics, the Area Health Education Centers (AHEC) program, the beginning of small-group teaching, and the interdisciplinary philosophy.

"In geriatrics, we have strengthened the department by hiring Dr. Charlotte Paolini, placing additional assets into the program, and giving it a higher priority by coordinating events like the End of Life Seminar. We will probably have a fellowship by this July in that area, which means we will be providing a way for physicians to get certified in geriatrics. We also strengthened the rural medicine program by hiring a full-time director and making a stronger affiliation within our communities. We're now going though an evaluation of how we deliver that material and how we can improve it."

The implementation of clinical correlations and problem-based learning in regard to small-group teaching are other advancements that Dr. Silvagni has pushed for during his two-year tenure as dean. "We have gone to some computerized programs, which create a better depth of ability. To me, it's a critical part of learning because when you are taught in the didactic or lecture way, everything is presented from the disease and symptom perspective. You learn that these are the signs, these are the tests, these are the treatments, these are the surgical procedures, etc. But when you see a patient, the patient comes in with a symptom, not with the disease, and you have to approach the patient from the opposite way you were taught. By doing small groups and allowing students to do significant self-learning during the process, with or without computer-assisted instruction (CAI), the students learn osteopathic medicine as they will practice, and the faculty member serves as more of a facilitator than a presenter."

One existing program that required no tweaking was AHEC, which has been widely recognized and highly respected as an important force in health professions training and service statewide and nationally since it was established at NSU in 1985. "The AHEC program at NSU's College of Osteopathic Medicine and the Health Professions Division has provided many services in the counties for which it is responsible," explained Dr. Silvagni. "Through its assistance in the College of Osteopathic Medicine, the program has helped provide the knowledge that has driven some of our graduates to choose careers in rural medicine. In Florida, we have a unique system with AHEC. Each of the four medical schools (NSU, University of Miami, University of Florida, and the University of South Florida) has an AHEC, and jointly they form the Florida AHEC Network."

This productive partnership received national recognition in 1997 when it earned the Eugene S. Mayer Award for "Most Outstanding AHEC Program" in the nation. "AHEC is an integral part of our education and training of all health professionals at NSU-COM, along with its other responsibilities to the community in medically underserved areas," he explained. "I was part of the administrative team that formed the first community-based AHEC in the United States in the Great Lakes area in 1971. Because of that experience, I have always had a great respect for the value of an AHEC in improving health care delivery and health care education."

In addition to augmenting several existing areas, Dr. Silvagni has widened the college's scope by incorporating vital new programs and recruiting talented faculty and staff to run them. Over the past two years, NSU-COM has branched into areas such as preventive medicine and research while also placing a greater emphasis on key topics like internal/external communications and alumni relations.

In terms of research, the college made significant strides by forming the Division of Education, Planning, and Research in 1999. "Most osteopathic schools don't have a lot of interest in research. We do," stressed Dr. Silvagni. "No one is telling us what we can or can't do. There is no limit. We're doing curriculum research as well as clinical research. And we're looking at getting into complementary medical research, which is nutracueticals, acupuncture - all those things that used to be considered alternative medicine. We've also submitted several Health Resources and Services Administration (HRSA) and Robert Wood Johnson grant proposals."

Although NSU-COM continues to expand its programming base, Dr. Silvagni is quick to stress that providing students with a well-rounded, first-rate education remains the college's number one objective. "Osteopathic medicine built itself on education as its number one priority. And I agree with that philosophy. Students today deserve the very best of the teachers, and from that perspective, teaching should always be the number one priority of any academic institution. But, can you be a good teacher if you're not doing innovative things? Can you be a good teacher as a physician if you're not seeing patients? Can you be a good teacher if you're not involved with meetings and organizations and are not aware of what's going on? Teaching remains number one, but you need other activities like research because they generate pride and help answer questions to improve health care."

While it's clear the college's future looks bright, Dr. Silvagni also acknowledges that issues such as the rising cost of medical education and providing cutting-edge education are significant challenges that all medical teaching institutions must contend with. To address these concerns, NSU-COM is investigating an array of cost-cutting solutions. "There are several ways as we go to a more electronic world that we can control costs," he explained. "The goal is to have a greater effect on directing the learning in a less expensive way without sacrificing the role of the teachers or the accountability of our students. Distance learning is a perfect example. In other words, we can have one professor here conduct an electronic lecture for all of our residencies at 11 hospitals instead of having to go to each one individually.

"For our third-year students, we can do programs that allow us to

continue providing faculty-guided instruction even while the students are on rotations, without having to think of a way to bring them back or send the faculty out to each site. The constant awareness of our fiscal responsibility allows NSU-COM to have the least expensive in-state tuition and be below the median of all private osteopathic medical schools."

Dr. Silvagni also is hopeful the establishment of an alumni endowment fund will eventually provide a steady revenue source, which can be used to offset the rising financial burden on students. "It will take a long time, but you have to have great vision. If we can build this fund large enough, it could help offset a significant percentage of each student's annual tuition."

Another challenge facing the college involves providing the students with a diverse yet comprehensive education that prepares them to work in a health care delivery system that is in a constant state of flux. "There is a desire to increase clinical education, but the true strength of a physician lies upon his or her foundation of science," stressed Dr. Silvagni. "And in this time of greater technology, I think it's inappropriate to look at ways to increase clinical time and reduce learning time in the biomedical sciences. I think one of the challenges is to find the balance of appropriate science foundation, coupled with clinical application, to feel confident and move forward. Our program gives our students patient contact within 45 days after matriculation.

"I think most of us feel that there's some kind of a balance where you don't just have this emphasis of two years of lecture and two years of clinical, but a greater interspersing of both so you are going back and forth through the entire four years. Obviously, that creates all kinds of challenges in logistics, particularly when you have a multi-training campus as we do, and also in preparing people for boards, which are based on the more traditional models."

When he discusses the College of Osteopathic Medicine, Dr. Silvagni does so with a great deal of pride and reverence. His infectious enthusiasm makes it clear that building a bridge to the future is a task he clearly relishes. "When I do recruiting for the college, I do it with a lot of vigor and energy because I really believe in where we are, and I really believe in the people that are here. There is a building energy, and there is a rich history that our college was built upon.

"We are right in the middle of the most significant roles of medicine within primary care. Geriatrics -- medically underserved -- the cutting edge of teaching, nutrition, preventive medicine, end of life -- these are the kind of programs that are going on here. It started as a spark, and that spark has grown into a fire. I can see the change. My biggest thrill in coming in every day is that each day, I feel we have taken another step toward bringing all these programs to fruition." Given the evolving breadth and depth of NSU-COM activities, it would be impossible to do justice to all the college's essential programs in the space allotted. In the following excerpts, Dr. Silvagni shares his thoughts concerning other newsworthy developments impacting the college.

PREVENTIVE MEDICINE

To me, preventive medicine represents many of the principles of osteopathic medicine. And it was one area where we had not begun to expand. We now have two faculty members, and we are about to start a residency in preventive medicine that will go hand in hand with the Master of Public Health program that has been in place. However, we've strengthened that area enough to look at the potential for the Health Professions Division to create a School of Public Health in the near future. It's a goal. Whether it's achieved or not is uncertain at this time, but we've certainly strengthened our public health program, coupled now with a strong preventive medicine program. And the good news is that it's the first preventive medicine residency in osteopathic medicine.

GRADUATE MEDICAL EDUCATION

We have put together an independent organization of a consortium for education. We were able to get a sizable grant through Nova Southeastern University to provide compressed video equipment in each of our teaching sites. Most of those are installed now. We have already had one program in which we've used the equipment, and I envision significant teaching and interaction between our consortia institutions. In a time of increased fiscal difficulty for graduate medical education, we have been able to increase our residency programs, which has been very significant for the school. However, while we're being successful right now by increasing our residencies at a time when people are losing them, that's winning the battle, not the war. The future of graduate medical education is in a serious state of challenge. But challenge creates opportunity.

INTERNATIONAL MEDICINE

We are in a campus that is world renowned for its distance learning and its international teaching. Unfortunately, as a college, we are least prepared for that because we are an American profession. Legislatively, osteopathic medicine, as defined by the AOA, is only recognized in the United States. There are a couple of providences in Canada that recognize American osteopathic medicine, and there are countries where on an individual basis you can appeal and request recognition as a physician. But there is no country other than the United States that legislatively recognizes a graduate of an AOA accredited college of osteopathic medicine. In today's world, I see that as a serious problem. Over the next year or two, we have several locations, including the Dominican Republic, which may recognize osteopathic medicine outside the United States as defined by the AOA. On a positive note, the Pan American Health Organization (PAHO) has a mutual agreement with the 17 Caribbean countries that physicians recognized in one country get reciprocity to the other countries.

communications and relationship with the alumni

Because we have developed so many important programs, getting the word out to the university and the community about the work we've been doing became a prime consideration. So we created a section on education communications. We have also placed a greater emphasis on our alumni relations. We are trying to utilize our alumni to help guide us even more in understanding our past and improving our future.

increased assessment and accountability of students

We did implement a rule requiring level 1 and level 2 of the national boards to graduate. We have implemented a written exam after each core rotation, and we are looking at other assessment tools to further assure the quality of education that we give our students in both pre-clinical and clinical education.

GUATEMALA

MISSION ENRICHES, ENLIGHTENS PARTICIPANTS

By Scott Colton Director of Education Communications



Medical Mission 2000 to Guatemala proved to be an enriching experience for the participants, who took pride in attending to the health care needs of over 800 Mayan villagers.

If you asked the average person if he cared to spend a week living in primitive conditions in a remote region of Guatemala, chances are the query wouldn't evoke a very cheerful response. Pose the same question to a group of medical students and healthcare professionals, however, and you elicit a decidedly more optimistic reply.

On January 14, an enthusiastic contingent comprising 15 Florida-based health care specialists, 20 NSU-COM students, and 4 community volunteers departed from Miami International Airport to participate in the Medical Mission 2000 to Guatemala. The humanitarian effort was a symbiotic partnership between NSU-COM and DOCARE International, a volunteer-driven medical outreach organization that strives to bring vital health care services to isolated people in remote areas of Latin America.

SETTING THE WHEELS IN MOTION

Camille Bentley, D.O., who serves as interim chair of NSU-COM's Department of Family Medicine, worked tirelessly to make the medical labor of love become a reality. So once the project received the green light, she and the other mission participants set out to devise a comprehensive strategic plan that would ensure both the safety of the participants and the success of the medical excursion.

Before the mission members even stepped onto the plane, they spent innumerable hours memorizing medical Spanish terminology, discussing the range of aliments they would possibly encounter, learning various facets of Guatemalan culture, and obtaining the proper travel documents and immunizations. That fastidious attention to detail also was in evidence when it came time to collect, inventory, and package the 45 boxes of medical supplies that would be used once they reached their destination.

Fundraising was yet another pivotal factor that had to be addressed by Dr. Bentley and the medical team members. To offset some of the overall expenses, a fundraising subcommittee was organized to solicit both monetary support and assorted medical and non-medical supplies from the corporate and pharmaceutical communities. Thanks to the marketing efforts of Dr. Paula Anderson-Worts, Dr. Elisa Ginter, and Dr. Kerry Earlywine, a number of organizations were brought on board as corporate sponsors. They included:

- American Airlines, which graciously provided a 50 percent airfare reduction for the 39 Guatemala-bound travelers.
- Schering/Key Pharmaceuticals, which made a cash contribution of \$500.
- Smithkline Beecham, which generously provided free Hepatitis A inoculations to the participating students and health care professionals.
- Wal-Mart and Bayer Pharmaceuticals, which donated \$500 each in medical and non-medical supplies.

Because the mission was volunteer-based, all 39 participants were required to pay their own travel and lodging expenses. Not surprisingly, even though the trip placed a financial burden on some of the medical students, the decision to sign on was an easy one. "Part of the reason why I wanted to become a doctor in the first place was I was an ecology major doing environmental studies in Latin America, and I noticed the tremendous need for doctors down there," said Jana Gordon, a second-year medical student who serves as co-president of the NSU-COM chapter of DOCARE. "And more than anything, that's how you help people, by making a difference with their health."

DESTIMATION: GUATEMALA!

A DESCRIPTION OF

Once the medical team members touched down in Guatemala, they were surprised to learn that instead of setting up camp in the actual villages, they were going to be staying at a facility in Lake Atitlan, which was located approximately one hour by boat from their clinical destinations. It was to be the first of many unexpected occurrences.

"As a group, we really rolled with the punches," said Earle Hayes, a second-year medical student who also serves as

co-president of the NSU-COM chapter of DOCARE. "Dr. Bentley kept an extremely even keel throughout the whole trip. We kept getting thrown these curves, and since this was our first time going down there, we really didn't know what to expect."

As they were about to step off the boat on their initial visit to the villages of Santa Caterina and San Antonio, a combined sense of anticipation and trepidation swept through the

students, who had never treated an actual patient at this stage in their educational development. To allay their anxiety, Dr. Bentley reminded them of one important fact: During their stay in Guatemala, the students and health care professionals would all be referred to as "doctors." In this environment, parity was essential and all the participants were to be considered equals.

Over the next four days, in what amounted to a crash course in rural medicinal care, over 800 patients were examined and/or diagnosed with various maladies. To facilitate the examination process, the medical professionals were paired into teams -- with the proviso that at least one member of the squad be conversant in Spanish. Because the villagers primarily spoke Cakchiquel, a Mayan language, any Spanish-speaking natives were asked to assist as translators whenever possible. In some instances, the doctors even resorted to drawing pictures or engaging in rudimentary sign language to communicate with the patients.

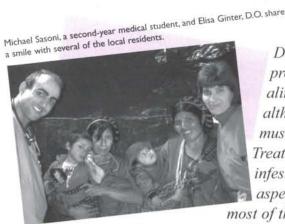
Despite the inherent cultural differences and language barriers that existed between the villagers and health care professionals, the interaction process proved to be extraordinarily reciprocal. "I was really surprised by the interaction we had with the people, the way they were so receptive to us and their graciousness and thankfulness for our being there," commented

Hayes, who had previously visited Guatemala City and was predisposed to the rampant poverty that existed in the region. "They were just so pleasant to work with. The doctors were all commenting on how calm the children were. For such an impoverished people, they seemed so happy."



Camille Bentley, D.O. focuses her attention on one of the many children who were examined and treated during the medical mission.

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During the comprehensive examination process, the most commonly diagnosed aliments were parasitic in nature. although dehydration, malnutrition, and muscle pain were frequently detected. Treating the assorted infections and infestations, however, was just one crucial aspect of the mission. "Although we treated most of the medical conditions that we saw, we

also discussed preventive type things they could incorporate into their lives," said Haves. "We talked to them about ways they could prevent re-infestation of parasites and taught them proper sanitation and hygiene techniques."

Not surprisingly, after they overcame their initial jitters, the medical students proved to be eager diagnosticians. "Some of these students had never seen lice before. They didn't know what a nit looked like," said Dr. Bentley. "The parasitic infections that we diagnosed were all done with microscopic slides. We didn't just treat across the board and say, 'Well, you've got diarrhea, so we're going to treat you for this.' We actually had the microbiologist make slides from the stool samples. And I tell you, I never saw such an energetic group trying to get stool samples. They would run over to the microscope and go 'wow.""

Unfortunately, not all the aliments were as easily treatable as dehydration or parasites. In fact, some of the Mayan Indians were afflicted with potentially lifethreatening disorders. "I was actually lucky from a medical student standpoint," admitted Gordon. "I had one patient I diagnosed with diabetes who had very high blood sugar and had a lot of glucose in her urine. She was going to the bathroom six and seven times a night and the disease had advanced pretty far. Luckily, we had brought enough medication so we could provide her a six-month supply until we could get follow-up care for her."

Coordinating that follow-up care would prove to be a daunting challenge, mainly because the nearest medical facility was located approximately two hours away by boat or land transport. Fortunately, there was a devoted individual named Father Gregory who was on hand to organize any vital continuing care efforts once the medical team departed.

However, in order to assure the long-term success of the medical mission, Dr. Bentley is aware that return visits are a definite priority. "We need to return to these places on a regular basis to ensure continuity of care. Ideally, if we can go twice a year and



In March, a group of individuals who participated in Medical Mission 2000 to Guatemala coordinated an insightful two-hour presentation for various faculty and personnel from the College of Osteopathic Medicine and the Health Professions Division. The mission participants shared their experiences with the attentive audience via a slide presentation narrated by both students and provide medications for their parasitic infections, that will faculty members.

help keep the infections under control and allow for proper development and growth." At the present time, Dr. Bentley is eyeing a return visit in June 2000 or sometime in January 2001. A potential mission to Haiti also is in the talking stages.

post-mission reflections provide eye-opening insights

Despite an occasional bout with homesickness, Medical Mission 2000 to Guatemala proved to be a life-altering event for the health care professionals who donated their time and talent to the humanitarian effort. One particularly memorable incident encapsulated the experience for Hayes, who seemed visibly enriched for having participated in the Guatemala excursion. "There was an interesting comment from the man who invited us to Guatemala. He said, 'You're giving these people a sense of self-esteem because they know you spent your own money and have taken the time away from your families and time away from school to be there to help them. Don't ever forget what you've provided for these people.'"

Working grueling 18-hour days in a foreign land is not always conducive to fostering a true sense of camaraderie, but in this case, that's exactly what occurred. "Everyone worked so well together" marveled Dr. Bentley. "I was amazed at how everybody pulled together and worked really hard physically. I didn't sleep well the first two nights we were there because I was stressed and anxious and not knowing what to expect. After the second night, I slept like a log."

For second-year student Gordon, the trip provided her with a renewed love for the practice of medicine. "It was such an incredible life lesson. It was absolutely unforgettable. You know you absolutely helped."

Medical Mission 2000 Participants

Health Care Providers

Dr. Paula Anderson-Worts - Family Medicine Dr. Camille Bentley - Family Medicine Dr. Craig Depodesta - Family Medicine Dr. Lisa DeWitt - Emergency Medicine Dr. Kerry Earlywine - Pharmacist Dr. Elisa Ginter - Family Medicine Dr. Daniel Kesden - Internal Medicine Dr. Don McCandless - Pharmacist Dr. Edward Schwartz - Family Medicine Dr. Josefina Sidiq - Obstetrics and Gynecology Heidi Smith - Registered Nurse Dr. Scott Smith - Emergency Medicine Dr. Joel Spalter - Infectious Disease and Internal Medicine Joyce Tjhio - Microbiologist Dr. Angela Wall - Family Medicine

NSU-COM Students

Julie Barone Jeffrey Bushnell Scott Buckel Kelly Dyess Bradley Eisenberg Lianne Fernandez Ilya Fonarov Victoria Garcia Adam Getzels Jana Gordon Earle Hayes Daniel Lehnhoff Robert Levine Lily Limsuvanrot Daane Logsden Todd Mangione Jeff Richard Michael Sasoni Nazia Sidiq Claudine Tjhio

Community Volunteers

Jessica Brown Lashonda Linton Farida Sidiq Scott Smith

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AOA President Visits NSU-COM

In January, first and second-year medical students were treated to a one-hour lecture/question-andanswer session with Eugene Oliveri, D.O., who serves as the current president of the American Osteopathic Association (AOA).

During his address, Dr. Oliveri touched on a number of topics, including the current and future state of the osteopathic profession. "Students are the future of our profession," said Dr. Oliveri, who informed the attendees that the osteopathic discipline was the fastest-growing health professional group in the United States.

Although D.O.'s comprise only 5.5 percent of the existing physician population, Dr. Oliveri presented numerous statistical data that supported the growing acceptance of the osteopathic profession throughout the country.

In 1964, only 5 osteopathic colleges were in existence; in 2000, the number has quadrupled to 19. Dr. Oliveri also revealed an interesting trivia tidbit when he divulged that the medical advisor to ER - the top-rated drama on television - is a D.O.

In addition to presenting the positive growth aspects of the osteopathic profession, Dr. Oliveri discussed some of the challenges facing the next wave of students who will be entering the vocation. Since 1965, the U.S. government has subsidized graduate medical education; however, there is a movement afloat to end this practice, which would impose an even greater financial burden on D.O.'s entering the work force.

Another imperative issue addressed by Dr. Oliveri was the continued mission of the AOA to establish additional D.O. residency slots in graduate medical education.

Despite the inherent obstacles, Dr. Oliveri stressed that steps were being taken to showcase the osteopathic profession more frequently and increase awareness among the general public regarding osteopathic medicine.

According to a study commissioned by the AOA, only 10 percent of the U.S. population knows what a D.O. is, and only 8 percent are aware that D.O.'s are licensed to practice medicine.

To address this concern, the AOA recently hired a public relations firm to promote osteopathic medicine and established a unity campaign, where the first order of business was the creation of a usable and universal definition of osteopathic medicine.

Consortium Enhances Graduate Opportunities

The Consortium for Excellence in Medical Education (CEME) was established by NSU-COM in January 1999 to increase opportunities for postgraduate medical training, internships, residencies, fellowships, and continuing education. The CEME serves as an alliance of affiliated clinical sites that will be linked through electronic networks and a shared commitment to excellence in the education of tomorrow's physicians.

The consortium's long-range goal is to create a unified medical education system, which initially comprises 11 Florida-based teaching hospitals and hospital systems, ambulatory centers, public health units, county health departments, and social service agencies.

By creating "the medical classroom of the future," the consortium will assist new physicians in their quest to become highly skilled and compassionate doctors who are capable of providing first-rate medical care and are cognizant of the latest clinical techniques and treatment procedures. The current list of CEME affiliated hospitals comprises Columbia Hospital West Palm Beach, Florida Hospital -East Orlando, Memorial Hospital - Peninsula, Miami Children's Hospital, Miami Heart Institute and Medical Center, Mount Sinai Medical Center of Florida, North Broward Hospital District, Palmetto General Hospital, Sun Coast Hospital, University Community Hospital - Carrollwood, and Westchester General Hospital.

The consortium meets four times a year to discuss a range of issues. Pictured are some of the dedicated individuals who are helping to shape the future of graduate medical education.



Glenn Bigsby, D.O., Florida Hospital - East Orlando; and NSU-COM faculty members Robert Trenschel, D.O.; Jean Malecki, M.D.; James Howell, M.D., M.P.H.; and Joseph Stasio, D.O.



Johneta Goodwin, NSU-COM; Ken Kniaz, M.H.A., Sun Coast Hospital; and Lawrence Jacobson, D.O., NSU-COM,



Stephen Zucker, D.M.D., M.Ed., NSU-COM; Gary Woodard, D.O., Memorial Hospital - Peninsula: Margaret Wilkinson, Ph.D., NSU-COM; Marc Morganstine, D.O., Palmetto General Hospital; and Bradley Feuer, D.O., Columbia Hospital West Palm Beach.



Myron Howell, D.O.; Broward General Hospital; Anthony Ottaviani, D.O., Sun Coast Hospital; Greg James, D.O., Sun Coast Hospital; and Barry Doublestine, Georgia Osteopathic Medical Society.



Bridget Semexant, D.O., and Gary Merlino, D.O., Miami Heart Institute and Medical Center; and NSU-COM faculty members A. Alvin Greber, D.O., Leonard Levy, D.P.M., M.P.H., and Alan Morrison, D.O.

Emotions on Display at End of Life Seminar

In March, NSU-COM collaborated with Hospice Care of Broward County to present the End of Life Care Seminar, which attracted over 100 information seeking attendees. The seminar, which centered on the theme "Making Meaningful Decisions for the End of Life: Images, Interventions, and Insights," proved to be an emotional experience for many of the participants. In addition to providing information in a didactic manner, the sessions were structured to allow for audience interaction. Session topics included:

- Changing the Obituary: Healing at the End of Life
- Gaps in End of Life Care
- Medical Ethics
- Problems in Communicating End of Life Care Decisions
- Medical Legal Issues

NSU-COM also partnered with the Shepard Broad Law Center to have renowned artist Dr. Patrick Smith exhibit his haunting "LIFEnearDEATH paintings during the seminar. The series of portraits, which showcase the faces of various hospice patients, served as an affecting backdrop to the subjects being addressed during the thought-provoking symposium.

Listed below are the distinguished speakers who helped make the End of Life Seminar such a rewarding and enriching experience:

- Sandra L. Bertman, Ph.D.
- Kate M. Callahan, Ph.D.c
- Reverend Edwin Harvey Hamilton, M.D.
- Kathy J. Molinet, R.N.
- Morton J. Morris, D.O., J.D.
- Ben Mulvey, Ph.D.
- Charlotte Paolini, D.O.

Additional event sponsors included:

- North Broward Hospital District
- NSU-COM AHEC Program
- Sun-Sentinel
- Broward County Medical Association
- Florida Osteopathic Medical Association
- Hospice Hundred
- Florida Medical Association



It took the combined efforts of a devoted contingent of individuals to ensure the success of the End of Life Seminar. Pictured (clockwise from left) are: Charlotte Paolini, D.O.; Ben Mulvey, Ph.D.; Reverend Edwin Harvey Hamilton, M.D.; Patrick Smith, Ph.D.; Morton Morris, D.O., J.D.; Scott Colton; Kathy Canfield; Susan Telli; Sandra Bertman, Ph.D.; Kathy Molinet, R.N.; Cynthia Peterson; and Kate Callahan, Ph.D.c.

Sigma Sigma Phi Fraternity Inducts New Members

In February, 36 individuals gathered at Burt and Jack's Restaurant in Port Everglades to be inducted into the Xi Chapter of Sigma Sigma Phi, which is coordinated through NSU-COM. Among the special inductees were Dean Anthony J. Silvagni, D.O. and Cyril Blavo, D.O., who serves as NSU-COM chair of pediatrics.

Dr. Silvagni and Dr. Blavo were honored for their outstanding community service contributions as well as their professional accomplishments.

Sigma Sigma Phi is a national honorary osteopathic service fraternity that was established in 1921 in Kirksville, Missouri, by seven students from the American School of Osteopathic Medicine. The fraternity's main objectives include furthering the science of osteopathic medicine and its standards of practice as well as improving the scholastic standing and promoting a higher degree of fellowship among its students.

Glenn Moran, D.O., a 1988 NSU-COM graduate, and Dr. Blavo reestablished the Xi Chapter in May 1999. David A. Lindley serves as the fraternity's current president. To earn membership consideration, Sigma Sigma Phi members are required to have a minimum grade point average of 80 percent; however, selection is based primarily upon service and leadership in the osteopathic community.

The Xi Chapter currently consists of 82 second and third-year osteopathic medical students who are active in numerous student organizations, community service projects, and medical missions.

Over the past year, Sigma Sigma Phi community service projects have included organizing a school supply drive for underprivileged students in Broward County and providing first aid to athletes in the Weston 5K Run. The induction dinner was funded through the benevolence of Patricia Quinn and Pfizer Pharmaceutical Company.

NSU-COM Sigma Sigma Phi Inductees

Anthony J. Silvagni, D.O. Cyril Blavo, D.O. Jessica Lyn Brown Scott Buckel Jeffrey D. Bushnell Andrew Robert Clark Christine Cochran Kelly L. Dyess David M. Gillis Joanna Greenblatt Ashu Kumar Jeffrey Lebensburger Susan Lee Jeffrey T. Liou Lily Limsuvanrot Ann MacIntyre Joseph F. Maides Ravi Nehan Kasey C. Nelson

Huy Nguyen Meredith Norris Heidi A. Pearson Harsha Rayashekar John B. Roach, Jr. Ben L. Rojas Alar Sambandam Andrew Schwartz Jason Seibly Chirag V. Shah Deepa Shah Brooke Short Daren Sommer Karin Stanton Troy Sterk Ian Weir Jen Wilkerson



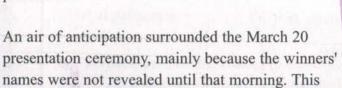
Pictured at the Sigma Sigma Phi induction ceremony are (clockwise from left): Glenn Moran, D.O., faculty advisor; David Lindley, president; Jeff Yuskaitis, vice president; Kim Kurak, treasurer; and Katina Brown, secretary.

SOUTHEASTERN

BULK BULK PAID PERMIT NO. 886 FT. LAUDERDALE, FLORIDA HEALTH PROFESSIONS DIVISION 3200 South University Drive 5200 South University Drive Ft. Lauderdale, Florida 33328-2018

Yvette Klein and Uri Goldberg were the inaugural recipients of the scholarship endowment in 1999.

names were not revealed until that morning. This year's winners also received a \$250 cash award.



Medicine, serves as a fitting tribute to students who embody the true spirit of an osteopathic

practitioner.



D.O.; Chirag Shah; Lily Limsuvanrot; Camille Bentley, D.O., interim chair, and Stanley Simpson, D.O., associate professor, Department of Family Medicine; Morton Terry, D.O., Chancellor, Health Professions Division; and Geraldine Terry.

Terry Scholarship Salutes Student Excellence

In 1999, the Matthew A. Terry Scholarship Endowment was established to honor first and second-year medical students who epitomize virtues such as scholastic excellence, service to the school, empathy, and congeniality. This year's deserving honorees are Chirag Shah (M-1) and Lily Limsuvanrot (M-2). The award, which was the brainchild of the Department of Family