State-wide network under way to expand D.O. GME opportunities

MSU-COM and several osteopathic hospitals have recently realized the first steps toward establishing a state-wide educational consortium.

Over the past two years, various hospitals and MSU-COM representatives have met to discuss the idea. The group recently approved the first consortium program—a primary care internal medicine residency to be initiated in July 1989, said Douglas Wood, acting dean.

The proposed consortium, called COGMET (Consortium for Osteopathic Graduate Medical Education and Training), would function with MSU-COM as an educational umbrella operating in conjunction with osteopathic training hospitals throughout Michigan. All Michigan osteopathic training hospitals have been invited to participate. At this time, all osteopathic hospitals with residency programs have indicated preliminary commitment to COGMET, Wood said.

The primary care internal medicine residency was chosen as the best way to establish a state-wide consortium for several reasons. It could expand on an existing program among Botsford General Hospital, Detroit Osteopathic Hospital, Bi-County Community Hospital, Riverside Osteopathic Hospital and MSU-COM. In addition, most other training hospitals also have an existing internal medicine residency program, said Gail Riegel, associate dean for academic affairs.

Many are concerned about the loss of osteopathic residents to the allopathic profession. For example, 57.2 percent of D.O.s now serving internal medicine residencies are in allopathic programs. The reasons students cite for their choice include better quality training, ambulatory outpatient exposure, and stronger academics, Riegel said. COGMET may be one way of answering to some of these students' concerns, he said.

It is hoped that this model will serve as a template for the development of other residency programs in a consortium arrangement, Riegel said. The objective is to plan and implement a broad range of quality graduate medical education.

MSU-COM Office of Admissions:

Facing the national crisis in declining medical school applicant pool

Medical school application numbers are down nationwide. Figures from AACOMAS as of December 22 indicate that applications to the fourteen member schools are down 21 percent from last year. Although not declining as much as others, on the same date MSU-COM had 3.49 percent fewer applicants than last year.

The goal of Paulette Lovell, appointed last spring as director of admissions, has been to increase the pool of high quality applicants.

As a result she has concentrated on recruitment. "We can't control the social conditions that affect applicants," she said, "but we can let people know we are here and what we can offer."

Recently Lovell, along with a committee, have developed a new format for the interview process for applicants which began this January.

Not only are the faculty interviewers to be evaluating the candidates but an emphasis has been placed on reviewing MSU-COM.

"The good candidates will have four or five places to choose from," she said. "We need to let them know what is special about MSU-COM."

Lovell believes MSU-COM is unique in its personal approach, the diversified basic science faculty, student research opportunities and the Medical Scientist Training Program, the base-hospital approach to clinical education and continuous curricular revisions which keep pace with modern health care.

The updated interview process is also designed to gather information which can be used for future recruitment. In the meantime, Lovell has relied on the limited amounts of research in the area to help determine the best candidates.

In a June 1988 report, John Molidor of the MSU College...
Human Medicine, found that the following characteristics appear to be typical to successful medical students:
- commitment to serving people
- realistic notion of strengths and weaknesses
- involvement in areas not necessarily socially reinforced
- evolution of desire to enter the health professions
- ability to introduce structure
- active participation in activities
- a mature perception of one's own life
- collegial involvement with authority figures
- outstanding/expert activity

But why are medical school applications down and what can be done about it?

The following are some opinions from MSU-COM representatives:

From Katherine E. White, Ph.D., assistant dean, student affairs
"There are a couple of things that might be worth thinking about regarding declining numbers of medical school applicants. The first of these is something that I call the 'AIDS Factor.' I have a strong suspicion that some (and perhaps many) prospective applicants are afraid to enter medicine out of fear of being exposed to AIDS patients and the potential risks of getting the disease from them. In our conservative contemporary society homophobia is alive and well, and in a recent study nearly 50 percent of all this year's freshman entering college agreed that 'Homosexual relations should be prohibited.' This number has increased steadily over the past several years.

"The second factor is the sheer enormity of issues related to economics. Alixander Astins's same study (January 11, 1989, Chronicle of Higher Education, pp 32-34) further indicates that the vast majority of undergraduates went to college 'to get a better job' (82.5 percent) and 'to make more money' (72.6 percent). It is not unusual for recent college graduates to be $8,000 to $10,000 in debt for their undergraduate education. Add on to that the costs of obtaining a medical degree ($50,000 - $60,000) not only in terms of money, but time (6 - 10 years including graduate medical training) and delayed earning power and you are looking at real money.

"Finally, because of all of the above factors people who enter medicine these days need to have a 'calling' similar to what a minister experiences. In our culture which is very materialistic and egocentric, people with callings are few and far between. Many graduating college seniors do not have a calling for medicine given the economic problems (above) and the litigious environment, the government involvement in health care, the AIDS epidemic, the 'bad' press and the fact that medicine is not as glamorous as it was once felt to be.

"What can be done about it?
Certain theorists believe that we are in a cycle which began in the late 1950s which will end at the turn of the century. It's simply a question of supply and demand. By then many of the negative issues will probably be resolved, the economy will be different and there will probably be physician shortages again. The government became involved in renewed efforts to facilitate medical education (via low cost loans, the renewal of the National Health Service Corps., etc.) and we will begin yet another 50 year cycle. There are no 'quick fixes' to this problem and many of the variables which may affect its outcome are totally beyond our control. In the interim I support the recruitment plan enumerated in the 1988 draft of the College's Self-Study report."

(Please note: The 1988 Self-Study report, now in final review, will be covered in future issues of "Communique.")

From Paulette Lovell, director of admissions:
"According to Robert G. Petersdorf M.D., president of the AAMC, (June 13, 1988 AAMC Conference) among the many possible reasons for the declining applicant pool are demographic shifts, cost of attending medical school, liability issues and changes in the structure of health care delivery. The media, the general public and physicians who have become outspoken about their frustrations with the profession contribute to the confusion. These trends must be examined and efforts made to reach the general public with information about special service needs within the profession, as well as its more positive attributes. Medicine should be portrayed as an intellectually exciting and challenging profession.

"At the same conference, Russell Miller, M.D., reported that minorities continue to be underrepresented in the medical schools of this country and in the medical profession. Blacks, for example, represent approximately 12 percent of the nation's population, but only 6 percent of the total medical school enrollment, 5 percent of medical school graduates, 4 percent of postgraduate trainees, 3 percent of physicians in practice and two percent of medical school faculties. Furthermore, a report by the American Council on Education states that black undergraduate college enrollment declined significantly.

continued on page 8
'73

Rodney G. Bjordahl is now the medical director of the Hale Makua Extended Care Facility. It is the only SNF-ICF facility on Maui, Hawaii with 210 beds.

He writes that Maui could use more general surgeons, family doctors, dermatologists and neurologists.

Harry D. McCaleb has been appointed for a second term as vice chairman of the medical staff at Mesa General Hospital Medical Center in Mesa, Arizona.

He is the director of Medical Laboratories at Mesa General Hospital Medical Center. He lives in Glendale, Arizona.

'75

Cheryl L. Grant will marry Mary Rosen, M.D., in March. Both are child psychiatrists. She will continue in private practice in Portland, Oregon.

'76

James H. Kaye continues to practice family medicine and is the assistant county medical examiner in Ocean County, New Jersey.

He is married and has two sons, ages 3 and 6.

Kevin B. Karikomi announces the birth of a third son, David Ira Karikomi, born on November 5 at St. Ann's Hospital in Westerville, Ohio.

He recently made a presentation on basal cell carcinoma diagnosis and treatment at Doctors Hospital at the Seventh Annual Alumni Reunion CME Conference.

Christine Lepoudre was appointed chairperson for the Annual Osteopathic College of Ophthalmology and Otorhinolaryngology national meeting being held in San Diego in April.

'77

Edward D. Boudreau and other colleagues specializing in emergency medicine have recently taken over emergency services at Doctors Hospital in Columbus, Ohio. They now staff three hospitals in the city.

Thomas H. Brand was recently elected head of the anesthesia section at Clovis Community Hospital.

John S. DeMare continues to practice family medicine in Sterling Heights.

Cynthia M. Trosin has a new addition in her family, a daughter Lauren Elyse Emerick was born on June 23, 1988. The birth was 10 weeks early and she weighed 3 pounds and 14 ounces.

Lauren joins a brother, Karl Jon. Trosin is married to Dr. Karl J. Emerick.

Margaret A. Willman is no longer in private practice since December 1988. In August 1988 she began working at Traverse City Regional Psychiatric Hospital, providing medical coverage and doing admissions. She writes: "Perhaps a psychiatry residency lies in my future!"

'78

Robert K. Gramenz has moved to Olympia, Washington with his wife Carol and two sons Jonathon, 2, and Tyler, 18 months. On January 1, he began working with Group Health of Puget Sound (an HMO) as a pediatrician.

He writes: "We love it and would welcome visitors!"

Robert M. Kalet and his wife Nancy announce son number 3, Chad Andrew, born on December 16, 1988.

Kenyon S. Kendall announces the birth of a son, Emerson Sumner Kendall, born on January 12. He writes that Emerson learned to ski at eight days old.

Kendall published a report in the January issue of the Journal of the American Osteopathic Association. It explained his research designed to see if hyaluronate sodium or air has a more protective effect on the corneal endothelium during anterior segment surgery. He reported no difference between the two.

He has a new office in Grand Rapids at 750 Bradford.

Gregory R. Maddex and Karen

As always we are interested in news from members of the MSU-COM community. Please take a moment to update us on what you are doing.

Send your news to:
The Office of Health Information, A-310 East Fee Hall, East Lansing, MI 48824-1316.

For assistance call: (517)355-9261
Spencer Kiefer (CCOM 1976) were married on December 31 in Pomona, California. They both practice in Diamond Bar, California.

April 28--Class of 1979 reunion dinner: The MSU-COM class of 1979 will have a reunion dinner to coincide with the Michigan Association of Osteopathic Physicians & Surgeons’ annual convention on April 28. It will be held at the Hyatt Regency in Dearborn.

Richard D. Bratton is an emergency room physician, full-time, working for Redford Community Hospital.


Paul R. Gauthier passed certifying boards in general practice, taken in February 1988 in Palm Springs, Florida. He is the father of four: Danny, Molly, Charlie and Timmy. He is still in practice with classmate Tim Lang.

David E. Kahler will marry Janis Lundberg of Philadelphia on March 11. He passed board certification in pediatrics.

Wanda B. Kalencki and her husband Joseph Golubski (UHS-COM, 1980) announce the birth of a daughter, Anne Elise, on September 17. They recently moved to Sheboygan, Wisconsin.

She writes: "She is such a wonder--we are enjoying our new roles as parents! Joe took a job with an ex-Navy buddy and is working hard, but happy. As for me, I am temporarily unemployed--outside the home anyway. But I plan to return to work soon."

Anne M. Pawlak-Simpson and her husband David A. Simpson announce the birth of their son Francis Joseph, on December 22. He weighed 6 pounds and 13 ounces and was 19 inches long.

She writes: "Every mom and dad feel their child is the prettiest but this child is absolutely gorgeous! Being a mom is a wonderful experience--I recommend it to everyone. We are very proud and very blessed. What a Christmas gift!"

Robert L. Snyder was elected president of the Michigan Society of Osteopathic Anesthesiologists in April 1988.

Last fall his family moved to Midland, where he and his wife Shelly both grew up.

He accepted a position at Midland Hospital Center.

He writes: "It is a very busy department and rapidly growing. The new position gave me more time to be with my family and closer to our folks and siblings."

Ralph T. Walsh is now the chairman of the department of anesthesia and is a resident trainer at Metropolitan Hospital.


Alice K. Raynesford Shanaver has a new office in Riverview, shared with an American general practitioner and a British manipulation specialist.

She writes that her practice is about 70 percent OMT and very busy. She also does OMT consults at Riverside Osteopathic Hospital.

She will be speaking at the MAOP&S convention in April.

Lawrence L. Prokop presented "Rehabilitation of Shoulder Injuries," at the 93rd Convention and Scientific Seminar of the American Osteopathic Association in December. It was part of a joint seminar coordinated by the American Osteopathic Academy of Sports Medicine and the American Osteopathic College of Rehabilitation Medicine.

Board certified in rehabilitation medicine, he is affiliated with the National Rehabilitation Hospital and the Washington Hospital Center, both in Washington, D.C. He also serves as team physician for the Medlantic Corporate Sports Battle Team.

John P. Shonerd writes: "As if three children weren't enough, we've taken in a teenage foster daughter for two years. Yes it is 'worth it.' Happy New Year!"

Arlie N. (Getz) Wallace is starting a private practice in Sarasota, Florida.

She writes: "We really love the weather here! The twins, Morgan and Meredith, just celebrated their first birthday. Our son Marshall is enjoying preschool. Although hectic, I enjoy being a professional and a mom."

Mary G. (Nissley) Goldman, married Jerome Goldman on October
Debra E. Johnson-Jordan is completing a public health obligation at the Sixteenth Street Community Health Center in Milwaukee. She is celebrating the birth of her first child, Lyndon Charles Jordan, born on January 2.

Jane A. Kennedy will finish a psychiatry residency in June at the University of Colorado School of Medicine. She will then be doing a fellowship in substance abuse research at the Rockefeller University in New York City for two years.

She writes: "Please call if you get to New York—I know hardly anyone there."

Cynthia (Manninen) Kring and Donald E. Kring, Jr., announce the birth of a daughter, Molly Elizabeth, November 16. She joins a brother, Donald III, 2.

Don is completing his anesthesiology residency at the University of Michigan this summer and will be starting his practice in Berlin, Wisconsin in September.

They write to please stop by and visit if you are in the area.

Patricia Roy writes that Kathy Rosema, MSU-COM '86, joined her in general practice in August.

Roy just finished a year as chief of staff of Muskegon General Hospital. She remains on the Board of Trustees.

She writes: "I think at 32, I'm the youngest person to be so elected, so I was pretty impressed with myself. Jennifer is now almost 7 and I love having a partner to give me more time to be a mom."

Brent R. Allen, 1980, writes that this past year the Humana Hospital Desert Valley in Phoenix dedicated its new medical library in honor of Lawrence D. Sills, 1982, who was killed in the Northwest Airlines plane crash in Detroit in August 1987. The library was dedicated to "Our friend and colleague for his appreciation of life and his fellow man."

Daniel P. Eardley is chief of the Department of General Surgery at the U.S. Naval Hospital in Newport, Rhode Island.

Jan S. Swanson passed the certifying examination of the American Board of Internal Medicine in September 1988. She will finish her third year in the Health Service Corps in September. She is currently the medical director of a Texas prison and lives in Duncanville, Texas. She writes she would enjoy hearing from her MSU friends.

David W. Crotty writes he is still in Orangevale, California looking for someone to buy his practice.

He writes: "Family is great! Kids growing and wonderful. Colleen's doing fine. We are looking forward to our move."

Stephen C. Dalm has a new office location in Kalamazoo. He finished a residency in obstetrics and gynecology at Botsford General Hospital in 1988.

Charlene Greene and her husband Bruce recently bought a new home and are busy fixing it up and moving.

She writes: "The practice in Acme is now over a year old and growing by leaps and bounds. There is plenty of room for company."

Dolores L. King is in her second year as a staff physician at the student health center of the University of Southern California.

She writes: "I love the work. The only bad part is the Los Angeles commute. My son Nolan is an enthusiastic kindergartner. We enjoy living at the base of the San Gabriel mountains. Hope to see some of you at western-based conferences and meetings."

Thomas A. Naegle, will be speaking on "The Computer in the Medical Office of the '90s," at the 28th Annual Convention and Scientific Seminar of the Osteopathic Physicians and Surgeons of California in February. He will also speak at the Fifth International Conference on the Computerization of Medical Records in April. He has also been invited to speak to the New Mexico Osteopathic Medical Association in June.

Christopher Penoyar writes that the Man Bites Bat story as reported in Associated Press and United Press International in November gave him a distinct and rare privilege. He treated a local coal miner who bit off the ear of a bat and drank beer after dunking the earless bat in it. The bat tested positive for rabies in the state lab. (Washington)

Joel S. Yudin writes: "Jean and I recently had a baby girl named Leah who has enriched our life as only a baby can. Best wishes to all of my classmates."

He is presently in a four person practice in the Philadelphia area and says he enjoys it very much.
David R. Neff, 1980, and David Grimshaw, 1986, have a family practice with an emphasis on OMT and preventive medicine. They have recently computerized their Okemos office.

David R. Neff, 1980, became interested in medicine after a high school football injury. "The fact that my care was so excellent really made a profound impact on me," he said.

He talked to his high school counselor who said to get his algebra grade up and then sent him to investigate the programs at MSU.

He wound up with a B.S. from MSU in physiology and biochemistry. In the meantime he had suffered another injury, this time to his back. He was treated with manual medicine and that started him thinking about osteopathy. Several professors also encouraged him.

"Everyone kept saying 'Why not osteopathy?'" he said. "Pretty soon I was saying it too."

The decision to go into family practice was born in part because his interests were broad.

"I didn't want to narrow in on one thing so much that I couldn't pursue other areas," he said. "I'm a systems biologist at heart. I like how things interact."

In addition he felt family practice would give him good opportunities to impact upon patients' lives.

"I wanted to be in the trenches and help people where it really mattered," he said.

As a medical student, Neff had a special opportunity to work on manual medicine skills. For two years he held a fellowship in OMT, working with several MSU-COM manual medicine specialists.

"I am one of only five or six people who have had that unique experience of working with the best of the best," he said.

Currently practicing in Okemos, Neff says he has always imagined he would end up back in his native city of Grand Rapids. The East Lansing area had its draw however. His wife had a career opportunity there and it seemed a good place to raise a family.

They have three children: Jason, 6; Megan, 4; and Adam, 1.

He also wanted to be involved with teaching at MSU.

He has been teaching in several CME courses in manual medicine and differential diagnosis. In addition MSU-COM students rotate through his practice regularly. He says he enjoys helping students learn how to incorporate OMT into mainstream medicine.

A recent purchaser of an impressive new computer system, Neff believes that computers are absolutely necessary to "stay on top of things." He hopes his investment will get rid of a lot of paper work and consulting of files and medical notes. He also plans to use it for on-line computer searches for information on a variety of medical topics. Besides all that, he admits he has always loved computers.

Along with the computerization, Neff also hopes to begin some clinical trials on potential OMT applications and possibly other research.

After eight years of private practice, Neff can cite many rewards. For example his youngest patient is 10-days old and his oldest is 99. He has the opportunity to watch children grow and to see the effect a steady education program has on lifestyles and health.

"We take extreme pride in being family based. My feeling is that in primary care we have to be specialists in many fields," he said. "The trick is to be broad based yet informed and up-to-date."

Neff recently moved into new offices and gained a partner David Grimshaw, 1986 (next page). He says he enjoys the complexities of a private practice but plans to add only one more person.

"Keeping the practice small is the best way to handle a personal life," he said.

Neff attributes the success of his growing practice to a focus on OMT. He believes that there is a great demand for manual medicine at the same time that there are less people focusing on it. His goals include more teaching and helping osteopathic students to concentrate on OMT and primary care.

He believes osteopathic medical education will need someone like himself with an integrated background, who can "pick up the pieces as far as OMT principles are concerned and bring them into the '90s."
David Grimshaw, 1986, was introduced to osteopathy in a science and ethics course at Butler University. An environmental studies major, he had also gotten involved in a research project on holistic medicine.

The book *Anatomy of an Illness as Perceived by the Patient* by Norman Cousins, made him think about becoming a doctor.

"I had hated the idea of a doctor," he said, "I couldn't see how a doctor had anything to do with health care. Then I found an alternative in osteopathy."

Grimshaw's then-girlfriend now-wife introduced him to her D.O. father, who recommended more reading and encouraged him to pursue the profession.

"It was the osteopathic philosophy that grabbed me," Grimshaw said. "Looking at a person as a whole in connection with their environment made a lot of sense to me."

As a medical student at MSU-COM, Grimshaw concentrated on manual medicine, taking several OMT elective courses.

"It is such a great tool for developing a rapport with people," he said. "It is a special way to help people feel at ease. It helps develop a closer physician-patient relationship."

Grimshaw met his future partner in family practice, David R. Neff, 1980, (previous page) after becoming a graduate assistant with Robert Ward and Sarah Sprafka in the Osteopathic Principles in Education program. Neff had been a G.A. with them a few years before. Like Neff, he had difficulty narrowing many interests into one specialty. He loved pediatrics, psychiatry, delivering babies and manipulation. He had always found the behavioral aspects of medicine more interesting than medicine itself. He enjoyed looking at issues such as chronic stress and social isolation and how the medical profession could help.

"The nuts and bolts of medicine didn't light my imagination," he said. "Family practice seemed the way to go."

He completed his junior partnership with Neff and was offered a position then, but it took some more soul searching before definitely deciding to go into general practice.

His year as an instructor in the rehabilitation medicine program at MSU-COM, stemmed from agreement with the rehabilitation philosophy.

"It is an interdisciplinary process of getting people to their highest level of function so they can work at their very best," he said. "I believe that can carry over to any type of practice."

Grimshaw noted that the program also helped him expand his manual medicine skills, something which like the rehabilitation philosophy, he believes can be applied to many areas. He also believes that doctors can always improve upon their manual medicine skills.

"One thing I love about manual medicine," he said, "is that your skills evolve and can be used more and more. You don't get tired of it. I believe doctors are rejuvenated by it rather than ever getting burned out."

While an instructor, his teachers became mentors and helped him on his way to family practice.

"I looked at what they had done and they had all been G.P.s first. I felt I needed that framework of experience," he said.

Eventually Grimshaw hopes to go into teaching and has already done some table training in MSU-COM CME courses.

In the meantime, he has turned his teaching skills to his patients.

"My main drive is giving people information," he said. "I believe a doctors' role should be in part an educator, encouraging people to take responsibility for their own health."

His wife, who has a master's degree in family and child ecology, also works in the practice. She is also beginning a Ph.D. program at MSU.

"We have always wanted to work together," Grimshaw said.

The Grimshaws live in East Lansing and have two children; Benjamin, 4, and Ashley, 2 1/2. Another child is on the way.

"We love the area and we want to keep strong ties with the University," he said.

Grimshaw noted that his past year he has been busy learning about the private practice business.

"In medical school I thought once I was out that it would get easier, but it is every bit as much hard work," he said.

Although, he admits, it is a bit more fun.
education programs. Although several members are interested in medical subspecialty residencies in a consortium arrangement, the group plans to emphasize the development of primary care areas, he said.

"We are losing the most D.O.s to M.D. institutions in primary care residencies," Riegel said. "It is part of the osteopathic tradition and the mission of this College to serve in primary care."

The consortium would be overseen by a GME Advisory Committee consisting of representatives from each of the participating institutions. Each individual residency program would also have a committee and its own program director working with a consortium program director. Many of the educational and management components of individual residency programs now performed at each hospital would be subsumed by the consortium, said Harry Ackerman, director of GME at MU-COM. Ackerman would serve as the coordinator of GME for the consortium.

The overriding goal of this first residency is to combine institutional, physician and patient resources in order to enhance quality GME programs and the delivery of patient care.

"Individual institutions with small programs can't do all this by themselves," Riegel said.

"This educational joining together of several distinct programs should lead to the whole being considerably stronger than any of the component parts."

Wood noted that the program would be limited in size in the beginning to allow appropriate evaluation.

Allopathic GME has traditionally emphasized medical college affiliation, while osteopathic residencies have been hospital-based. In 1981, the Association of American Medical Colleges recommended unifying responsibility for GME under the direction of medical schools and their parent universities.

"Establishing state-wide networks of residency programs will increase credibility through affiliation with the University," he said.

"It will also increase cooperation among hospitals and the College and increase the educational comprehensiveness of MU-COM."

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MSU-COM admissions

between 1980 and 1984. This obviously has its effect on the size of the pool of minority applicants to medical school.

"The declining number of applicants is significant. In 1983, applications at MSU-COM numbered 1,118, and in 1988, 731, and our latest figures from AAMC indicate that this year our total will be 745. Accordingly, the class mean science grade point declined from 3.33 in 1983 to 3.12 in 1988 during the same period. MCAT average scores declined from 8.0 to 6.9.

"In the 1988 entering class, we were fortunate to realize a minority representation of 18 percent. It appears that during 1989 minority application numbers will be down. We are particularly concerned that Michigan minority applications are few.

"The Medical Access and Support Program (MASP), is designed to address the needs of students who meet the basic admission requirements, have demonstrated potential and who may have been economically or educationally disadvantaged.

"What can be done? Given the situation described above, it would seem appropriate to develop, implement and evaluate a recruitment plan that is based on the demographic characteristics of "typical" entering classes at MSU-COM. The intent of this effort is to maintain the high quality applicants, typical of MSU-COM over the years. The recruitment plan must focus on not only reaching an audience of new candidates, but on retaining those applicants who have applied and interviewed.

"We have developed and implemented a recruitment plan. A part of it includes a videotape which describes our program at MSU-COM. Essentially, given limited resources, our plan is largely directed to the Michigan population, since approximately 80 percent of our students are selected from this state. Beyond what the Office of Admissions can reasonably expect to accomplish, we rely on our students and alumni to act as ambassadors for our program. The importance of this aspect of recruitment cannot be underestimated. This year, a number of our alumni, and students for example, have referred potential candidates for consideration and preadmission counseling.

That the public reads and hears more positive aspects of medicine as a profession, and osteopathic medicine, in particular is of extreme importance. Candidates who inquire about
Bradley J. Cleggs recently moved his practice into a newly constructed office with Sue Levenna, MSU-COM '82.

Two general dentists and two optometrists are joining them in the project.

Richard T. Klapchar will join the Department of Otolaryngology/Head and Neck Surgery/Oro-facial Plastic Surgery at Doctor's Hospital in Massillon, Ohio in August. He and his wife Susan announce the birth of two children, Michael Thomas, 2, and Kimberly Susan, 4 months.

Elliot S. Stern graduated from the University of Michigan Law School in May 1988. He passed the Michigan bar exam and joined a Southfield law practice; Stern, Cohan & Garling; as a physician attorney. His practice is limited to medical malpractice and other medical litigation.

Keith B. Tom and his wife Laura announce the birth of their second child, Kevin Edwin, born on August 30, 1988.

K. Donald Edwards recently moved to Linden. He is serving as director of emergency medicine at McLaren General Hospital in Flint.

Christine M. Hamilton is beginning a family practice in St. Ignace this February.

Gerald A. Harriman and his wife Nancy recently had their second child, Marie Rose, born on November 20, 1988. He writes that she is the first girl born in his family for 52 years.

Cheryl A. Hayes has enrolled in the University of Michigan Department of Physical Medicine and Rehabilitation. She plans to graduate in August. She had a baby girl, Rachel Elanda Cattailo, on September 29, 1988. Her husband's name is Leo Cattailo. They live in Ann Arbor. Hayes plans to be working in the Metro Detroit area in the fall.

Miriam Lehenbom-Mansour, is finishing her second year of a three-year anesthesia residency at the University of Michigan. She writes: "There will be a short delay in the process as I will be delivering our first child sometime in March. We are obviously very excited."

Karen L. Babos will complete her second year of internal medicine in June and begin a fellowship in geriatric medicine at the University of Chicago beginning in July.

Kathy L. Rosema writes that the class composites are being mailed as well as a letter with class news and yearbook information. She has joined Patricia Roy, MSU-COM '81, in general practice.

Victoria Hunter Chabot and Michael C. Chabot announce the birth of Elizabeth Hunter Chabot, born on October 14, 1988. She weighed 8 pounds and 6 ounces and was 21 inches long.

Vicki is a first-year radiology resident at Detroit Osteopathic Hospital and Bi-County Community Hospital. Mike will be starting an orthopedics residency in July at DOH/BCCH.

Cynthia S. Gulick is finishing a family practice residency in Portland, Oregon and is excited about including O.B. in her practice—which will be in this area.

She writes: "The Pacific Northwest is spectacular country and I love keeping so close to the wild, rugged coast and especially those snowy mountains! There's great local brew-pubs in Portland too. So do come visit if you're in the vicinity."

Vicky M. Scott is completing her first year of residency in obstetrics and gynecology at Aultman Hospital in Canton, Ohio. Her internship was completed at Flint Osteopathic Hospital.

Thomas W. Biggs, II, will start an ophthalmology residency at Detroit Osteopathic Hospital in July.

Clairann Farr and Kevin Wilson are expecting their first child in early August. They plan to name the baby either Rochelle or Demetrius.

Sanford J. Vieder will begin a residency in emergency medicine at Botsford General Hospital in July.
Faculty News Briefs


Andary also published an abstract "Sympathetic Skin Response in Fifth Lumbar and First Sacral Radiculopathy" in the journal, Electro-physiology and Clinical Neurophysiology, (70:996, 1988).

Harold E. Bowman, professor of pathology, has been appointed chairperson of the Professors of Clinical Oncology Committee for the American Cancer Society. He was also appointed to the Unproven Methods Chairperson's Work Group, a national committee which works with the Food and Drug Administration in determining which drugs are efficacious for treatment of cancer.

Atis K. Freimanis, professor of radiology, received the Pioneer Award Certificate, in recognition of is contributions to the development of ultrasound at the History of Medical Ultrasound Symposium in Washington, D.C. in October 1988.

Philip Greenman, professor of biomechanics, William Somersset, associate professor of rehabilitation medicine, and Donald F. Stanton, professor and director of rehabilitation medicine, presented a tutorial on manual medicine to members of the American Academy of Physical Medicine and Rehabilitation at the annual meeting in Seattle in November 1988.

E. James Potchen, chairperson of radiology, co-authored Diagnostic Nuclear Medicine with Yale University professors Alexander Gottschalk and Paul B. Hoffer.

Donald F. Stanton, professor and director of rehabilitation medicine, was named president elect of the American Osteopathic College of Rehabilitation Medicine at their annual meeting held in conjunction with the A.O.A. meeting in Las Vegas.

Arnold Werner, professor of psychiatry, was recently elected treasurer of the American Association of Directors of Psychiatry Resident Training. Werner was also recently appointed to the American Psychiatric Association scientific program committee.

MAOP&S has a new executive director


Stevenson had been affiliated with Blue Cross and Blue Shield of Michigan since 1962. Since 1985, he served as senior vice president of external affairs. He was a member of the senior management team, which over the years, guided the full spectrum of corporate activities, including marketing, corporate communications, community relations, claims administration, customer service and senior services.

He intends to travel extensively throughout the state, serving as a communications liaison among component societies, hospitals, MSU-COM and the MAOP&S Board. He recently toured MSU-COM.

Among his civic accomplishments, Stevenson served as director of the Michigan State Chamber of Commerce, the Greater Detroit Chamber of Commerce, the Metropolitan Detroit Convention and Visitors Bureau, and the Metropolitan Transit Committee. He also was co-chair of the Capuchin Soup Kitchen fund raiser and actively participated on a national committee to raise funds for the 1988 U.S. Olympic Team.
February 25
Fourth Annual Orthopaedic Conference: Forum on Current Trends in Lumbar Disc Surgery

Program chairperson, Lawrence Mysliwiec, D.O. 4 hours of Category I credit. Cost is $50 or $25 for physicians in training. Please note that this is a reduction from the cost listed in the January issue. A course brochure will be mailed.

March 2
Third Annual Family Medicine Conference: Clinical Concepts and Strategies for the Primary Care Physician

The goal of the program is to provide current information about new issues and important problems facing family and primary care physicians. Sponsored by the Department of Family Medicine.

6 hours of AOA Category I credit. Cost is $50 or $25 for physicians in training. A course brochure will be mailed.

March 11-15
Principles of Manual Medicine

Overview of manual medicine, principles of structural diagnosis and screening examination of the musculoskeletal system. Includes a review of functional vertebral anatomy and the manipulative prescription; concepts of motion barriers and of the manipulable dysfunction; principles of vertebral motion, of soft tissue and articulatory manual medicine procedures, of muscle energy and manual medicine procedures and of high velocity mobilization with impulse.


Other faculty (contingent on course enrollment) include Robert Ward, D.O., F.A.A.O.; Mitchell Elkiss, D.O., neurologist; and Edward Issacs, M.D., neurologist.

Co-sponsored by MSU-COM and the MSU College of Human Medicine. It serves as a prerequisite conference for all other postgraduate manual medicine courses offered by MSU-COM. 40 hours of Category I credit. Cost is $800 or $400 for physicians in training. Will be held at the Tucson Hilton East in Tucson.

March 13-17
Tutorial on Level I Muscle Energy Technique

This course is designed to expand previous training in manual medicine in the area of use of muscle contraction as an activating force. Concepts of muscle contraction will be taught and will be utilized in the treatment of the vertebral column and the bony pelvis. Faculty are John Bourdillon, F.C.R.S., chairperson; Mark Bockhout, M.S., P.T.; David Grimshaw, D.O.; William Page-Echols, D.O.; and Carl Steele, D.O. Co-sponsored by MSU-COM and MSU College of Human Medicine. 40 hours Category I credit. Cost is $800 or $400 for physicians in training.

April 5-9
Tutorial on Direct Action Thrust Manipulative Technique

A five-day intensive course in the principles and use of direct action high velocity manipulative therapy to be held in Tucson. Primary emphasis will be placed upon the spine, pelvis and thoracic cage. Emphasis will also be placed on the treatment of the patient and the appropriate prescription of manipulative therapy. Faculty are Philip Greenman, D.O., F.A.A.O., chairperson and John Bourdillon, F.R.C.S.

Co-sponsored by MSU-COM and MSU College of Human Medicine. 40 hours Category I credit. Cost is $800 or $400 for physicians in training.

April 21-23
The Differential Diagnosis of Cervical Spine and Upper Extremity: An Interdisciplinary Approach

Objectives include presenting an integrated patient assessment as a basis for differential diagnosis and using case histories as models for the problem solving process in patient management. Will emphasize diagnostic procedures to assist in differential diagnosis and the interrelationship of visceral and somatic etiologies of low back pain. Faculty are Philip Greenman, D.O., F.A.A.O., chairperson, neurolology; Mitchell Elkiss, D.O., orthopedic surgery; and David Neff, D.O., general medicine. 20 hours of AOA Category I credit. Cost is $400 or $200 for physicians in training.

For more information or to register for any of the courses, contact the Office of Continuing Medical Education, MSU-COM, A306 E. Fee Hall, East Lansing, MI, 48824-1316. Or call (517) 353-9714.

Unless otherwise noted, the courses are held at the MSU Kellogg Center for Lifelong Education on Harrison Road in East Lansing.
News briefs

Dean Magen undergoes heart surgery

Dean Myron S. Magen had coronary artery bypass surgery at the Cleveland Clinic on January 27. His condition was reported as satisfactory immediately after the surgery and continues to be good.

Douglas Wood, associate dean, has been named acting dean in Magen's absence.

Ann Landers makes apologies to D.O.s


His letter read:

Dear Ann Landers: You made a glaring error in a recent column. You told a distressed reader, "All psychiatrists are M.D.'s." This is wrong. Many psychiatrists have D.O. degrees. They are Doctors of Osteopathy. The training, and in many cases their specialty certification credentials, are the same as those for psychiatrists with the M.D. degree. Osteopathic physicians are licensed to practice a full scope of medicine in all 50 states.

I trust you will publish a correction soon. --

Dear Dr. Osborn: There are 28,000 osteopathic physicians in the United States and I think I heard from all of them. My apologies to each and every one of you for this grievous error. This was a shameful gaffe.

SECOM now a university

University status has been awarded to the Southeastern College of Osteopathic Medicine and its sister institution, the Southeastern College of Pharmaceutical Sciences, both in North Miami Beach, Florida.

The state Board of Independent Colleges and Universities awarded the status to the two private non-profit institutions in December. At the same time, the SBICU granted approval for SECOM to begin development of its planned optometry school.

MSU-COM Admissions

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MSU-COM range widely in sophistication regarding their knowledge of osteopathic medicine as a profession. Some have no idea what it involves; some have questions about comparisons with allopathic practice and others have considerable knowledge about and commitment to the profession. Our office will be happy to consult with individuals and organizations who wish to become more actively involved in this significant contribution to the continued good health of the osteopathic community and of MSU-COM."

We will continue to report on the issue of the declining number of applicants to medical schools in future issues of "Communique."

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