COMMUNIQUÉ
Michigan State University College of Osteopathic Medicine

Winter 2000

PARTNERS FOR SUCCESS
Building Educational Pathways with Crockett Technical High School
Dean's Column

Fall semester 2000 has been a highly productive one for faculty, staff, students and alumni at MSUCOM. We celebrated our osteopathic family at convocation, at Silverfest, and in a highly visible participation during National Osteopathic Medicine Week. We offered a Mini Medical School to help laypersons better understand and prevent heart disease, head and neck pain, breast and prostatic cancer, respiratory ailments, and to enhance their nutrition and mental health.

As most of you will remember, MSUCOM has made a concerted effort during the last months to enhance research in the college. It was heartening for me to receive the following letter, and I know that you'll find it as encouraging as I did — a milepost that lets us know we're proceeding in the right direction.

Dear Dean Jacobs:

This summer, I was honored to return to Fee Hall to participate in an activity that Justin McCormick organized to review the College's research portfolio and new opportunities. I am not sure that I lent a lot of insight that was not already apparent, but it has given me pause to think periodically about the changes underway at the College. This past weekend, I read the latest Communiqué featuring the changes in the various departments. In addition I found Terrie Taylor's commentary on malaria and TB in last week's Lancet, and a major clinical paper on MS featured work that Dave Kaufman and co-participate in. These are important to note and be proud of!!

The point of my email is to congratulate you on changing the culture and supporting these efforts. These are positive steps for the College, and I would like to offer (if nothing else) my continued support for the direction and attention that research is taking. I look forward to reading more about such activities from your faculty in the future. I hope it is of some encouragement to you that people do notice.

Best wishes.

Sincerely,

Gregory J. Downing, DO, Ph.D.
Deputy Director, Office of Science Policy and Planning
Office of the Director, National Institutes of Health

The administrators, faculty and staff responsible for this measurable improvement in research and scholarly activity in the college are to be highly commended for their efforts. They are pacesetters for the osteopathic profession. Kudos!

I wish each of you health, happiness and prosperity for the new year.

Allen W. Jacobs, DO, PhD, Dean
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MSUCOM appreciates the generous and continuing support for COMMUNIQUE offered through the Michigan Osteopathic College Foundation. Thank you!
National Osteopathic Medicine Week

Educating the Public About Osteopathic Medicine

by K. Friday

It was a busy and informative week November 13-18 at MSUCOM as the college celebrated National Osteopathic Medicine Week. Displays lining the entrance to East Fee Hall highlighted faculty and student research, the Michigan Osteopathic Association, informatics in the curriculum, rural osteopathic medicine programs, and the Statewide Campus System (SCS). As the displays affirm, the college is active and innovative on many fronts.

Sponsored by Caremark, Blue Cross/Blue Shield of Michigan, and the Physician’s Health Plan of Mid-Michigan, National Osteopathic Medicine Week was open to the public as well as to members of the MSU community, public health leaders, and local media.

The celebration and its activities were designed to educate the public about osteopathic medicine and the various programs at MSUCOM. It also allowed the college to demonstrate its commitment to community health by offering free health information and screenings to the public. For those already connected to the college, the week provided the opportunity for students, staff, faculty, and SCS administrators to meet for informal question-and-answer sessions about learning and practicing medicine in Michigan. There was also a student/staff mixer.

Keynote Address: Health Policy and Medicine: Trends in Public Health

A long-time friend of the college, James K. Haveman, executive director of the Michigan Department of Community Health, delivered the keynote address at the Michigan State University College of Osteopathic Medicine during National Osteopathic Medicine Week.

Introduced by Dean Allen W. Jacobs, DO, PhD, Mr. Haveman discussed some trends in Michigan’s public health and stressed the importance of preventive medicine and sound health policy. For Mr. Haveman, preventive medicine often suffers in Michigan because of the absence of a standardized, “best practices” approach to many diseases and a lack of coordination between public and private health providers and insurers. “We tend to be disjointed in our approach to health care,” Mr. Haveman told the MSUCOM audience, “and we often treat the disease instead of looking holistically at the big picture.”

Mr. Haveman identified several statistics in public health that should be addressed with long-term, preventive approaches to public health:

- There are currently one million uninsured in the state of Michigan
- The Department of Community Health spends millions in neo-natal care for high-risk infants. Educating the parents during pregnancy is one way to obviate some of these costs
Although Medicaid was originally created to help women and children, over two thirds of the state budget for Medicaid goes to the elderly and the disabled, thereby reducing Medicaid’s preventive impact.

Michigan residents are the fourth most sedentary population in the nation.

Michigan once ranked dead last in the rate of immunizations but has now risen to fourteenth.

Seventy percent of hospitalizations for diabetes are preventable.

To combat some of these trends, Mr. Haveman said his department is launching several education campaigns, including a program targeting obesity. The Michigan Department of Community Health will also offer $300,000 in grants to public and private entities to develop innovative programs in long-term care.

Mr. Haveman singled out the osteopathic profession as particularly adept at the type of long-term, preventive care for which he is calling. Not only does osteopathic medicine examine larger environmental and social factors for health, it also has demonstrated success in innovative treatments. “MSUCOM has been more open to and more accepting of broader forms of treatment and alternative medicines,” Haveman explained.

Building Osteopathic Connections

National Osteopathic Medicine Week has always given the students at MSUCOM the opportunity to learn more about the profession they will soon enter.

Last year, “Building Osteopathic Connections” brought students and Michigan Osteopathic Association leadership together for a question-and-answer session. For this year’s “Building Osteopathic Connections” the college invited a panel of Statewide Campus System hospital administrators for a question-and-answer session. Approximately 136 students participated, and many submitted questions ahead of time for the administrators. According to Colleen Kniffen, administrative assistant to Dean Jacobs and organizer of National Osteopathic Medicine Week, 21 SCS hospital administrators met with students to discuss the health care profession, medical education, managed care, internships, residencies, and other issues.

The event began with small focus groups before moving to a full panel discussion and then an informal student reception. According to Ms. Kniffen, the feedback from this event was overwhelming. She talked with about three dozen student attendees and about a dozen SCS administrators, who described the event as “informative” and “productive” and urged the college to plan a follow-up session.

MSUCOM students talk informally with SCS administrators during National Osteopathic Medicine Week.
Informatics

Medical Education in the 21st Century

To practice medicine in the twenty-first century medical students... must be given strong grounding in the use of computer technology to manage information, support patient care decisions, select treatments, and develop their abilities as life-long learners.

— Association of American Medical Colleges, 1992

by K. Friday

Everybody agrees that medical schools and medical education will look different in the 21st century. They will have to — responding as they must to the rapid social, economic, and technological changes in the healthcare profession.

“Medical students who learn the skills to effectively use computers to access and manage information will have a great advantage over those who do not,” explains John Greene, DO, associate professor in the Department of Family and Community Medicine. The question is, how can medical schools best prepare their students and faculty for the profession as it will exist in the coming decades?

Dr. Greene and Mark Notman, PhD, executive director of Educational Technology and assistant professor of osteopathic surgical specialties, would rather not leave this preparation to chance.

For some time medical educators have recognized the need to incorporate technology-based information management skills — informatics — into core medical curricula. To address this need, Drs. Notman and Greene are spearheading an effort to make sure that MSUCOM will meet the technological needs of the DOs who will graduate and practice medicine in the information age.

The two insist that informatics is not merely teaching people how to use computers, but is instead part of a larger approach to effective information management in the areas of patient care, research, and administration. According to Dr. Notman, informatics is using technology and the information it puts at one’s fingertips in the context of medical problem-solving and decision-making. Dr. Notman considers this information
and technology integral to the practice of medicine and not merely supplementary to it. Informatics should become, therefore, a standard part of medical education at MSUCOM.

After some preliminary conversations with Dean Jacobs in early 2000, Drs. Notman and Greene agreed to develop a blueprint for a medical informatics curriculum at MSUCOM.

Currently, the two lead a multidisciplinary college task force charged with assessing the college’s needs and capabilities, establishing priorities, and developing a timeline for implementing the informatics initiative. Task force members include Bruce Friedman, Terry Hagen, Mark Hodgins, Paulette Lovell, Tom Mohr, Debbie Porter, Sashi Reddy, and John Thornburg.

The Kobiljak Computer Center will play a vital role in Drs. Notman and Greene’s informatics initiative.

Other informatics-related activities underway include exploratory research in the use of handheld computers among Lansing-based third-year students in the Primary Care Ambulatory Clerkship, a survey of all fourth-year students assessing their use of handhelds, increased Web-based instruction and dissemination of course information using Blackboard’s CourseInfo and other tools, and on-going development of new computer-related resources in current courses.

The informatics initiative will also involve assessing student competencies as part of their orientation and providing training, where necessary, so all students have base-line skills upon matriculation. In addition, the informatics initiative will support faculty and course development activities and establish a development laboratory.

Drs. Greene and Notman explain that college efforts will not involve an overhaul of the existing curriculum but will instead integrate with current course goals and objectives. “Ideally, we would like to incorporate medical informatics into all four years of our curriculum,” Dr. Greene explains. As for their initial assessment of the college’s potential, they are optimistic. “The interest in informatics is increasing and there are a lot of practices at the college we can build on,” Dr. Notman explains, pointing to some 23 web-based modules already in use within the curriculum.
Crockett Technical High School

Educational Pathways

by K. Friday

MSUCOM has always been able to attract some of the best and brightest students around, and so it is no surprise that the college has forged an important, long-term partnership with Ethelene Jones Crockett Technical High School in Detroit.

Located next to the Detroit Medical Center, Crockett is committed to providing solid academic and technical training for over 1500 students in the Detroit area. In fact, its Allied Health Academy of Science and Technology could be described as a medical prep school, attracting as it does close to 500 additional students from 27 area high schools and offering a wide variety of vocational training in a variety of health care professions.

Recognizing that many of the Allied Health Academy students were already interested in possible careers in healthcare, representatives from MSUCOM — including Sandy Kilbourn, MA, director of External Programs; Margaret Aguwa, DO, MPH, chairperson of the Department of Family and Community Medicine; and William Falls, DO, associate dean of Student Services — visited Crockett last May to give a general introduction to osteopathic medicine. According to Ms. Kilbourn, early exposure is important for high school students because the osteopathic profession still lacks a certain degree of visibility. "In some ways osteopathic medicine is still a minority profession, so it becomes crucial to reach out to young, talented students who might otherwise overlook this as a career choice," she explained.

However, after the initial presentation, it became clear that the students' interest was piqued by what they had learned. Both schools felt that the relationship should continue, and Dr. Aguwa took the lead in planning a series of presentations and mentoring opportunities for interested students from Crockett.

In July these plans culminated in a ten-day mini-medical school program offered by MSUCOM for ten students selected by Crockett. Led by Dr. Aguwa and Dr. Norma Baptista (director of Minority Student Services), facilitated
"I had a great experience working with the people from MSUCOM. They all were nice and greeted us with open arms. I noticed that these people were some of the big names from MSUCOM taking time out of their busy schedule to come and talk to us." — Rondy Goins, Crockett

by various faculty and students from MSUCOM, and organized by MSUCOM students Rashanda Brown and Angela Dawson, the mini-medical school came to Crockett to introduce the fundamentals of osteopathic medicine. "It seemed like everybody from the college shared and participated in this, from first-year medical students to Dean Jacobs," Ms. Dawson said.

The Crockett students learned about anatomy, sports medicine, gerontology, osteopathic physical examinations and doctor-patient relationships. They toured two Detroit area hospitals. They were also paired with "big sib" student mentors from MSUCOM and given a tour of MSU's College of Osteopathic Medicine.

The Crockett students were clearly excited by what they saw and learned. "Dr. Aguwa and everybody from MSU really made the students feel special," said Louise Faye Joiner, the curriculum head at the Allied Health Academy of Science and Technology. According to high school student Da'Vina Ellens, "The MSU staff and students came to Crockett every morning excited about teaching us. The MSU students came and shared their personal stories about college, medical school, and anything else we wanted to know."

Dr. Aguwa explained that the goal of the program was to partner with a school that has demonstrated success in training minorities, introduce them to osteopathic medicine, encourage them to enter the field of healthcare, and help grow a pool of possible minority applicants. However, she and others involved in the program are adamant that the relationship with Crockett will continue and is not contingent on the students ever applying to MSUCOM. "I think the importance of the program was to teach the students that teamwork and mentorship are very important, regardless of what the students decide to do," Dr. Aguwa explained. Ms. Dawson agreed: "Dr. Aguwa set the flavor very early that this was a very open-door policy. We didn't emphasize that this is what you have to do."

In the meantime, the college is taking steps to continue and expand its partnership with Crockett. The college will be an important resource for a new sports medicine program offered through Crockett's Allied Health Academy. Plans are also in place for an expanded mentor program that will pair students with DOs in the Detroit area and allow the students to earn high school credit by working in the DO clinics. Dr. Aguwa says that in February 2001 the college will give more presentations at Crockett in honor of Black History Month and that this summer she hopes to offer an expanded version of the mini-medical school for a new group of Crockett students.

The Crockett program has brought together a wide array of administrators, physicians, teachers, and students from several institutions. Drs. Aguwa and Baptista emphasize that none of this would have been possible without the time, effort, and support of numerous people here on campus and in the Detroit area. Some of these include Edward N. Hodges III, JD, of Botsford General Hospital; MSUCOM student Mr. Eric Hawkins; Bill Pintal, DO, Joseph Vorro, PhD, and Taylor Scott, DO, all from the COM Department of Family and Community Medicine, and JoAnn Neal, EdD, Ms. Bettye Berry, and Ms. Louise Faye Joiner, all of Crockett.
SHARING HEALTH PRACTICES
in Rural Zimbabwe

by Jason Mui

Barbara Sparks, MSN of obstetrics and gynecology, has done research in Zimbabwe for more than a decade. She has done three separate studies that provide data on health issues for the sub-Saharan country, which is currently embroiled in economic strife and social unrest. Ms. Sparks said, “One of the things we can do to be of help to people in developing countries is to assist them with research and to continue to examine health issues that need to be addressed. The more information about health and illness that is available, the more effectively they can appropriate limited resources.”

The first study was done in Zimbabwe during a period in which the country was establishing new health clinics in its rural areas. Ms. Sparks observed traditional birth attendants who attended births in rural villages. In some cases traditional birthing customs conflicted with western medical practices used in clinics. Patients still insisted on using traditional practices, like the use of herbs, to speed up labor. Many of the pregnant women found it difficult to become acclimated to different beliefs and practices used by formally trained nurse midwives in clinics—including different labor positions and the presence of strangers while giving birth. In one extreme case Sparks recounted, “One of the most telling things one woman ever said to me was ‘when you go to clinic to deliver a baby you leave your culture at the doorstep.’” However, many western practices, like the use of soap to wash hands and the use of alcohol instead of ashes to dress the severed umbilical cord, were readily accepted.

The second study was done on hypertension in rural Zimbabwean women. First, Ms. Sparks and her research team studied the effects of economic development on blood pressure levels in the population. Also, they wanted to learn the extent of pregnancy-related hypertension in rural women. The study examined subjects in three different socio-economic regions. The first group lived in communal lands, which are farming areas with relatively low population density and development. Next studied were commercial farms in medium population density areas and a more structured lifestyle. The third studied were mining communities where the traditional ways of life had been more or less replaced by western ways of living. Instead of the less structured lifestyles and low fat diets of the communal lands, the husbands worked stressful jobs in the mines and the wives took care of the home. These subjects’ diets included more fat, salt, and meat. While the study found low levels of hypertension in pregnancy in all three strata, the incidence of high blood pressure in non-pregnant women increased with the higher degree of development in each stratum.

The third study focused on urban Zimbabwe. The research was done in the city of Marondera. The researchers looked at over 700 men and non-pregnant women to determine what factors
contribute to hypertension. Measurements of blood pressure were taken along with body mass index and age. The researchers speculated that there may be an increase of dietary salt, alcohol, and tobacco in the diets of urban people compared to rural people. Also, as people got older and heavier, the amount of high blood pressure increased. While there was no definitive reason for the high blood pressure observed, these factors are all possible contributors to the disease.

The research was ultimately done in order to help the people of Zimbabwe. All of the research was done in collaboration with local Zimbabwean nurses, doctors, regional ministries of health, and University of Zimbabwe researchers. One of the most important aspects of the research was to return to Zimbabwe once the research results were analyzed and share the results with local health providers and administrators. Local Zimbabweans were eager to help with the research. Ms. Sparks said that, “The people there were so willing to do whatever was needed to access health services.” She also recalled that many took part in the studies despite having to travel far distances by foot. This commitment to health issues and the hospitality of the people of Zimbabwe helped emphasize the importance and immediacy of the research.

Likewise, Ms. Spark’s reasoning for choosing to devote her time in Zimbabwe was just as earnest. According to her, “One of our missions at Michigan State, as a land grant university, is to provide help and service to folks outside our university community—a community that President McPherson has said should be international in scope. Our colleagues in Zimbabwe were glad for our help with this research because they are incredibly busy with clinical responsibilities. Hopefully, we were able to make a contribution—which is always the best feeling.” The data from all of the research was given to the regional directors of health, and by all accounts the officials were pleased to have the information to integrate into the country’s health system.

Ed. Note—Jason Son Mui writes for the college on a volunteer basis under a program established by MSUCOM’s Martin Furey and Richard Hatfield of the MSU Service Learning Center.

Ms. Sparks holds a child after a hypertension clinic screening.
THE COLLEGE OF OSTEOPATHIC MEDICINE PRESENTS

Slavery to Freedom
An American Odyssey

VISITING MINORITY FACULTY LECTURE SERIES
FEBRUARY 1 THROUGH 22, 2001

The intent of the MSU Visiting Minority Faculty Program is to provide opportunities for interaction with minority scholars from education, business, industry and government to spend time on a visiting-appointment basis at Michigan State University.

The MSU College of Osteopathic Medicine is extremely pleased to host these notable scholars who, in addition to making the presentations advertised in this publication, will also be dedicating time to teaching MSU students on campus.

The college expresses its appreciation to the following for their support:
- MSU Office of the Provost
- MSU Assistant Provost and Assistant Vice President for Academic Human Resources
- MSU Vice President for Student Affairs and Services
- MSU Office of Minority Student Affairs
- MSU Office of Affirmative Action, Compliance and Monitoring
- Black Faculty, Staff and Administrators Association
- MSU Black History Committee
- William Anderson, DO.

All activities are free of charge.
To make your reservation or for more information please call 517-432-4979
The Rev. Dr. Charles G. Adams  
**Pastor, Hartford Memorial Baptist Church, Detroit, Michigan**  

"Black Economic Development / Empowerment"

Reverend Adams is a graduate of Fisk and Harvard Universities, where he frequently lectures. He has been guest preacher at many churches and synagogues, including the historic Riverside Church in New York City. He has addressed the United Nations, the General Assembly for the World Council of Churches, and the National Council of Churches. He is Past-President of the Progressives National Baptist Convention and has served as president of the Detroit Chapter of the NAACP. He is well known as a dynamic preacher and an innovative leader in faith-based economic development.

February 1, 2001, 4:00 P.M., Big Ten B, Kellogg Center for Continuing Education. Reception Following.

The Rev. Dr. Wyatt T. Walker  
**Senior Pastor of The Canaan Baptist Church of Christ, Harlem, New York**  

"Roots, Musically Speaking"

Reverend Walker has an extensive record in civil rights dating back to 1960, when he became the Executive Director of the Southern Christian Leadership Conference founded by Martin Luther King Jr. He is widely traveled (97 countries) and is a prolific author and essayist. Dubbed the "Harlem Renaissance Man," Dr. Walker is the nation's foremost authority on the music of the African American religious experience and its influence on the freedom movement. No one has written as much or as carefully on the "meter music" of the African American church as Dr. Walker.

February 8, 2001, 4:00 P.M., Meeting Rooms B,C,D Mezzanine Level, Breslin Center (enter through south ticket door). Reception Following.

The Rev. Dr. Joseph Lowery  
**Co-Founder and President Emeritus, Southern Christian Leadership Conference (SCLC), Founded with Dr. Martin Luther King Jr.**  

"Profiling the Impact of the Black Presence in America"

Reverend Dr. Joseph E. Lowery is co-founder and President Emeritus of the Southern Christian Leadership Conference, whose first president was Martin Luther King Jr. Dr. Lowery served as Vice President and Board Chairman of the SCLC until 1977, when he was unanimously elected its third president. He served 21 years as president from August, 1977 to January, 1998. For many years, he was listed among Ebony's 100 most influential African Americans and was twice named by Ebony as one of the 15 greatest Black preachers. He was the first recipient of Boston University's Martin Luther King Award. In September, 1999, Wayne State University named him the first recipient of the Walter Reuther Labor-Civil Rights Award. He has served three terms and is currently chairman of the National Black Leadership Forum, a consortium of major Black advocacy organizations. For 45 years, he served as pastor of United Methodist churches in Mobile, Birmingham and Atlanta. He is author of the nationally-distributed column, The Amen Corner!

February 15, 2001, 4:00 P.M., Big Ten B, Kellogg Center for Continuing Education. Reception Following.

The Rev. Dr. Otis Moss, Jr.  
**Pastor, Olivet Institutional Baptist Church, Cleveland, Ohio**  

"Transition from Slavery to Freedom"

Dr. Moss has over 35 years of direct involvement in the civil rights movement. He previously co-pastored Ebenezer Baptist Church in Atlanta, Georgia that had been pastored by Martin Luther King Jr. He currently serves as Chairman of the Board of Trustees of Morehouse College, the alma mater of Martin Luther King Jr. Dr. Moss has traveled widely and is in demand as a lecturer and preacher. He was selected twice by Ebony magazine as one of the 15 most influential preachers in America.

February 22, 2001, 4:00 P.M., Auditorium, Kellogg Center for Continuing Education. Reception Following: advocacy organizations. For 45 years, he served as pastor of United Methodist churches in Mobile, Birmingham and Atlanta. He is author of the nationally-distributed column, The Amen Corner!

February 15, 2001, 4:00 P.M., Big Ten B, Kellogg Center for Continuing Education. Reception Following.
MSUCOM Shoe Project

Heart and Sole

by K. Friday

Ordinary people can make a difference. That’s the lesson of the MSUCOM Shoe Project, Heart and Sole, a charity drive that has given new and used shoes and boots to needy children and adults on three different continents. Originally conceived by Ms. Ann Cook of the Graphic Services office here at MSUCOM, the project has collected used shoes and boots from college faculty, students, and staff as well as from area high school students; shipped shoes to Malawi, Nicaragua, and Honduras, and donated boots to the Lansing School District.

The majority of the shoes have been sent to Malawi, where they are given to patients at the Queen Elizabeth Central Hospital in Blantyre, the base hospital of an NIH-funded study of cerebral malaria conducted by Terrie Taylor, DO, a professor of internal medicine here at MSUCOM. The Queen Elizabeth Central Hospital is a government hospital, and all services are provided free of charge. Dr. Taylor has been the director of the Blantyre Malaria Research Project since 1987 and visits the country for six months every year. With her help, the shoes are given to children suffering from malaria who have been admitted to the hospital for examination and treatment.

The project has also reached out to Matagalpa, Nicaragua, where a missionary friend of Ms. Cook runs Casa Materna, a support residence for high-risk, pregnant women. The Casa Materna residence is committed to reducing maternal and infant mortality in the region, and because many of the women there lack basic necessities, the shoes donated by the MSUCOM Shoe Project come as welcome relief.

In the summer of 1999 Hurricane Mitch ravaged Honduras, destroying homes, causing mudslides, and displacing thousands. When the University Reformed Church of East Lansing, MI sent volunteers to the region to help the locals rebuild, it sent 50 lbs. of project shoes to the area.

The project has also tried to help those closer to home. This past November it gave its donated boots to the Lansing School District’s Center for Cultural & Communication Arts Program, a program assisting low-income, high-risk immigrant children.

Despite the fact that the project has already succeeded in mailing hundreds of shoes oversees and has almost 1000 more stored in Fee Hall ready to go, Ms. Cook refuses to take credit for the project. “You don’t need to mention me in the article,” she said as we were talking about the story. “Just describe the project and the others who were involved.”

Some of those others who have quietly worked to bring the program about include Ms. Rebecca Elesesser, administrative assistant in MSUCOM’s department of internal medicine. As a project manager for Dr. Taylor’s malaria grant, Ms. Elesesser traveled to Malawi in 1998 for a week and later told Ms. Cook about Malawi and the many Malawians who remain barefoot—or who can only afford to buy cheap, poorly made shoes. Shoes may be a luxury in rural villages, but they are a definite asset for those making trips to town or attending school, and the imported shoes in Malawi are beyond the financial reach of the Malaria Project patients and their families. After their conversation, Ms. Cook resolved to do something and came up with a plan. As a graphic designer for the college, Ms.
Cook spends hours helping faculty, staff, and students develop posters and other professional presentation materials. Many of these people show their appreciation for Ms. Cook’s work by giving her small gifts. Since the MSUCOM shoe project began, Ms. Cook started asking for shoes instead. Nawal Ragheb (Class of 2000) and Jeff Mueller (Class of 1999), two students working with Dr. Taylor, received first prize from the Michigan Osteopathic Association for a scientific poster. Ann helped them design. In return, the students donated their $1,500 award to the project.

In addition to her research efforts in Malawi, Dr. Taylor has helped the project in many ways. Not only has she used her long-term presence in Malawi to distribute the shoes, but she has also used a significant amount of her own resources to ship the shoes to Africa—at first paying out of pocket and then donating $5,000 she received for winning the Gutensohn-Denslow award from the American Osteopathic Association Bureau of Research.

Ms. Cook and Dr. Taylor point to many who have contributed to this project in some way and made this charity drive a success, including Roger Haut, PhD, professor of both osteopathic surgical specialties and osteopathic manipulative medicine, who donated approximately 100 brand new running shoes, hiking boots, and work boots to the project. Dr. Haut obtained these items from Wolverine World Wide, a shoe manufacturer for whom he has conducted biomechanical and comparative research. In addition, Howell High School students collected over 600 pairs of shoes for the project.

This winter the project will ship more shoes, and it is still looking for donations to cover shipping expenses. The Graphic Services office is still accepting charitable donations of new and used shoes, and it is always looking for new charities in need of shoes. For more information, call Graphic Services at 517/432-0493.

As for Ms. Cook’s role in this project, obviously I could not honor her request for anonymity. Ms. Elsesser describes it perfectly: “This project is truly a gift from the heart, and I know of no one who has as much heart to give as Ann.”

Those who donate $30.00 or more—the cost of mailing a box of fifteen pairs of shoes—will receive a 3"x1" hand-carved wooden ebony shoe made by Hamilton Banda, a native Malawian artist. The donations go through the MSUCOM Development Office and are tax-deductible.
As a college of osteopathic medicine, MSUCOM has made a commitment not only to our students and patients but also to the long-term health of our communities. This month’s Communiqué introduces a new feature: a public health policy forum in which various members of MSUCOM’s faculty join area government and community health leaders to reflect on public health issues. In this issue, we asked our participants to identify factors that are often overlooked in the debate over insurance and prescription drug coverage.

Background: Prescription Drug Costs

As both the presidential race and the state senate races made clear this fall, insurance issues and concerns over prescription drug costs were a top priority for the electorate. When the new administration takes office, there will be continuing pressure to fulfill promises made on the campaign trail. Here are some numbers to consider: in 1998, according to the Kaiser Family Foundation, Americans spent $91 billion in prescription medications, and the total is expected to reach $243 billion in 2008. The elderly account for 13 percent of population but account for more than a third of all drug spending. While prescription drugs account for only 9 percent of all health care spending, they are now the fastest-growing segment of the national health bill.

Background: Medicare Spending and Funding

The rising costs of medical care in general threaten the solvency of the Medicare program. Medicare spending is expected to double over the next decade, even before adding a prescription drug benefit. According to the Congressional Budget Office, Medicare spending will increase from $219 billion in 2000 to $441 billion in 2010, one year before 77 million baby boomers born between 1946-1964 become eligible for Medicare. Medicare is currently funded by employers and workers — who each pay a 1.45% payroll tax on wages — by monthly premiums paid by Medicare recipients, and by general tax revenue. According to the Congressional Budget Office, in 1999 Medicare revenues were $163 billion and its expenses $212 billion, with the difference made up by general tax revenues.

Oliver W. Hayes, DO, MSHA, chairperson, Internal Medicine

Physicians have to think of populations, not just people. As Philip Greenman and I once wrote, osteopathic medicine does not fulfill its function adequately until the same perfection is within the reach of all individuals. Given this principle, we need to consider the long-term solvency of insurance programs like Medicaid and Medicare. What makes this consideration difficult, however, is that in this country it is much easier politically to create entitlements than to take them away.

As I see it, we have two pressing problems that will make programs like Medicare more expensive down the road. First, our country faces a decisive demographic shift in the ratio of workers to retirees when the baby-boomers start to retire in the next decade. This means that there will be fewer workers and less payroll taxes available for Medicare but at the same time more people eligible for Medicare benefits. Second, the types of medical costs we face as a population have also changed. Because people are living longer than there were 50-60 years ago, we are left with the responsibility to treat chronic, long-term disease.

The cost implications of this have to be thought through very carefully. The baby-boomer generation was, economically, the most productive generation ever. Will subsequent generations be able to support the continuation of these entitlement programs in their present form?
Margaret Aguwa, DO, MPH, chairperson, Family and Community Medicine

The issue of prescription drug coverage raises the larger issue of reaching out to the underinsured and the uninsured. About 12.2% of Michigan residents and 17.8% of all Americans have no health insurance. As a physician, it is frustrating at best to prescribe medications to those who often have to make a budgetary choice between life’s necessities, such as meals, and their prescriptions. In the current debates over prescription drug coverage there is a tendency not to consider the uninsured. These are primarily the working poor, hourly paid, able-bodied citizens who earn too much to be eligible for sponsored insurance like Medicaid, but cannot afford other types of health insurance. Unfortunately, those working less than 40 hours a week also are ineligible for benefits.

A need exists for the creation of innovative insurance programs that can bridge the gap between part-time, hourly work and insurance eligibility. The Ingham County Health Department has set up a unique managed care program to provide pro-rated health and prescription coverage for such indigent county residents. More efforts like these are needed statewide and possibly nationwide.

Francis A. Komara, DO, associate professor, Family and Community Medicine, geriatrics

Dr. Hayes is correct, we need to factor in coming demographic shifts in the age distribution of the population when discussing approaches to Medicare and prescription drugs. In the next 20 to 30 years the population over 65 will dramatically increase. According to the Population Report from the US Department of Commerce, between 2010 and 2030 the population aged 65 to 84 will grow 80%. This will put enormous strain on existing Medicare resources.

Because Medicare currently does not pay for prescription costs, many of the elderly must turn to private insurance. The elderly who once worked for the Big 3 automakers, for instance, will have good benefits, but not everyone can afford prescription drug coverage on their own, and paying out of pocket can become expensive. Cardiac medicine, for instance, can cost the uninsured over $100 a month in many cases.

One issue that is often not discussed are other forms of possible insurance coverages that might be more important than prescription drug coverage. Medicare does not cover, but should consider, other non-institutional forms of care like home care or other forms of assisted living care. Research has shown that these forms of care may actually prolong health among the elderly. In the long run, if these populations require less hospitalization and less expensive medications, the system could save money.

James K. Haveman, Jr., director, Michigan Department of Community Health

The Medicare program today does not cover annual physicals, vision tests, cholesterol screenings, hearing aids, prescription drugs, and other medical advances. Medicare benefits only cover 53% of the costs of health care for the average senior.

One of the major enhancements of Medicare would be to offer a prescription benefit. A prescription program, as part of Medicare, should include the option of those eligible to be part of state purchasing cooperatives, modeled after the federal health benefits program which is used for federal employees and Congress. A subsidy should be in place to pay the costs of persons up to 135% of the poverty line and then a sliding amount of support as one’s income increases. A prescription program should not tax seniors who do not spend a certain amount of money in a particular single year.

A pharmaceutical benefit would cost about $200 billion, but it should be spent prudently. I believe it must be done in concert with a comprehensive reform of health care to maximize efficiencies in the system where possible.
By Jason Mui and Kristi Friday

Welcoming the Class of 2004, the thirtieth annual Convocation ceremony was held August 25, 2000, in the Pasant Theater at the MSU Wharton Center. The venerable Philip E. Greenman, DO, FAAO, senior associate dean emeritus and professor emeritus of osteopathic manipulative medicine, addressed the audience and the newest members of the MSUCOM community. To the incoming class, Dr. Greenman described the challenges they could anticipate and the standards expected of them as students of osteopathic medicine. In his closing remarks, Dr. Greenman challenged the future DOs to live up to their calling: make sure, he told them, "when you retire you can say that 'I made a difference.'"

After Dr. Greenman's address, the Walter F. Patenge Medals of Public Service were awarded. Floyd T. Meachum, DO, FACOP, and Kenneth C. Taylor, DO, received medals to honor them as osteopathic physicians who exemplify the highest standards of family medicine practice. Dr. Meachum is a practicing physician at Manor Medical Clinics in Detroit, while Dr. Taylor developed a family practice in Traverse City and held numerous staff positions at the Traverse City Osteopathic Hospital.

Although he was not present at the ceremony, former Michigan Governor William G. Milliken was honored with a medal for his leadership and contributions to public policy and public welfare.

Michael I. Opirari, DO, was honored as a hospital administrator who exemplifies the highest standards of humane, concerned administration and public involvement. Dr. Opirari is the executive vice president and chief medical officer of the Detroit Osteopathic Hospital Corporation.

After the medal presentations, the Class of 2004 were given their white coats and officially welcomed into the College of Osteopathic Medicine. The White Coat Ceremony celebrates each student's choice of a career in osteopathic medicine and encourages him or her to accept the obligations incumbent with that choice. As Dr. Greenman exhorted in his convocation address, the students of the incoming Class of 2004, like all students before them, will be expected to dedicate their lives to providing competent medical service with compassion and respect for human dignity.

Ed. Note—Jason Sun Mui writes for the college on a volunteer basis under a program established by MSUCOM's Martin Furey and Richard Hatfield of the MSU Service Learning Center.
MOA Tackles Technology

by Dennis M. Paradis, MOA Executive Director

Throughout the thousands of years of human development, we have, as a species, learned to advance our dominance through trial and error, repetition, and setting precedent. We passed knowledge on to our children through storytelling and role modeling. Decisions were made based upon previous experience and knowing what worked and what didn’t. Unless being attacked by a saber toothed tiger, there was always time to deliberate the options and make decisions based upon “the way we always have done it.” When a visionary would present a new idea, the “wise” approach to assessing its value was to say, “I’ll believe it when I see it.”

In the last 50 years, technology and the age of global communication has changed the way we think, the way we work, and the way we make decisions. We exist in an environment of information overload. From our first waking moments until our return to slumber, we are inundated with news from a massive information infrastructure soliciting our attention. Change occurs so rapidly that ideas are obsolete before they can be tested. Not only is there no “time” to evaluate new ideas, but there are no precedents for them either. We are presented with thousands of choices each day without time or previous experience to guide many of our decisions.

In a global economy and the capacity for moon walks and nuclear annihilation, we are faced with making revolutionary changes in the manner which we now must make choices. No longer can we deliberate. We must make instantaneous decisions. We must trust and rely on our intuition and judgment. At the MOA Annual Leadership Retreat in August, MOA President Gerald Brenton, DO, said, “We either embrace technology to help us deliver quality patient care or we end up with our faces in the dirt and footprints on our backs.” Our philosophy about new ideas and technology can no long be, “I’ll believe it when I SEE it,” but rather, “When I BELIEVE it, I will see it.”

Dr. Brenton’s vision is to establish state-of-the-art technological capability as an MOA member benefit during his tenure as president. He will accomplish this objective through education and accelerating the use of computer network applications and technology. In September, the MOA successfully demonstrated the application of distance education with the cooperation of satellite sites including the Michigan Virtual University in East Lansing, the AOA in Chicago, and Munson Medical Center in Traverse City. This highly successful video conferencing “beta test” trial helped Dr. Brenton assess the feasibility of offering this technology to the entire state membership by the next annual meeting. With instant access to CME opportunities, patient referrals, convention registration, practice and component society web sites, Internet, and e-mail, MOA members can be more efficient in this turbulent practice environment. As another means of unifying the state’s membership, the president has established the goal of utilizing web-based technology as a means to bridge the gap between out-state and tri-county physicians.

Dr. Brenton is driving his agenda to disseminate technological applications to the osteopathic membership through bold experimentation and the creation of critical infrastructure. This is being accomplished through the president’s Ad-Hoc Committee on E-Technology, which is developing innovative strategies to address MOA’s technical challenges and opportunities.

The mission of the E-Tech Committee is to foster the appropriate use of computer and communications technologies to help meet the needs of the constituents of the Michigan Osteopathic Association and the profession. Goals of the E-Tech Committee include:

- Offering MOA members the opportunity to establish their own personal web page.
- Providing links from the existing MOA web site to the osteopathic hospitals in Michigan.
- Offering MOA members video conferencing capabilities for committee meetings, board meetings, etc.
- Creating an osteopathic resource database. (A collection of sites located throughout Michigan, which has the ability to participate in video conferencing.)
- Provide distance education to the membership.
- Develop members only access to the existing MOA web site.
- Employ a full-time dedicated web site person.

As summarized by Donna Moyer, DO, of Carson City, president of the Central Michigan Osteopathic Association, in a recent interview following the MOA’s leadership retreat, “Technology is already an integrated part of our daily practice. We need to understand and prepare for the changes that are ahead so we can improve our practice efficiency and focus on providing quality care to patients.”
ALUMNI IN ACTION

Promoting the Profession On-Line

by K. Friday

Nancy Resnick, DO, Class of 1989, has been around computers most of her adult life. With an electrical engineer for a father and a brother with degrees from MIT in both electrical engineering and computer science, it is safe to say that Dr. Resnick has learned a good deal of computer acumen from her family.

"It seemed like everyone in my family had a computer from as long as I can remember," Dr. Resnick says. "I even remember computers before Apple and Windows. In those days, computers didn’t have those icon interfaces everyone is used to now; you needed to know a special language just to operate them."

Continuing the family’s interest in science and technology, Dr. Resnick has combined her knowledge of computers and the Web with her practice as an osteopathic physician. She runs a family practice in Livonia and has been innovative in using technology to strengthen the patient/provider relationship.

For instance, her practice has its own Web site that provides patients with information about her clinic, updates, and her professional credentials. She also runs a Web page offering nutritional advice, including a discussion and evaluation of the high-protein paleolithic or “cave mom” diet, as she calls it.

The Web isn’t the only place where she is active. Dr. Resnick’s clinic has also streamlined the prescription process by using Palm-Pilot devices to write and fax orders directly to local pharmacies. Using Palm-Pilot devices has garnered Dr. Resnick some national attention, and this past November she was profiled in Medical Economics for pilot-testing a Palm device for ephysician.com.

Dr. Resnick says that one of her priorities is to encourage osteopathic physicians to make better use of the Web and related technologies. She points to the growing number of patients who turn to the Web for general medical advice and, sometimes, for selecting a physician. "The osteopathic profession is still a minority profession," Dr. Resnick says. "To help address this, the profession should create a consistent and strong presence on the Web."

In pursuit of these goals Dr. Resnick started her own web company, youcare.com, created http://www.youcare.com, a web-site describing the practices of several of her colleagues in the Livonia area, and launched http://www.carequery.com, a search page for finding health practitioners in the metropolitan Detroit area.

As the informatics chairperson for the Tri-County Osteopathic Associations, component societies of the Michigan Osteopathic Association, Dr. Resnick helped build a Web site and a standardized template for each of the three county associations: Wayne, Macomb, and Oakland. In an effort to build a consistent Web presence in the tri-county area, the TCOAs offer computer training and Web site design to its members, including use of the standardized template, links to other osteopathic Web sites, and use of the registered domain name, “do.org.” Dr. Resnick says that some DOs and organizations have taken advantage of the service, and she hopes that more will join them. "One of the beautiful things about the web is that it can present a unified presence for the profession at very little expense," she says.

In Memoriam: Alan Potts, DO

This past August, an important figure in the history of osteopathic medicine passed away. A true visionary and leader, former MOA President Alan M. Potts, DO, died in August after practicing medicine for several decades in Michigan. He was instrumental in establishing the Michigan State University College of Osteopathic Medicine, which is now ranked as a top ten primary care medical school in the nation.

Dr. Potts, of St. Clair, was an active member of the MOA for 59 years and served as president from 1959-60. In 1971, he was awarded the prestigious Walter F. Patenge Medal of Public Service by MSUCOM for his leadership role in Michigan and his involvement in the founding of the state’s first osteopathic medical school.

MSUCOM and the Michigan Osteopathic Association extend their sympathy to the family and friends of Dr. Potts and thank Dr. Potts for helping make Michigan a leader in medical education and osteopathic medicine.
OLD FRIENDS, NEW MEMORIES
Silverfest Alumni Weekend
by K. Friday

There is something to be cherished about a fall football weekend in the Big Ten. Maybe it's the leaves changing, the balmy weather, the aroma of tailgate barbecues, or maybe it's the thrill of a close game and the chance to see some old friends, catch up, and talk for awhile.

For these reasons, MSUCOM's Silverfest weekends keep attracting more and more alumni, students, faculty, and friends, and this September's Silverfest was no exception. Alumni—including those from the honored classes of 1975, 1980, 1985, and 1990—flocked to East Lansing for three days of education, reminiscing, and football.

The weekend kicked off Thursday with 92 golfers arriving at Forest Akers West for a tournament and raffle benefiting MSUCOM student loan funds, educational improvements, and the MSUCOM Alumni Association. This year the college was proud to have seven student teams participate—all sponsored by various COM departments and faculty.

On Friday evening it was off to the University Club, where about 150 guests danced into the night, with several parties lasting until closing at 12:30 am. On Saturday morning the Office of Continuing Medical Education ran its Fall Kaleidoscope conference for primary care providers. Forty-nine osteopathic physicians signed up to learn more about treatment and diagnostic issues related to pregnancy, osteoporosis, hypertension, and obesity. Among the faculty this fall were alumni presenters William G. Anderson II, Class of 1975, and David R. Neff, Class of 1980.

That afternoon, most of the MSUCOM crowd, numbering at times close to 400 persons, had gathered at the tailgate sponsored by Old Kent Bank. There they enjoyed hot dogs, hamburgers, fajitas, and refreshing beverages.

By 3 p.m. the humidity had risen and so had anticipation for the main event: The Spartans versus The Fighting Irish. Given the weather and the tight game, it was not a matchup for the faint of heart, but MSLI quarterback Jeff Smoker made up for two earlier mistakes with one big play, throwing a 68-yard touchdown pass to Herb Haygood with 1:48 left, lifting Michigan State to a 27-21 victory.

With the scent of leaves in the air and the roar of victory in the stands, Silverfest weekend proved to be another fine football weekend in the Big Ten.

Share in some of the excitement next fall for Silverfest 2001, September 13-15, celebrating the silver anniversary of the Class of 1976, as well as reunions for the classes of 1981, 1986, and 1991!!! See Michigan State take on Missouri. For reservations and more details contact Sandy Kilbourn, External Programs, at kilbourn@msu.edu or Kim Camp, External Programs, at camp@msu.edu.

Top Row: Dr. Ward and family ready for the Osteopathic Open; fun was had by all at the Silverfest tailgate; members of a faculty and student golf team.

Bottom Row: Tailgate sponsor Old Kent; COM students enjoying the golf outing.
A New Look for the Web

MSUCOM Web pages

Web-surfers around the college have noticed a dramatic change in MSUCOM's Web pages in the past year or so. There is a new logo and banner, a pleasing color coordination, and a simple and consistent menu bar. The homepage has also become a "What's New?" site for the college, providing links to the news, images, and features from the osteopathic community here at Michigan State University.

Behind the scenes, all of this is made possible by a cooperative effort between the Office of Educational Technology and the Office of Public Relations. The Office of Educational Technology provides the infrastructure—maintaining the server space, determining the technical parameters of the homepages, etc.—while the Office of Public Relations has created the cosmetic look and feel of the pages and supplied a good deal of their content.

On the cosmetic side, this design and layout is essentially the work of one of the college's osteopathic medical students and graduate assistants, Mr. Christopher Beal, Class of 2002. Mr. Beal got his start in Web design when he became the chairperson of the International Health Program for the national Student Osteopathic Medicine Association in 1997. As the chairperson, he wanted to find an easy way to disseminate information on international rotations and other career opportunities for osteopathic students. Instead of publishing and mailing, at great expense, the information to organization members, Mr. Beal decided to publish the information on the Web—even though he had no experience working with HTML, the computer language used to construct Web pages. Like many Web designers in the field, however, Chris was able to teach himself what he needed to learn. A link to this project can be found on the MSU SOMA homepage at www.msu.edu/~SOMA/hip.

On the basis of his success with SOMA, Mr. Beal joined the MSUCOM Office of Public Relations as the college's Web editor and began the daunting task of revising, reorganizing, and updating the Web site for the college. With the help of Ms. Ann Cook of Graphic Services, Mr. Beal rebuilt the homepage and designed a college template that can be used—for a consistent design and layout—by any department or unit in the college. On several occasions Mr. Beal personally set up unit Web pages. One of the first he built was for Student Services, a site for students that condenses over 90 pages of information and is particularly helpful for third and fourth-year students who spend most of their time off campus.

Mr. Beal is excited about the role the Web is now playing at MSUCOM. "It's been fun to have college-wide acceptance and use of the Web," he says. "People check it frequently, submit updates, and want new pages built all the time."

Now that the college Web site is up and running, Mr. Beal says that other features can be developed. He says plans are now in place to work with External Programs to develop an on-line database for alumni updates and information. Mr. Beal also hopes that one day MSUCOM's museum artifacts will be placed on-line, giving those outside the college the opportunity to view and learn more about the history of osteopathic medicine.

As for Mr. Beal's immediate future, he's immersed himself in his third-year clerkship—eating, drinking, and sleeping medicine. If that isn't enough, he also has one additional responsibility: helping his father get on-line. With a smile, Mr. Beal says that this could prove to be his biggest technical challenge yet.

Visit Christopher Beal on-line at www.msu.edu/~bealchri
### February

1-22  
MSU Visiting Minority Faculty Lecture Series. Hosted by MSUCOM. The college proudly welcomes four distinguished leaders from the civil rights movement to the campus of Michigan State University. All activities are free of charge. To make your reservation or for more information please call external programs at 517-432-4979.

24  
3rd Annual TRI-CITY Primary Care Update. Bavarian Lodge Inn, Frankenmuth. 6 hours of Category IA credit. Call CME at (517) 353-9714 or (800) 437-0001 or visit www.com.msu.edu/cme

### March

3-10  
Seminar in the Sun. Playacar, Mexico. Sponsored by the MSUCOM Alumni Association. 20 hours of AOA Category IA credit. Make your reservations now by calling Kim Camp at 877-853-3448 tollfree or 517-432-4979.

3-7  
Muscle Energy: Level I. Windmill Inn, Tucson, AR. 40 hours Category IA. Tuition is $1250, $900 for residents and interns. Call CME at (517) 353-9714 or (800) 437-0001 or visit www.com.msu.edu/cme

12-15  
Manual Medicine Related to Sports & Injuries to the Extremities. Windmill Inn, Tucson, AR. 24 hours Category IA credit. Tuition is $750, $450 for residents and interns. Call CME at (517) 353-9714 or (800) 437-0001 or visit www.com.msu.edu/cme

### April

18-22  
Principles of Manual Medicine. Kellogg Center, East Lansing. 40 hours Category IA credit. Tuition is $1250, $900 for residents and interns. Call CME at (517) 353-9714 or (800) 437-0001 or visit www.com.msu.edu/cme

27-29  
Integrated Neuromuscular and Myofascial Release: Level I. Kellogg Center, East Lansing. 24 hours Category IA credit. Tuition is $750, $450 for residents and interns. Call CME at (517) 353-9714 or (800) 437-0001 or visit www.com.msu.edu/cme

### May

11-12  

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For a complete listing of MSUCOM events check out our Web calendar: http://www.com.msu.edu/calendar
Save the Date

Upcoming Alumni Events

SILVERFEST ALUMNI WEEKEND
Wednesday, September 12, to Saturday, September 15, 2001
East Lansing, Michigan
Weekend Activities Include: Wednesday Osteopathic Open Golf Tournament, Friday evening dinner/dance, Saturday CME course, Saturday Pre-game tailgate and MSU vs. Missouri Football game

SEMINAR IN THE SUN
Saturday, March 3, to Saturday, March 10, 2001
Playa del Carmen, Mexico
Sponsored by the College of Osteopathic Medicine Alumni Association
20 hours of AOA Category 1 credit

For further information, please contact Kim Camp, External Programs, camp@msu.edu or log on at www.com.msu.edu

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