WE'RE DOING WHAT
WE DO BEST
IN YOUR BACKYARD AND
ACROSS THE STATE.
Since our inception, MSUCOM has had a mandate to produce the physicians that Michigan most needs. We successfully recruit, nurture, and encourage in-state residents to attend our college, and we retain fully two-thirds (more than any other Michigan medical school) of them as alumni practitioners in the state.

But, as we all know, medical education requires of our students nearly total commitment and discipline over an extended period of time.

To maintain this focus, it’s important that our students not be distracted by the high financial burden of their education. Of our 2011 graduates, only 13 were debt-free. The 171 paying in-state tuition had average debt loads of $192,555; the nine paying nonresident tuition owed an average of $269,010. Because MSUCOM does not establish its own tuition rate, there is little we can do to lower the cost. But we can, on behalf of our students, continue to urge the development of scholarships and low-cost loans to assist them.

Also because of our commitment to Michigan, we maintain programs that identify intelligent young people in medically underserved rural and urban settings in our state – those who are most likely to be competitive for admission to our college, to successfully graduate, and to return to the communities that most need them. These individuals, often economically disadvantaged, will require even more financial support than the average.

I would urge our faculty, staff, alumni, clinical faculty and friends of our college to contribute to one of the many scholarship endowments we have developed, or if you have the resources, to begin one of your own, perhaps in honor of someone in your life who helped you to get that necessary step up. Investing in one of these remarkable students provides all of us, especially those in Michigan, an inestimable return.

William D. Strampel, D.O., Dean

**ON THE COVER:** MSUCOM students from all three sites participated on this year’s “Greening of Detroit” – an annual day of volunteerism where members of the community spruce up their neighborhoods collecting trash, planting gardens and other beautification projects. Such college involvement in this and other activities across the state contributes to the prosperity of state residents, their quality of life and sets students up for a lifetime of serving their communities.
Filters Do Not Lower Mortality Rate in Most Embolism Cases

by Jason Cody

A filter used to block clots from passing from the veins in the legs to the arteries of the lung does not improve mortality rates for most patients suffering a pulmonary embolism. However, if a patient is unstable – in shock or requires a ventilator – the filters can save lives.

Furthermore, for unstable patients with a pulmonary embolism, it is crucial they receive clot-dissolving medications known as thrombolytic therapy.

The findings come from a set of three research articles on pulmonary embolism treatment published by MSUCOM’s Paul Stein in the May edition of The American Journal of Medicine. The findings are based on a study of more than two million patients suffering from the sometimes deadly clots that travel to the lungs and block arteries.

Stein said the studies provide clearer guidance on what treatments are most effective for patients, specifically in regard to vena cava filters and thrombolytic therapy.

“There has been an increase in the use of vena cava filters in the past several years for patients who arrive at a hospital suffering from a pulmonary embolism,” said Stein, a professor in the Department of Osteopathic Medical Specialties (OMS) and also director of research at St. Mary Mercy Hospital in Livonia, Michigan.

“But it appears the vast majority of filters that are placed in patients with pulmonary embolism may not reduce mortality.”

However, he stressed that for the small proportion of patients who arrive at a hospital in an unstable condition, the data suggest mortality can be greatly reduced with a filter.

“These studies provide strong evidence on when filters reduce mortality and when they will not,’’ said Stein, who worked on the project with Gary Willyerd, associate dean for MSUCOM at the Detroit Medical Center, and Fadi Matta, associate professor of OMS. “Only a small percentage of patients suffering from a pulmonary embolism are in shock or in need of ventilation support, and therefore only a small proportion need a filter.”

Stein said for unstable patients it is vital that in addition to using a filter, they receive thrombolytic therapy, which is much less of a risk than the surgical removal of a clot known as an embolectomy.

“Only about a third of unstable patients receive thrombolytic therapy,” he said. “The reason may be doctors are afraid that patients will suffer from excessive bleeding. But the data show thrombolytic therapy would save lives if used more frequently.”

As for an embolectomy, Stein’s team found that in most surgical centers, unless the clinicians are highly specialized and experienced, the mortality rate is high. In most hands, he said, thrombolytic therapy would save more lives.

The findings were from a nationwide government database, the Nationwide Inpatient Sample, and included data on more than two million patients who suffered a pulmonary embolism between 1999 and 2008.
An Osteopathic Tradition: Mentoring

by Craig Reed

Clinical faculty provide a foundation of experience and opportunities for our medical students to hone their skills and apply what they’ve learned. MSUCOM currently has more than 3,300 such volunteers in its ranks. They are a diverse group with varying backgrounds as well as teaching styles, yet they are united in their commitment to pay it forward.

GRACE GIBBS

It is rare for physicians to practice in two very different fields of medicine simultaneously as Grace Gibbs does. As part of the National Guard, she works as a flight surgeon in internal medicine, but in her civilian life, she’s an OB/GYN surgeon.

“I originally joined the Air Force 28 years ago so I could afford to go to medical school,” said Gibbs who has been on several deployments to the Middle East. “I love primary care, but I also love surgery. This way I get to do both.”

Before she deploys overseas, her OB/GYN patients often express support for her. “My last deployment was a more risky assignment. When my patients here found out, some of them sent me gifts such as little angels or a good luck charm one of their family members carried while deployed – to help keep me safe. It was very touching.”

No matter which hat Gibbs is wearing, she’s committed to teaching medical students as well as interns and residents. “I just love teaching,” she said. “It keeps me on my toes. If they ask a challenging question, it forces me to find the answer. I think it’s important to give back. There is something very rewarding when you see that light in their eyes when they get it.”

JOSEPH NAUGHTON

Joseph Naughton, ‘89 alumnus, strives to get our students memorizing less and thinking more. “When we work on clinical skills, there is more than the standard way to perform an examination,” he said. “Some patients can’t be examined that way because of deformities, their weight, or other things. A doctor may need to think outside the box to accomplish his/her goal. If students simply memorize what they are taught, they only know how to handle that one situation. If you have them think, they’ll be able to adapt.”

Naughton’s patients play an important role in honing his students’ critical thinking skills. “I try to get real patients into the classroom – some of whom have interesting physical findings such as mechanical heart valves or cerebral palsy, for example,” he said. “I bring in the patient and ask the students to find out what is going on with him or her. It’s a good experience for them.”

Being a good role model for students is a priority for Naughton. “There’s a lot of negativity in the press and media about medicine and about physicians,” he said. “Our students need to shadow physicians who are passionate about osteopathic medicine and who can tell the students just how fulfilling and great our profession is. One of these days, these students may be taking care of me or someone I care about. I want to make certain they are the best physicians they can possibly be.”
A Positive Feedback Loop

by Craig Reed

A recent study in The Journal of the American Medical Association estimates $910 billion, 34% of all dollars spent on healthcare in the U.S., is wasted annually through a variety of inefficiencies, including lack of coordination of care, fraud, and overly complex billing procedures – just to name a few. David Jadwin, Class of ’83, has developed an innovative external review system to help address one inefficiency: the overtreatment of patients.

“No one is doing an adequate job reviewing how each patient is treated,” said Jadwin. “Doctors don’t feel comfortable critiquing each other and hospital internal reviews are not necessarily unbiased. We’ve developed a national peer-review network which allows patient services to be reviewed in an objective, de-identified way.”

The system, which allows both electronic medical records and paper records to be reviewed, captures and consolidates key patient chart information. A physician reviewer can then evaluate the de-identified information quickly, yet provide feedback to the healthcare provider.

“You can’t tell a doctor how to practice medicine, but you can provide feedback,” said Jadwin. “If you tell a surgeon ‘you use 1.6 more units of blood than the national average,’ they will rationalize that their patients are more challenging in some way. On the other hand, if you tell that same surgeon ‘27% of the blood transfusions you perform are unnecessary, don’t you agree?’ you have provided more objective data for the surgeon to consider.”

Jadwin and his team currently use their system to evaluate blood-related services within several hospitals. “We have demonstrated that up to 50% of blood transfusions performed in these hospitals are unhelpful to the patient. The average chart we reviewed had $2,000-$3,000 of unnecessary costs related to blood usage,” said Jadwin. “It’s worth finding problems like these through greater transparency so you can reduce unneeded expenses and improve overall care.”

RICHARD SANTUCCI

When Richard Santucci became a reconstructive urologist, he chose to join a practice where medical students, interns, residents and fellows would be working regularly with him and his partner physicians. “Our plan from the beginning was to have a teaching and research component in our work. We might teach a resident a procedure, but then we might also mentor them in a research effort so they learn how to do it themselves,” said Santucci. “Because of this focus, we don’t function properly unless we’re educating others.”

Santucci and his peers currently have 17 residents and two fellows – in addition to the medical students that regularly come into the office.

“We customize rotations for medical students based on how strongly they are interested in our field. If they know they want to be urologists, we conduct a two-way interview while we’re teaching them so we’re watching them closely to see if we’d want them as a resident. At the same time, they are learning how good of a fit our specialty is for them.”

Urology residencies are highly competitive, but Santucci has some advice to give current students an edge. “Start early. It’s probably best to decide to pursue this specialty during your third year,” he said. “Make certain your board scores are above the 80th percentile, and it always helps to get some research under your belt as well.”
Hands-on approach for patients with pulmonary disease

by Jason Cody

Researchers at MSU are working to show how a noninvasive, drug-free form of hands-on medical care can help patients with chronic obstructive pulmonary disease improve their breathing.

The team from MSUCOM will apply four osteopathic manipulative treatments to a group of patients with moderate to severe chronic obstructive pulmonary disease (COPD). One of the most common lung diseases, COPD typically manifests as chronic bronchitis (a long-term cough with mucus) or emphysema (destruction of the lungs over time).

The goal, said lead researcher and associate professor Sherman Gorbis, is to attempt to determine the biochemical changes in patients’ blood following osteopathic manipulation.

Though the techniques can be used to alleviate pain, restore range of motion and enhance the immune system, Gorbis said, much of the evidence of the treatments’ success has been anecdotal.

“That’s what makes this project exciting,” Gorbis said. “This will be one of the first studies to attempt to correlate treatment to pulmonary function and biochemical markers.

“If we can demonstrate that certain biochemical markers are enhanced with osteopathic manipulative treatment and show patients have increased pulmonary function, this could become a powerful teaching tool.”

The study is being paid for with a nearly $100,000, two-year grant from the American Osteopathic Association in partnership with the Osteopathic Heritage Foundation.

The research team will recruit patients who have enrolled in McLaren-Greater Lansing Hospital’s pulmonary rehabilitation program. As part of the trial, one group will undergo the osteopathic treatments, a second group will undergo a “sham treatment” that is hands-on but does not include manipulation and a third group will receive only the protocol normally part of the rehabilitation program with no hands-on treatment.

As patients join the trial, which will last 12 weeks for each enrollee, they will have blood drawn every two weeks. Those draws will be analyzed and measured. About 60 patients will take part over the two-year trial.

“By learning if certain biomarkers in the blood and plasma are enhanced in the group receiving the manipulation treatment, we hope to identify the physiological changes occurring among the patients,” said Gorbis, who noted patients also will undergo exercise tolerance tests and complete questionnaires during the trial.

“While medication helps, there is no cure for COPD. But if we can improve the breathing process, and show how we are doing it, we can improve the quality of life of these patients.”

A successful pilot project will allow the team to seek funding from the National Institutes of Health to recruit larger numbers of patients in a multi-center trial.

The Project Team - Front row: Kerry Melenovsky, fourth-year student; William Pintal, faculty emeritus; Patrick Salow, COO, McLaren Greater Lansing. Back row: Sherman Gorbis, faculty; Donald Sefcik, associate dean; Patty D’Valentine, supervisor of Cardiopulmonary Diagnostics and Pulmonary Rehabilitation, McLaren Greater Lansing; A. Daniel Jones and John Wang, MSU biochemists, and third-year student Stacy Luther. Absent: Aaron Bohrer, general internist, McLaren Greater Lansing.
New HIV Registry to Help Answer Key Questions

by Jason Cody

A new community-based HIV/AIDS registry, one of the first in the nation to include patients from rural areas, will provide a unique opportunity to find answers to myriad medical questions, from the impact of drugs such as marijuana on the virus to why some patients naturally ward off the disease.

The registry is being created by an infectious disease team led by MSUCOM’s Peter Gulick, associate professor of osteopathic medical specialties, who has studied HIV for decades and operates three clinics with more than 700 patients.

“Despite some notable successes in recent years, there still is a critical need to address the multiple problems that afflict all HIV infected populations,” Gulick said. “While there are many HIV registries across the nation, almost all are university-based in urban settings, providing patient information that is not always diverse or representative, which can limit progress.”

Research of HIV patients in rural areas is lacking, said Linda Dale, also with the college and a member of Gulick’s team. Additionally, there is a need to study the use of drugs such as marijuana in patients in various settings.

The new registry will draw patients from Gulick’s clinic in mid-Michigan, as well as clinics in the Saginaw area and northern lower Michigan. Patient consents are being accumulated and a database soon will be finalized.

“The registry will help us identify groups of HIV patients who have specific characteristics, allowing researchers to investigate populations of patients not previously adequately studied,” Dale said.

It will capture not only biological data from patients but socioeconomic characteristics, too, creating an epidemiological treasure trove for researchers. Already, several MSU researchers have expressed interest in setting up projects.

“Using all resources the university offers, we plan to develop an HIV-focused clinical, behavioral and basic discovery research program which translates into the improved health of patients,” Gulick said.

“This is the heart of clinical translational research.”

Viaduct to Medical School

by Craig Reed

Since 2009, MSUCOM and MSU’s Public Health Program have offered a small number of medical school applicants an opportunity to join the Bridge Program, where participants pursue a master’s in public health prior to starting their first year of medical school. The program provides an alternative route into the osteopathic college for talented applicants from medically underserved areas who meet our admission qualifications. Rafael Marinez, assistant to the dean for multicultural advancement, is very pleased with how successful the program has been. “We’ve had a total of 38 students participate,” he said. “Everyone who has decided to continue on to medical school at MSUCOM has done well academically.”

Bridge Program participants gain more than a chance to attend medical school, they learn about community wellness.

“The program has helped me gain perspective on population-based medicine,” said first-year student Josu Zubizarreta. “While in the program, I also took some elective courses in anatomy, pharmacology and biomechanics to better prepare myself for medical school. I also traveled to Salvador, Brazil, as part of my class work. After learning about Brazilian public health and their healthcare system, I’m even more excited to be joining the medical field.”

“My family is from Sudan, a country that is way behind in public health and medicine,” said first-year student Gasim Bella. “A lot of universal precautions we take for granted are not used there. I know I can help since I know the language as well as the culture. Public health is an essential part of medicine in my opinion. I expect the way I’ll treat patients will be different thanks to this additional knowledge.”

“I completed the Bridge Program and my M.P.H. in one year which was grueling, but it taught me a lot about discipline. Without the discipline I learned from the program, I don’t know if I would be doing as well in medical school as I am now,” said second-year student Jennifer Delongpre. “As a physician, you help individuals, but if you know how to develop public health programs, you can affect thousands. That’s my goal – to improve health beyond the patients that come to my office.”
Welcome to the Osteopathic Profession

by Craig Reed

Students, families, faculty and staff gathered on June 15 at the Wharton Center for MSUCOM’s 42nd annual Convocation and White Coat Ceremony. The ceremony marks the beginning of students’ medical education and career. MSUCOM faculty ceremonially place the white coat – symbolic of the medical profession – on each entering first-year student. The Class of 2016 comprises 315 osteopathic students, including 20 from Canada thanks to an initiative with the Ontario Osteopathic Association and Lambton College to increase the number of osteopathic physicians serving in our northern neighbor. Currently, Canada does not have an osteopathic medical school of its own.

Dean William Strampel, D.O., welcomed the incoming students and their family and friends. Spencer Dickson, R.N., M.H.Sc., dean of the Lambton College School of Health Sciences, explained the growing relationship between MSUCOM and his college. David Fiddler, D.O., president of the Ontario Osteopathic Association, shared the history of osteopathic medicine in Canada and his hopes for the future – noting that the number of Canadian students in this incoming class is more than the total number of practicing D.O.s in all the providences of his country. Edward Canfield, D.O., president of the Michigan Osteopathic Association, emphasized the importance of advocacy within the osteopathic profession, and second-year student Kegan Rummel, president of the MSUCOM Student Government Association, offered his advice on how the incoming student can make the most of their medical experience.

Also during the ceremony, 28 new members of the Osteopathic Medical Scholars Program were recognized. These are entering undergraduates to MSU who wish to enter the field of medicine. The program emphasizes academic excellence through a solid liberal arts education, opportunities for community service and exposure to osteopathic principles and philosophy.

The Class of 2016 recited the osteopathic oath as part of their convocation ceremony.
When Students Inspire Students

Keshav Grover (left) and Brandon Trivax (right) travel to high schools and undergraduate universities across the state to educate students about the osteopathic profession.

by Craig Reed

While medical students are in the early phases of their journey toward becoming physicians, in the eyes of high school and undergraduate students, they are role models for how to pursue an aspiration. “I have gone back to my old high school, Detroit Country Day School, during their Career Day to talk to seniors and juniors about MSUCOM, osteopathic medicine, and the whole process of applying and attending medical school,” said third-year student Keshav Grover. “I have also helped give tours of MSUCOM facilities and explained the opportunities D.O.s have both here and abroad. A lot of those interested in medicine apply only to M.D. schools and don’t realize MSUCOM and other osteopathic institutions can give them a top-notch medical education as well.”

Second-year student Brandon Trivax works closely with recruiters to spread the word about osteopathic medicine and inspire young minds to pursue their passions. “I attended Walled Lake Western High School, and have spent several years coaching their lacrosse teams. I like helping students achieve their goals and take whatever their dreams are and make them into reality,” said Trivax. “There’s a drive to go back and see them – especially the ones I helped coach – and support them. It’s important to connect back with your roots and do what you can to help. Nowadays, that means I’m answering their questions about osteopathic medicine, the medical school experience, and my interests both in and outside the field of medicine.”

“Even though we have a lot of D.O.s practicing in the state, many high school and undergraduate students are unfamiliar with osteopathic medicine as a career option,” said recruiter Katie Molina. “We want to make certain these students are educated on the opportunities they have to become physicians here in their home state and hopefully stay here to serve their communities.”

Zeinab Hashem, an MSUCOM fourth-year student, talks regularly with Detroit-area students about MSUCOM’s Detroit Medical Center (DMC) site. “A lot of students in my area want to stay close to their families. Now that word has gotten out about the DMC site, they have a lot of questions including how much I enjoy attending the DMC and what it’s like learning there. I’ve traveled to a number of area high schools and the University of Michigan at Dearborn which is where I went as an undergraduate,” she said. “A lot of young people don’t know about our profession. Some believe we’re some sort of therapist or bone doctor. Once I clear up these misconceptions and explain the D.O. philosophy behind their practice of medicine, a lot of them are attracted to the principles behind our profession – especially how we can use our hands to treat some ailments. As I tell people frequently, you can’t spell doctor without D.O.”

Zeinab Hashem

by Craig Reed

If you travel to MSUCOM at the Macomb University Center, expect a warm welcome from their staff, especially from Jennifer Lanuzza, who’s been working at the site since it first opened in 2008.

“I’m the Student Services representative for the Macomb site,” explained Lanuzza, “so I’m one of the staff the students interact with regularly. I love working with them, whether I’m answering their questions or taking a moment to listen about their struggles with medical school.”

Working with partners in the community, Lanuzza coordinates student experiences including the Homework Connection – an opportunity for MSUCOM students to mentor Mt. Clemens High School students – and the Macomb County Mobile Outreach Clinic, where our students shadow physicians while serving the indigent within the community. “I went to school at Mt. Clemens for several years while growing up so I feel strongly that part of the goals of the Homework Connection is to inspire these high school students to go on to college,” she said. “Our students are doing more than community outreach. They are connecting with others and learning the many barriers those from disadvantaged backgrounds can face getting to school, let alone learn while they are there. Programs like the Mobile Outreach Clinic help them to understand the challenges the poor can have accessing basic healthcare services and how we can help reduce those challenges.”

While Lanuzza enjoys coordinating outreach opportunities, it’s our students who make her job rewarding. “They are some of the most amazing people I’ve ever met,” she said. “I can’t wait to see them graduate from our program to become D.O.s.”
In Loving Memory

by Craig Reed

For decades, William Anderson Sr. has worked closely with MSUCOM – by creating educational opportunities for our students and giving inspiring speeches on what it was like being an osteopathic physician in rural Georgia during the civil rights movement. This year, Anderson has taken another step to inspire the profession by starting an endowed scholarship in memory of his wife, Norma.

“She was an incredible woman. She was my inspiration and supported me through the good and the bad times. She was often the breadwinner of the family, working and caring for our children while I was completing medical school and later when I was arrested protesting segregation in our community,” said Anderson. In 1961, he was president of the Albany Movement which organized one of the earliest desegregation efforts in the country. The lessons learned from this would contribute to the success of later efforts in Alabama led by civil rights icon Martin Luther King Jr. “I wouldn’t have been part of the movement had my wife not convinced me to come back to rural Georgia after medical school to practice medicine,” he said. “She correctly pointed out that the state, which is where I was born, was where I was needed.”

Anderson now has three children and two grandchildren who are also D.O.s – three of whom graduated from MSUCOM. “My children saw that I enjoyed my profession and three decided to follow in my footsteps. Two of my grandkids have now followed in their parents’ footsteps,” he said. “The profession has been good to me and my family. I want to make certain it is here in the future and one way to ensure that is by establishing scholarships.”
Office of Continuing Medical Education

ONE-DAY PROGRAMS

FALL KALEIDOSCOPE: CME FOR OSTEOPATHIC PHYSICIANS
September 21, 2012
Kellogg Hotel and Conference Center
East Lansing, MI
• 8 I-A Credits

CARDIOLOGY UPDATE
October 3, 2012
University Club, East Lansing, MI
• 5.5 I-A Credits

SYMPOSIUM FOR PRIMARY CARE
November 2-3, 2012
Sheraton Detroit-Novis Hotel, Novi, MI
• 17 I-A Credits
• Contact 248-471-8222

OSTEOPATHIC PRINCIPLES AND PRACTICE FOR THE PREGNANT PATIENT
November 10, 2012
MSUCOM, Fee Hall, East Lansing, MI
• 7 I-A Credits

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MSUCOM, Fee Hall, East Lansing, MI
• 26 I-A Credits

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CME Highlight: Chad Link

by Craig Reed

Arrhythmia, hypertension, aortic dissection – there are a host of heart-related issues which a family physician has to watch for in their patients as well as manage when they do arise. Cardiologist Chad Link, an ’03 alumnus, helps educate primary care providers on the latest heart research and best practices in CME’s “Cardiology Update,” which is held each fall.

“This class focuses on how to manage common cardiovascular problems and what warning signs to look for that may indicate the patient needs to see a specialist,” said Link. “It’s a good primer for physicians working in internal medicine and family practice.”

Link also educates participants on more rare conditions such as pulmonary hypertension – when the pulmonary arteries and capillaries narrow or become blocked or destroyed, making it harder for blood to flow freely into the lungs. “It usually affects young females and can be easily overlooked or misdiagnosed as an upper respiratory infection which is more common,” explained Link. “It creates increased pressure on the right side of the heart which leads to difficulty breathing and eventually that side of the heart fails. Usually, by the time I see a patient with this disease, they have been experiencing symptoms for about a year or so. The more family doctors who are aware of this, the more likely a patient will be referred to a specialist earlier and have a good outcome.”

As an invasive cardiologist, Link works at the Thoracic Cardiovascular Institute (TCI) in Lansing, Michigan, with his former mentor and colleague, David Strobl, professor of osteopathic medical specialties and chairperson for CME’s “Cardiology Update.”

“Back in medical school, I worked part-time in a graduate assistantship position at TCI working with Dr. Strobl. That experience is what drew me to the field of cardiology,” said Link. “I enjoy patient care and doing what I can to improve cardiovascular health.”
Alumni in Action: Richard Bryce

by Craig Reed

Since he was a young adult, Richard Bryce, Class of 2008, was constantly involved in school activities which offered aid to the disadvantaged. As a physician, Bryce has continued his efforts by caring for the underserved at the Community Health and Social Services Center — one of 34 Federally Qualified Health Centers (FQHC) located in Michigan — which offers primary care services within medically underserved areas in the Detroit area.

“It’s been around for 40 years and mainly helps the uninsured and underinsured so they have someplace to go other than the emergency room for basic primary care services. The patients are mostly Spanish-speaking which works well for me since I’m fluent in the language. The people are appreciative for the care here. It’s really rewarding for me. As a doctor, I feel it’s important to help anybody who needs care,” said Bryce.

About 85% of the patients at the clinic have no insurance; the rest have Medicaid. FQHCs receive grants from the federal government as well as enhanced Medicaid payments. Patients also contribute by paying for the services on a sliding scale based on their income.

As an alumnus, Bryce now has visits from MSUCOM students who are interested in learning from him. “I just had some shadow me recently and I look forward to having more in the future,” he said. “When I was a student I always felt I had great support from our alumni. I think that made me a better doctor and definitely made me proud to be a D.O. Now it’s my turn to give back.”

Awards

Patenge Medalists Honored

by Pat Grauer

MSUCOM recognized three distinguished leaders with its highest honor, the Walter F. Patenge Medal of Public Service. The award, which exemplifies a commitment to excellence in medicine, government and public service, was presented at the Kellogg Center on May 22, to Steve Barnaby, David Kellam, D.O., and Thomas Simmer, M.D. Mary Beth Bolton accepted the award on behalf of Dr. Simmer.

Steve Barnaby is a corporate and government mediation specialist and president of the board of Botsford Hospital. He has provided leadership during the development of a state-of-the-art cancer center and its designation as a regional trauma center. He is recognized for his positive approach to complex problems, demonstrated commitment to enhancing healthcare in his community and abroad, and his leadership to a long-standing partner hospital of MSUCOM.

Dr. David Kellam has served as a clinical associate professor of radiology for MSUCOM, and has provided rotating diagnostic radiology services at a number of the state’s hospitals. He is honored for his commitment to mentoring and teaching the next generations of osteopathic physicians, for his care to people in the rural medically underserved parts of the state, and for his leadership in osteopathic radiology.

Dr. Thomas Simmer has been the senior vice president and chief medical officer of Blue Cross Blue Shield since 2004. He has directly addressed the issues that frustrated primary care doctors in their network – burdensome paperwork, regulations and too little recognition. He is recognized for his commitment to patients, providers and healthcare institutions, his creativity in addressing complex and systemic healthcare issues, and his examples of cooperative leadership.

Bryce cares for uninsured and Medicaid patients at a community health center in Detroit.
Upcoming Events

Oct. 7-11  OMED/2012 Osteopathic Medical Conference & Exposition
San Diego, California
Alumni reception on the 9th

Oct. 17-21  ACOI Convention
Orlando, Florida
Alumni reception on the 18th

Jan. 24-27  MAOFP Update
Bellaire, Michigan
Alumni reception on the 26th

March 2-9  Seminar in the Sun
RIU Palace, Guanacaste, Costa Rica

March 21-24  ACOFP
Las Vegas, Nevada

NEW ALUMNI BOARD MEMBERS

ADAM HUNT, CLASS OF 2011
Emergency medicine and family practice resident at McLaren-Oakland in Pontiac, Michigan

“Being a D.O. means that I am part of a group of individuals that cares about helping others. We believe medicine starts with a personal rapport, a hands-on approach and continues with an evidence-based mentality. D.O.s work side by side with patients to reach their health related and personal goals. Being a board member is a way for me to give back to the MSUCOM family that has supported me from the first day I stepped on campus. I am very excited.”

DANIELLE KOESTNER, CLASS OF 2006
Family medicine physician at Hackley Community Care Center in Muskegon Heights, Michigan

“...my special interests include women’s health and pediatrics. I feel so blessed that God led me to MSUCOM, the most amazing college of osteopathic medicine there is.”

JEFFREY STEVENS, CLASS OF 1997
Family medicine physician at Metro Health Rockford in Rockford, Michigan

“As I was applying to medical school, I knew I was interested in osteopathic medicine and hoped to attend MSUCOM. After my first visit to the school, I knew I was home. I didn’t want to go anywhere else. My time at MSUCOM prepared me incredibly well for the challenges I would encounter as I entered residency and when I started my practice. As I work with students and residents, I truly enjoy learning from them, and will continue to support the profession in the future. I look forward to my time on the alumni board and hope to support the great college that has given me so much.”
I am honored to be the new president of the MSUCOM Alumni Association. Since the day I decided to become a physician, I wanted to be an osteopath and to attend MSUCOM. I did not interview at any other medical school and whenever I was asked about this, I told them I only wanted to go to MSUCOM since it is the best osteopathic college in the nation. I still believe that today. MSUCOM has a unique commitment to Michigan through the Statewide Campus System. With our alumni around the U.S. and internationally, our influence is everywhere.

Recently, an MSU professor who was visiting the area came into our clinic in Colorado with some issues. Not only were we able to diagnose and treat her, we offered care to a fellow Spartan. You could see the relief on her face when she realized she was being treated by a “hometown physician.” Wherever you are, whatever the nature of your practice, you will always be a Spartan. There will always be a connection with MSUCOM.

Our alumni association is a way to keep that connection strong. Let me encourage you to give of your time and become a preceptor — no matter where you live in the nation. Teach those who are learning the art and science of medicine. Mentor them in what it means to be an osteopathic physician. Share your ideas when you attend your national, state and local meetings. We need good leaders and thinkers for the 21st Century.

Best to you all this coming year. Go Green!

Mary (Mark) Louder, Class of 1993
president, MSUCOM Alumni Association
Board of Directors
### October

<table>
<thead>
<tr>
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<tbody>
<tr>
<td>3</td>
<td>CME: Cardiology Update – 5.5 credits of Category 1-A.</td>
<td>University Club, East Lansing, MI</td>
<td></td>
<td><a href="http://www.com.msu.edu/cme">www.com.msu.edu/cme</a>, Meghan Tappy Dipiazza, Sara Carson</td>
</tr>
<tr>
<td>7-11</td>
<td>OMED/2012 Osteopathic Medical Conference and Exposition</td>
<td>San Diego Convention Center, San Diego, California</td>
<td></td>
<td>Alumni reception on the 9th at House of Blues.</td>
</tr>
<tr>
<td>17-21</td>
<td>ACOI Convention – Renaissance Orlando Resort at Sea World</td>
<td>Orlando, Florida</td>
<td></td>
<td>Alumni reception on the 18th at Renaissance Orlando Resort.</td>
</tr>
<tr>
<td>2-3</td>
<td>CME: Symposium for Primary Care – 17 credits of Category 1-A.</td>
<td>Sheraton Detroit Novi Hotel, Novi, MI</td>
<td></td>
<td><a href="http://www.botsford.org/physicians/events/2012-Symposium">www.botsford.org/physicians/events/2012-Symposium</a></td>
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### January

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<tr>
<td>13</td>
<td>Student Government Association “Las Vegas Night and Charity Raffle”</td>
<td>Eagle Eye Golf Club, East Lansing, MI</td>
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<tr>
<td>24-27</td>
<td>Michigan Association of Osteopathic Family Physicians Update – Shanty Creek Resort, Bellaire, MI</td>
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<td>Alumni reception on the 26th.</td>
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### February

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<tr>
<td>2</td>
<td>MOCF Ball: “Puttin’ on the Glitz” – Annual fundraiser for the Michigan Osteopathic College Foundation.</td>
<td>The Henry, Dearborn, MI</td>
<td></td>
<td>Colleen Kniffen at 517-355-9616 or <a href="mailto:kniffen@msu.edu">kniffen@msu.edu</a>.</td>
</tr>
<tr>
<td>7, 21, 28</td>
<td>“Slavery to Freedom: An American Odyssey” – Distinguished speakers visit MSU to discuss the American Civil Rights Movements – 5 p.m. Thursdays, Kellogg Center, East Lansing, MI</td>
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For a complete listing of MSUCOM events check out our Web calendar: [www.com.msu.edu](http://www.com.msu.edu) and click on “Calendar”
Healthy Lifestyle and Preventive Care: Future Directions
March 2-9, 2013
Guanacaste, Costa Rica

featuring a 20-hour AOA Category 1A CME Course

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