Work continues toward unified graduate medical education accreditation

It ain’t over ‘til it’s over. Stay tuned. But wait, there’s more! There are many colloquial expressions that refer to events that might look final, but really aren’t. A good many of these phrases could be applied to the current status of a unified graduate medical education accreditation system.

Since the AOA and the ACOM began discussing unified accreditation with the ACGME, the intent has been to establish a system that would serve the profession and society, with the ultimate goal of providing the best opportunities for osteopathic graduates.

Those who were not privy to the interactions that took place among the three organizations in July as they came together to discuss a memorandum of understanding might see the AOA and ACOM’s rejection of the proposal as a complete dismissal of the idea of a unified graduate medical accreditation system. This is far from the case.

At the AOA and ACOM representatives reviewed the proposed MOU they found language that they felt required clarification before they could unhesitatingly accept the document as it stood. Unfortunately, they were only given the options of accepting or rejecting the proposed memorandum without modifications.

After very serious consideration, the representatives decided that it was important to clarify those points that they felt were open to interpretation, and they chose not to accept the MOU as it was presented. Since making that decision, the three organizations have met to discuss how they’ll move forward. All have also clearly communicated that they are still committed to establishing a single accreditation system and are working on taking the next steps to move ahead.

We in MSUCOM have been watching this process unfold and appreciate the deliberative approach that our professional organizations are taking with regard to ensuring that any document that is approved is in the best interest of osteopathic medicine. I have personally been engaged in communicating about the process toward a unified system with our students, faculty and alumni, and I will continue to do so as events unfold. If you visit http://com.msu.edu and search for “Dean’s Corner,” you’ll see my updates to this point.

Regardless of the eventual outcome of the GME unification effort, thanks to our robust Statewide Campus System of partner hospitals and the generosity of our clinical faculty, MSUCOM graduates will be well-positioned for moving into our robust Statewide Campus System of partner hospitals and the generosity of accepting or rejecting the proposed memorandum without modifications.

Scleroderma research brings universities, donors together
(with help from the Internet)

By Laura Probyn

Richard Neubig, the new chairperson of MSU’s Department of Pharmacology and Toxicology, was looking at a chemical compound that he hoped might show promise for treating melanoma and breast cancer, when a colleague at another university published a paper showing that the compound might have applications for treating diseases where fibrosis is a major element.

Fibrosis is a process in which basic repair cells convert to cells called myofibroblasts and overproduce collagen. It’s a major component in a large number of conditions, including the entire family of scleroderma diseases, which affect an estimated 300,000 Americans.

One of these diseases is systemic sclerosis, a condition that causes thickening of the skin and loss of flexibility in hands and feet, along with key organs like the lungs and kidneys. While other scleroderma treatments have looked at reducing the inflammation that contributes to scleroderma, Neubig’s work is focusing on stopping or reversing the fibrotic process at the cellular level.

In his transition from the University of Michigan to MSU, he’s completed a study that is showing very promising results that he hopes to publish this fall. Though his findings are positive, there’s still a lot of work to do before a treatment is available for scleroderma or other fibrotic disease sufferers. The work is being conducted by a research team comprised of Neubig and his former U of M colleagues.

While Neubig and his collaborators are pursuing traditional grants and development avenues, they’re also raising funds to continue the research via an online crowdfunding site that was developed in collaboration with Jonathon and Lisa Rye, a southeastern Michigan couple whose family has been affected by scleroderma.

While sites like Kickstarter and GoFundMe are often used by nonprofits and entrepreneurs, the Scleroderma Cure Fund is only the fifth site of its kind that is connected with major research universities.

The Scleroderma Cure Fund site offers a simple and quick option for donors who want to support research, but who might feel like universities are only interested in larger checks or who don’t want to deal with trying to send funds via the U.S. mail.


Read the full story at: http://bit.ly/16ypFDM

ON THE COVER: MSUCOM students, faculty, alumni and others treated nearly 1,900 patients and took more than $150,000 worth of medical supplies to Peru this summer. The group poses on the Amazon Queen, from which they provided clinical care up and down the river. (See page 3.)

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MSUCOM Team supports medical needs of world-class dwarf athletes

by Pat Guarro

There’s one group of world-class athletes who may have severe spinal problems, heart and blood vessel complications, respiratory difficulties, bowing of the legs, disproportion in their bodies and other significant health issues. They still compete, overcoming challenges that most do not face, including the challenge of public misconception.

They’re the athletes who participated at the 2013 World Dwarf Games at Michigan State University, Aug. 3-10 – more than 400 people from 23 nations and every U.S. state. They competed in archery, badminton, basketball, bocce, floor hockey, curling, powerlifting, shooting, soccer, swimming, table tennis, track and field, and volleyball. Among those present were a number of world-class dwarf athletes who have competed in the Paralympic Games, some as parents and some as sports administrators.

Helping these elite athletes remain healthy during the games was a team including Mat Saffarian, Rani Gebara and Melissa Andric, all 2010 MSUCOM alumni and fourth-year physical medicine and rehabilitation residents. MSUCOM students from the Orthopedic Surgery and Physical Medicine and Rehabilitation interest group also assisted.

The team was involved in physical classification of the participants under Dwarf Athletic Association of America guidelines, and was present during the competitions.

“While physical medicine and rehabilitation physicians, our department is perfectly suited for this event,” Saffarian said. “We are used to dealing with people with specific biomechanical impairments, whether it be due to skeletal dysplasia, neuropathy, stroke, etc.”

There are more than 400 different types of skeletal dysplasia (dwarfism), some of which are lethal because the fetuses never make it to term. Achondroplasia makes up about 80 percent to 90 percent of all non-lethal sub-types.

Because of these differences, there are a lot of variables that come into play when treating an injury or illness. “Care is challenging for us,” noted Saffarian. “In all my clinical experience, I have only encountered one person with skeletal dysplasia. That means that if there is an emergency during the games, the physicians cannot make assumptions about their patients,” he said. “For example, a dwarf might have a normal-sized heart inside a small thorax, which could make breathing much more difficult.”

But even with the variations they saw among the players, Saffarian said his group was ready. “The Department of Physical Medicine and Rehabilitation has been preparing for the games for almost two years,” he said. “We were excited to work with this population of world-class athletes.”

New MSUCOM research shows live videoconferencing can be an effective tool in higher education

by Laura Probyn

It’s no secret that distance learning is becoming increasingly prevalent. The MSU College of Osteopathic Medicine has not only embraced the technology, but according to research conducted for a new journal article in “Teaching and Learning in Medicine,” it’s North America’s largest user of daily, live interactive videoconferencing in higher education.

The article, written by a team led by Dr. Kari Hortos, associate dean at the MSUCOM at Macomb University Center, looked at whether there were differences in learning when live videoconferencing was used to connect students at three locations. It has shown promising results that are transferable to other higher education institutions.

The work to gather data and write the article was a true team effort. Hortos worked with coauthors Dr. Donald Setch, MSUCOM senior associate dean; Suzanne Wilson, administrative director for academic support and supportive counseling at Macomb; John McDaniel, academic technology coordinator; and Eric Zemper, outreach specialist.

MSUCOM’s immersion into the use of synchronous videoconferencing (meaning that the classroom instruction is live and allows full interaction among participants at all sites) came about during the college’s planning phase for a southeastern Michigan site. The leaders thought about how students there could be connected to faculty members and their peers in East Lansing and vice versa. By the time it was determined that there would be video teleconferencing every day and may find themselves using it to interact with lecturers and their peers from 13 to 25 hours per week.

Beautiful New Facilities support clinical efforts of four MSUCOM departments

Spine and Orthopedic Center

The new MSU Spine and Orthopedic Center, proximate to OMM, will include spine surgeons Michael Winkelpleck and Lawrence Myśliwiec from OSS, pediatric orthopedist Joseph DeWitt from OSS, intervention pain management specialist Ryan O’Connor from PM&R, and podiatrist Ruby Chahal from OSS. In addition, Radiology will have on-site dedicated x-ray facilities and a procedure room where spinal and diagnostic injections can be done.

“With what we do is to allow us to perform conservative, non-operative and surgical evaluations at the same office for a multi-faceted program,” said Winkelpleck. “With physical therapy downstairs and enhanced referrals to the OMM Clinic, we’ll improve patient care and access with proximity in the same office. With the addition of Dr. DeWitt, we’re going to be able to add evaluation and management of scoliosis and pediatric disorders to our spine program.”

OMM Clinic

With 9,000 square feet of space, the Osteopathic Manipulative Medicine Clinic can now accommodate as many as 11 doctors working at once in 23 patient rooms, said Lisa DeStefano, chairperson of the OMM department, which moved into the space July 1.

“We have two nursing stations, a ‘residents’ cave’ and a meeting room with high-tech communication that can seat 20 people. Since the move, we’re accommodating 30 new referrals a week,” she said. “Working here are four full-time osteopathic physicians, six osteopathic clinical faculty, four neuromusculoskeletal medicine/OOM residents, and one intern. We also offer education: for third- and fourth-year osteopathic students on rotation, intern and resident electives, and shadowing for first- and second-year students and undergraduates on request.”

Rehabilitation

A ballet barre, plyometric flooring, pneumatic weight training, and a wide variety of tables, straps, balls, mirrors, mats and machines dot Radiology’s new physical therapy unit. The team, called MSU Rehabilitation, and the Spartan Nutrition & Performance Program have moved to new facilities next to MSU SportsMedicine.

The program helps people with balance, symmetry and control, addresses acute and chronic pain, and bolsters people to return to their dreams. “We often treat patients who have very specific goals,” said Mary Thiel, physical therapist. “They may want to be able to push a lawnmower, or do a roundhouse kick, or reach in the back seat without pain.”

“We had simply outgrown our space,” she said, noting that the facility sees 90-110 people each day. The staff includes five physical therapists, three PT assistants, two athletic trainers, one occupational therapist and a psychologist.

The SNAPP program, which shares patients will benefit.

Mary Thiel at MSU Rehabilitation uses the AlterG unweighting treadmill for gait training at 75% of individual’s body weight for more successful outcomes.

“Individually, we teach people how to heal, and help to prevent future injury. But in addition, we’re getting more and more into community education.” One new piece of equipment for the new space is an unweighted treadmill – one that gives the user the sense of being weightless. “It allows patients to move through space without further stress on their bodies,” said Thiel. “It’s wonderful for stroke patients, multiple sclerosis patients, and post-surgical runners trying to get back in training.”

Faculty and staff in the new units all echoed the same important message: with practitioners in sports medicine, physical therapy, spine and orthopedic medicine, osteopathic manipulative medicine and radiology in such close proximity and working symbiotically, patients will benefit.

Dr. Winkelpleck reviews images of spinal injections performed at the new MSU Spine and Orthopedic Center.
Telemedicine, the practice of using audio and video technology to connect physicians and their peers’ patients, is not a new concept, but advances in technology are making it easier and more cost effective to use in research, teaching and clinical settings. At MSU, the Department of Psychiatry has been using technology to treat patients in 10 underserved rural and urban areas of Michigan for more than six years and is looking to expand the use of telepsychiatry in teaching and research with locations as far away as Mexico and Malawi. In Malawi, a country about the size of Pennsylvania, there is only one psychiatric hospital and one psychiatrist. MSU psychiatrists are setting up a program that will enable faculty and students to connect with that hospital’s clinical officers—professionals who are comparable to physician faculty and students to connect with that hospital’s clinical MSU psychiatrists are setting up a program that will enable faculty and students to connect with that hospital’s clinical officers—professionals who are comparable to physician assistants in the U.S.

They’ll conduct grand rounds via video—a standard activity that includes discussing cases and treatment options. It will give both the MSUCOM students and the Malawian clinical officers opportunities for education and idea exchange.

At two Mérida, Mexico, hospitals—one a psychiatric hospital and one a general hospital with a psychiatric unit—medical residents will soon connect with MSUCOM residents in Michigan via video to present journal articles and then engage in real-time discussions about those presentations. “The international piece is really connected to research and training,” said Jed Magen, psychiatry department chairperson. “It’s going to be terrific for our residents to get that cross-cultural psychiatry piece and it’s a way we can do more research and enhance the research we’re doing now.”

Closer to home, the psychiatry department began a discussion about how to provide broader, integrated care experience for their residents.

The result was a collaboration with the Ingham County Health Department and the Clinton-Eaton-Ingham Community Mental Health Center, who have come together to open the Birch Community Health Center, a new Lansing facility that is providing care to vulnerable patients. Magen said. “You never know what you can do. It started with a small-scale conversation between us and family practice and it ended up with this whole new clinic.” He adds that the residents involved will gain another skillset that will be increasingly important with the advent of the Affordable Care Act. They’ll learn to work as part of a multidisciplinary team and take care of patients with complex, co-morbid medical and psychiatric disorders. “It’s a skillset that many psychiatrists don’t have now and they will need in the future,” Magen said.

New Sparrow location provides high-tech neuroscience care, clinical research, medical education

by Laura Probyn

Tyson Bughardi, assistant professor of neurology and ophthalmology, and Mounzer Yasin-Kassab, director of epilepsy and clinical neurophysiology, stand in front of the EEG monitors at the new Sparrow Neurosciences Center.

The new Sparrow Neurosciences Center, developed especially for stroke, neuro-intervention, epilepsy, neuro- oncology, neurosurgery and neuro-critical care and treatment, has 64 private rooms featuring technology that enables the staff to monitor EEG and other critical readings in real time from a central location. Each room can also be quickly converted to an intensive care room, should the need arise. This decreases the response time to patients in distress, a top priority in stroke situations. “The urgency with stroke or progressive neurologic disorders can’t be overemphasized,” said David Kaufman, chairperson of MSUCOM’s Department of Neurology and Ophthalmology and the facility’s medical director. “That’s been one of the major advances over the last 10 years; we now recognize that speed is essential to get the best outcomes with these patients.”

Kaufman, who also serves as chair of Sparrow’s neurology department, pointed out that the center’s rooms are all equipped with everything that’s essential to treat patients who face critical situations. It also means that when patients suddenly require EEG equipment that they don’t have to wait while it’s transferred from another floor and connected to them—steps that require precious time.

Beyond the rooms, the facility provides areas where physicians can monitor the EEG readings for patients who are housed anywhere in the hospital or are outpatients. There are units that specialize in epilepsy monitoring, neurological intensive care and neuro-oncology.

A number of MSUCOM neurology residents are based at Sparrow and more than two dozen primarily MSUCOM-employed neurologists now serve there on a part-time or full-time basis. There are also fellowships in sub-disciplines, including neurophysiology, stroke, electroencephalography (EEG), electromyography (EMG) and neuro-intervention.

The center is the result of a long-term partnership among MSUCOM, Sparrow, McLaren Greater Lansing, Lansing Neurosurgery (a private firm) and the MSU College of Human Medicine. For more, see http://bit.ly/19jz2OE.

New research at cellular level might someday yield big results

by Laura Probyn

Monique Floer, MSU assistant professor of biochemistry, is embarking on a study to look at how macrophages, a type of cell that is part of the immune system, can express specific genes for specific functions and why other cells cannot. Her work is being funded by a three-year, $210,000 American Heart Association Scientist Development Grant.

Floer’s study is focused on the composition of macrophages and how those components might play a role in influencing how genes act—or don’t act—in response to attacks on the immune system.

Macrophages are cells that work by moving to the site of an infection or, in the case of an artery, a lesion. They fix the damage by causing a temporary inflammation that’s part of the healthy process and then cease their work and leave the area once the healing is complete. But when an artery wall is thickened by cholesterol and triglycerides (atherosclerosis), the macrophages may continue the inflammation.

Floer is looking at the macrophages’ DNA and a set of proteins called histones. The histones are responsible for stuffling DNA into our cells by forming little spools of DNA that are called nucleosomes.

She said there’s indication that there are enzymes that can take nucleosomes on and off and even slide them along the DNA and these enzymes play a role in gene expression. Scientists don’t have a clear view of how these enzymes are controlled, just that they may play some role when a gene is switched on or off.

Once scientists understand how the nucleosomes move about the cell and affect gene expression, they can then start to think about designing drugs that can keep genes from switching on or off. Such drugs would not only have application for treating atherosclerosis, but possibly cancers and other diseases. For more, see http://bit.ly/1stdbef

Lansing’s Birch Community Health Center was dedicated in August. Among those who were on hand for the event were (left to right) George Smith, director emeritus, Sparrow/MSU Family Medicine Residency Program; Robert Sheehan, executive director, CEI Community Mental Health Authority; Renee Canady, health officer, Ingham County Health Department; James Haveman, director, Department of Community Health; Tom Curtis, vice chair, Community Health Center Board; Jed Magen, chairperson, MSU Department of Psychiatry; Deb Nolan, Ingham County Commissioner and Ingham County Health Department Board chair; Joe Brehler, Eaton County Commissioner and board chair of the CEI Community Mental Health Authority.
Experiential clinic idea EVOLVEs to help students integrate basic and clinical sciences

by Laura Probyn

As part of her work in leading the MSUCOM curriculum revision, Mary Hughes, chair of the Department of Osteopathic Medical Specialties, was taking a serious look at the way first- and second-year students were learning and retaining content from their basic science classes. “What we found in year two was little retention of basic science because it was not framed in a clinical way,” Hughes noted. “I began thinking about how do students learn? What makes the learning ‘stick’? Patients make it stick.”

Hughes began considering the possibility of an experience that would follow the students throughout their MSUCOM years and would also help them use critical reasoning skills, establish a consistent and systematic approach to patients and begin building a professional demeanor. With input and insight from the curriculum revision committee, the EVOLVE clinics were born. Jane Gudakunst, assistant professor in the Department of Osteopathic Medical Specialties, took the framework that Hughes had created and fleshed out the program.

The EVOLVE clinic experience was launched when the members of the Class of 2016 received their white coats. With the addition of the Class of 2017, there are now about 600 students in EVOLVE clinics. One basic science faculty member and one clinical science faculty member facilitate each clinic, and the students work in four-person “pods” to analyze the presenting data and discuss possible modes of action.

“It’s student-centered, rather than faculty-centered,” Gudakunst says. “The students do the presentations. We design the flow of the clinic, but they answer all the questions and sometimes they have to do research about their patients. It’s also patient-centered rather than disease-centered.”

One of the intended consequences was to increase discussion and collaboration among the faculty who teach students. The basic science and clinical science faculty member pair varies in each clinic, depending on the topic, and this has led to increased cohesion across the faculty as well as much more content integration—a win-win for faculty and students alike. For more, see http://bit.ly/18kclYU.

Part of a team for innovation that’s patient-centered

Young and Craig Gudakunst, includes 42 faculty who participate in its small groups, teaching clinical and communication skills that enhance patient care. Tolson also participates on a team of faculty developing course content.

“Each group has about 50 students and four or five faculty,” she said. “And my role primarily is to convey the clinical aspects of the content. Primary concepts we address are the importance of the doctor/patient relationship and good communication – for example, allowing the patient enough time to talk.

“We also are developing strong history and physical exam skills, which are the foundation to everything a physician does. I enjoy the fact that being actively in practice gives me experiences that I can use to reinforce the students’ learning,” she noted.

“I respect being part of this team,” said Tolson. “We are constantly planning the next units, reviewing and updating what we’ve done, and responding to student suggestions. Unlike courses which only meet once a year, we are working year-round to refine and enhance.”

The OCP series provides an extended time to prepare students for preceptorships, which the Department of Family and Community Medicine administers, and for clinical clerkships in the third and fourth years. Tolson, a 1999 alumna of MSUCOM, has been a member of the faculty since 2009.

“Become a doctor in your heart”

by Pat Groener

Row by row, one by one, they crossed the stage at the Wharton Center, making the ceremonial transition from ordinary citizens to osteopathic medical students. Family, friends, faculty and staff packed the venue, watching and cheering as the rows of seats were filled with the white-coated class.

It was MSUCOM’s 43rd annual Convocation, held June 14 to honor 311 incoming students, the Class of 2017. Part of the proceedings includes a White Coat Ceremony, in which students receive the mantle of their new status from faculty.

The ceremonies, under the leadership of Dean William D. Strampel, included a celebration of the college’s third contingent of Canadian students, recruited in a program designed to firmly establish the osteopathic profession in that country. Canadian speakers included Judith Morris, president and CEO of Lambton College; Spencer Dickson, dean of the School of Health Sciences at Lambton College, and David Fiddler, president of the Ontario Osteopathic Association.

Other speakers included MSUCOM alumnus Michael D. Weiss, president of the Michigan Osteopathic Association, who urged the students to consider the white coat as a “symbol of service,” and Class of 2015 President A.J. Burandt, who told the students that “MSUCOM will become part of your family too.”

Williams Falls, associate dean of student services, presented the students for the White Coat Ceremony, and 24 marshals from the college “coated” them individually. Falls also presented the new class of Osteopathic Medical Scholars, elite MSU undergraduates associated with the college.

In closing, Dean Strampel turned to Latin: scire, facere, esse – “to know, to do, to be.” He told the students that the first two years at MSUCOM, they will be working to know, in the last two they will be applying skills to do, and in the process they will learn what it means to be a member of a profession.

Urging them to avoid the “trap of aggression” that can befoul physicians, he said, “Become a doctor in your heart.”

CLASS OF 2017

Number of applications: 4,588
Number enrolled: 311
Female/male ratio: 134/177
Age distribution: 19-46, average 23
MCAT: 9.19 overall average
GPA: 3.57 overall average
Michigan/non-Michigan residency: 275/36
Individual volunteer hours: 1,668 average

Among the speakers were alumnus Michael D. Weiss, president of the Michigan Osteopathic Association.
CLASS OF 2017

Student Spotlight

by Pat Gruver

Because mere numbers don’t give us the full picture, we’re telling the story of the new Class of 2017 through the lives of students representing each of our three sites.

East Lansing: Every inch varsity victories

TRACY NOGLE

Nogle, a three-time Academic All-Big Ten and a two-time Pat Canning Coaches Award recipient, was a 5’11” basketball guard, graduating in May 2013 from MSU with a degree in kinesiology. She credits her family for her strong interest in sports and in osteopathic medicine.

“Pat Canning Coaches Award recipient, was a 5’11” basketball guard, graduating in May 2013 from MSU with a degree in kinesiology. She credits her family for her strong interest in sports and in osteopathic medicine.

“[My mom is MSU’s head athletic trainer],” Nogle said. “I grew up going to work with her and watched MSU osteopathic physician Jennifer Gilmore, Jeff Kovan, David Kaufman, Brooke Lemmen and others – treating the athletes. I learned to appreciate the power of considering the body as a unit, and the impact a good doctor/patient relationship can have.”

Her father is a social worker, and “he taught me the importance of care and compassion,” she said. “We would do Meals on Wheels together, and it was wonderful to brighten people’s day.”

Nogle learned the power of osteopathic manipulative medicine first-hand, when regular treatments kept her pain-free for four years after a back injury. “I love it, especially muscle energy. You can fix so much without drugs.”

She also learned from playing basketball. “It taught me so much about life – discipline, time management, good preparation, teamwork and sticking to priorities - skills I now need to be a good physician.”

She misses her basketball salad days, but notes that “I’ve transitioned to another team. We’re all in the same boat. We all want to achieve the same thing.”

ETHAN RUHLAND

A four-year football letter winner, Ruhland, an offensive guard and center, became just the 17th four-time Academic All-Big Ten selection in MSU history and received the team’s Jim Adams award.

“I came to MSU as an athlete who needed shoulder surgery,” Ruhland noted. “I was treated by Douglas Dietzel, a D.O. from MSU SportsMedicine. I was a human biology major, and as I matured, I realized how much this profession lined up with my values. Osteopathic principles allow us to see the patient’s condition physically, spiritually and emotionally. It’s perfect for me.”

Ruhland enjoyed the busy life of a varsity athlete, and said it was “a huge blessing to play at MSU. The Spartan family – there was nowhere else for me to be. We got amazing support, tutors and resources, and the coaches regarded us as students first. The discipline was important too. Time management is huge to be successful on-field and off, and nothing could have prepared me for medical school better than long days of physical and mental fatigue.”

This love of sport influences the professional choices Ruhland is considering – physical medicine and rehabilitation or surgery – because he wants a close relationship with athletes, and understands their drive to get back on the field. “Athletes are held to a higher standard, deserved or undeserved, because of the spotlight on them,” Ruhland said. “As future doctors we are also held to a higher standard because someday we want to have the privilege to help others to get and stay well and live healthy lives. Both athletics and medicine provide a platform from which we can choose to make a positive difference in the community.”

ZAKIYA POLK

In many ways, Zakiya Polk has gone back to the future, beginning with the fact that she now is an osteopathic student in the very building – the old Hutzel Hospital – in which she was born.

A graduate of Detroit’s Renaissance High School, she attended Spelman College, majoring in chemistry. After a stint working in drug metabolism and pharmacokinetics for Boehringer Ingelheim Pharmaceuticals, she returned home to do research at the Wayne State University School of Medicine, where she ultimately got a master’s degree in basic medical sciences.

Polk became aware of osteopathic medicine at Spelman, and her passion was fueled while at WSUOMS. She valued the whole-person approach to the patient, and how mental and spiritual factors can either contribute to or compromise health.

Throughout she has maintained a formidable array of community service, much of which she continues even as a first-year medical student. She served as assistant volleyball coach and biology/chemistry tutor at her high school, is active with the Detroit National Alumnae Association of Spelman College and serves as the community outreach chair, which includes participating in local college recruitment fairs. For her church, she is a part of the ushering board, Intonjane girls mentoring program, and volunteers with the Annie Lou Hamer Political Action Committee to help people to be educated voters. Through Delta Sigma Theta Sorority, Inc. she is active with the LEAP’s program that integrates health education, physical and mental health.

She’s leaving all interests open for her practice choice. “The more I learn, the more I want to learn,” she said. “I know that I want to practice in Detroit or a similar city.” Teaching is also a passion for her, drawing on the fact that her mother is a 33-year veteran of the profession and her father a lawyer who taught.

“My greatest influences, and my biggest support, are still my parents,” she said. “They have made a way for us – my four older brothers and me – educating us to keep God first and treat others well.”

She’s happy at her choice of site. “DMC is the best,” she said. “In Detroit, there are hospitals all around, a strong volunteer network, all in a city that is constantly changing. It’s easy to be part of it. They need and want you to get involved.”

JAMEY OLVERA

Jamey Olvera is probably one of the most peripatetic hometown boys you’d ever meet. He grew up in Mt. Clemens, attended Mt. Clemens High School and Macomb Community College, and is now taking his first-year classes at MSUCOM at Macomb University Center in Clinton Township.

But in between he served as a combat medic in the Army Reserve, was based at Ft. Jackson in South Carolina and Fort Sam Houston in Texas, took classes at Western Michigan University, and earned his B.S. in biology from Oakland University. He worked full-time throughout school, paying expenses out of pocket.

“I’ve worked a lot of different jobs and it has helped to give me perspective,” he said. “It set me up well for a lifetime of working with and connecting with people.”

Since high school, Olvera, who describes himself as “very analytical,” knew he wanted to be in the health professions. He systematically shadowed M.D.s, podiatrists, chiropractors and dentists. “But the D.O. was the all-encompassing package of what I was looking for – broad-spectrum, holistic, with different tools in the box,” he remembered. “And then when I first heard that MSUCOM was going to be at Macomb, I thought, ‘Nothing could be better than that.’ It was in my backyard, near friends and family, full of great hospitals, with a chance to do my graduate medical education close by. It was tailor-made.”

DMC: Nurturing Detroit through service

I want to practice in Detroit or a similar city.” Teaching is also a passion for her, drawing on the fact that her mother is a 33-year veteran of the profession and her father a lawyer who taught.

“My greatest influences, and my biggest support, are still my parents,” she said. “They have made a way for us – my four older brothers and me – educating us to keep God first and treat others well.”

She’s happy at her choice of site. “DMC is the best,” she said. “In Detroit, there are hospitals all around, a strong volunteer network, all in a city that is constantly changing. It’s easy to be part of it. They need and want you to get involved.”

ZAKIYA POLK

In many ways, Zakiya Polk has gone back to the future, beginning with the fact that she now is an osteopathic student in the very building – the old Hutzel Hospital – in which she was born.

A graduate of Detroit’s Renaissance High School, she attended Spelman College, majoring in chemistry. After a stint working in drug metabolism and pharmacokinetics for Boehringer Ingelheim Pharmaceuticals, she returned home to do research at the Wayne State University School of Medicine, where she ultimately got a master’s degree in basic medical sciences.

Polk became aware of osteopathic medicine at Spelman, and her passion was fueled while at WSUOMS. She valued the whole-person approach to the patient, and how mental and spiritual factors can either contribute to or compromise health.

Throughout she has maintained a formidable array of community service, much of which she continues even as a first-year medical student. She served as assistant volleyball coach and biology/chemistry tutor at her high school, is active with the Detroit National Alumnae Association of Spelman College and serves as the community outreach chair, which includes participating in local college recruitment fairs. For her church, she is a part of the ushering board, Intonjane girls mentoring program, and volunteers with the Annie Lou Hamer Political Action Committee to help people to be educated voters. Through Delta Sigma Theta Sorority, Inc. she is active with the LEAP’s program that integrates health education, physical and mental health.

She’s leaving all interests open for her practice choice. “The more I learn, the more I want to learn,” she said. “I know that I want to practice in Detroit or a similar city.” Teaching is also a passion for her, drawing on the fact that her mother is a 33-year veteran of the profession and her father a lawyer who taught.

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JAMEY OLVERA

Jamey Olvera is probably one of the most peripatetic hometown boys you’d ever meet. He grew up in Mt. Clemens, attended Mt. Clemens High School and Macomb Community College, and is now taking his first-year classes at MSUCOM at Macomb University Center in Clinton Township.

But in between he served as a combat medic in the Army Reserve, was based at Ft. Jackson in South Carolina and Fort Sam Houston in Texas, took classes at Western Michigan University, and earned his B.S. in biology from Oakland University. He worked full-time throughout school, paying expenses out of pocket.

“I’ve worked a lot of different jobs and it has helped to give me perspective,” he said. “It set me up well for a lifetime of working with and connecting with people.”

Since high school, Olvera, who describes himself as “very analytical,” knew he wanted to be in the health professions. He systematically shadowed M.D.s, podiatrists, chiropractors and dentists. “But the D.O. was the all-encompassing package of what I was looking for – broad-spectrum, holistic, with different tools in the box,” he remembered. “And then when I first heard that MSUCOM was going to be at Macomb, I thought, ‘Nothing could be better than that.’ It was in my backyard, near friends and family, full of great hospitals, with a chance to do my graduate medical education close by. It was tailor-made.”

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THE RENAISSANCE HIGH SCHOOL varsity volleyball team pose after their win for the district championship title. Assistant varsity volleyball coach, Zakiya Polk (in red), brought a couple of small fans ecstatic to pose with the team.

Polk, who played volleyball for four years at RHS, maintains a formidable array of community service. 
Stephanie Six

by Pat Grauer

Though MSUCOM students are exposed to the essentials of patient care as soon as they complete gross anatomy, their first skin-to-skin introduction to a “real” patient usually occurs during their preceptorships starting in the fourth semester. It’s the job of Stephanie Six, preceptorship/clinical faculty coordinator in the Department of Family and Community Medicine, to keep those experiences running smoothly for both the students and the faculty.

The preceptorships are two one-week intensive experiences in which the student works in clinics side-by-side with osteopathic physicians, who may be located anywhere in Michigan. They interact with patients, completing extended SOAP (subjective, objective, assessment, plan) notes. Assessments might include those for diabetes, fall risk, depression, and mental status. They also get some hands-on experience such as suturing, mole removal or prostate exams.

Six’s responsibilities include assisting both the students and the preceptors. For the students, she is the first point of contact, coordinating their assignments, recording grades, handling the ANGEL postings, acting as a curricular assistant and debriefing coordinators of their assignments, recording grades, handling the ANGEL postings, acting as a curricular assistant and debriefing them after rotations. For the faculty, she recruits preceptors (at conferences and by phone and mail), processes their appointments, represents their standing, certifies their teaching for CME credit, and assists them with computer or technical issues. At present, the department has about 750 clinical faculty, 275 of whom are preceptors.

That can-do attitude also permeates Six’s personal life. She spends time with her two sons, 22 and 14. She’s working on a master’s degree in administration. She’s taken up running again, and plans to participate in 5ks and farther. A former truck drag racer, she now actively and regularly participates in the sport by helping her brother with his car. “I really enjoy my life,” she says. “I like the challenge, and I thrive in the chaos. It’s like solving a puzzle.”

Your political activism is essential

by Kristopher Thomas Nicholoff

CEO and Executive Director, Michigan Osteopathic Association

Physicians spend a minimum of 10 years educating themselves on the human body. But, typically, physicians do not spend any time on the ‘bigger picture’ in medicine and how they could impact the coming changes in health care. Why?

This is why the Michigan Osteopathic Association exists – to protect, promote and advocate for the osteopathic community. The MOA does this in many ways, but, arguably, the most important is our work at the state capitol.

Certainly, the MOA’s grassroots advocacy efforts are extremely important – contacting Michigan’s legislators on important issues is equally, if not more, important. Did you know the Michigan Osteopathic Political Action Committee fights to elect and re-elect pro-physician candidates for state office who demonstrate a positive concern for those issues important to the osteopathic profession. MOPAC is not affiliated with any political party and is organized and operated on a non-partisan, independent basis.

It is the sole political action committee representing the osteopathic profession in Michigan and is governed by osteopathic physicians and medical students. The political activities are funded by the voluntary contributions of MOA members, making it possible to have significant impact in elections.

Your time and resources are limited. However, your political activism is essential to help elect candidates that represent you and your profession. I urge you to make a difference today. Please visit http://mo-osteopathic.org.JoinMOPAC and contribute as much or as often as you can. You can’t afford not to.

Remember, we can only protect our profession with your active support.

CME Programs

EXERCISE PRESCRIPTION AS A COMPLEMENT TO MANUAL MEDICINE
Conference - 7 – 8, 2013
MSUCOM East Fee Hall
East Lansing, Michigan
• 26 Category 1-A credits
• Chairperson: Mark Bookhout, P.T.

DIRECT ACTION THREAT: MOBILIZATION WITH IMPULSE
October 25 – 26, 2013
MSUCOM East Fee Hall
East Lansing, Michigan
• 27 Category 1-A credits
• Chairperson: Carl Swedes, D.O.

SYMPOSIUM FOR PRIMARY CARE MEDICINE
November 1 – 2, 2013
Sheraton Detroit-Novi Hotel
Novi, Michigan
• 17 Category 1-A credits
• Contact 248-471-8222

MANUAL MEDICINE RELATED TO SPORTS AND OCCUPATIONAL INJURIES TO THE EXTREMITIES
November 9 – 10, 2013
MSUCOM East Fee Hall
East Lansing, Michigan
• 15 Category 1-A credits
• Chairperson: Jennifer Gilmore, D.O. and Jake Rowan, D.O.

PRINCIPLES OF MANUAL MEDICINE
December 6 – 9, 2013
MSUCOM East Fee Hall
East Lansing, Michigan
• 30 Category 1-A credits
• Chairperson: Lisa DeSistano, D.O.

CRANIOSACRAL TECHNIQUES: PART I
January 24 – 28, 2014
Windmill Suites
Tucson, Arizona
• 35 Category 1-A credits
• Chairperson: Barbara Briner, D.O.

CME ONLINE
Up to 56 Category 1-B credits
• http://go.cofe862i

Treating extremities? OMM starts at the core

by Pat Grauer

If you’re using manual medicine to treat patients’ extremities for pain or dysfunction, it’s best to start with the axial skeleton – basically the skull, ribcage and vertebral column – and work your way out.

That’s the core teaching of faculty Jennifer Gilmore and Jake Rowan in their continuing medical education workshop “Manual Medicine Related to Sports and Occupational Injuries to the Extremities,” scheduled for Nov. 9-10, at Fee Hall on the MSU campus.

“For example, if you’re treating a pitcher for a rotator cuff tear and neglect the spine and ribs, the next time he throws he’ll be back in trouble,” noted Gilmore, assistant professor of osteopathic manipulative medicine. “If the spine can’t turn, then the shoulder becomes overused. You have to treat the axial skeleton first and then work out.”

“That’s why we have prerequisites for this course,” said Rowan, associate professor of OMM. “Our participants need basic knowledge of the axial skeleton. We require ‘Principles of Manual Medicine’ (or passing pretest with 80% or better), and ‘Muscle Energy I’ is recommended but not required.”

Gilmore began teaching the class in early 2002 after the death of Dean Allen W. Jacobs, who had been conducting the CME course. Rowan joined her three years later. It was originally part of a series of core CME courses spearheaded by John Mennell of the North American Academy of Manual Medicine in collaboration with MSUCOM faculty in the 1980s.

They now teach primarily muscle energy technique and joint play (articulatory and high-velocity) techniques for use in treating extremity pain and dysfunction, urging their CME students to “start proximally and work your way distally. “Lots of providers aren’t sure how to approach the extremities,” Rowan said.

“Just a few techniques let them evaluate and treat quickly and simply.”

“This is a great course, and we’re both passionate about it,” said Gilmore. When health professionals apply what they learn here, they get instant gratification: the patient feels better fast.”

James Rowan and Jennifer Gilmore (center) demonstrate OMM techniques to the extremities.
Development

Honoring the past and the future

By Pat Grauer

MSUCOM alumni have found a creative way to make their giving do twice the good. They’ve endowed scholarships to help ensure a robust future for the osteopathic profession. But then they also honor their parents in naming the scholarships for them.

Thomas A. Olen, a 1992 alumnus, did just that in creating the Henry F. Olen, DO Endowed Scholarship – a gift that delighted his dad, now 90. The scholarship supports MSUCOM students who graduated from high school in Kent County.

“My father has been my mentor all my life,” said Olen, president of MidMichigan Anesthesiology Group, and chairman of the Department of Anesthesia at MidMichigan Medical Center – Midland. “From the time that my becoming a doctor was only a dream, he encouraged my interest in the sciences and helped me develop good moral values and standards. I wanted to be just like him, an osteopathic physician.”

The elder Olen, an active general practitioner into his 80s, had served as president of the Michigan Association of Osteopathic Physicians and Surgeons (now MOA), president of the Kent County Osteopathic Society, chief of staff at Grand Rapids Osteopathic Hospital (now MetroHealth), director of medical education at Saginaw Osteopathic Hospital, and deputy director of the Kent County Health Department.

“What the osteopathic profession has to offer is a great alternative,” said Olen, “both in the thought processes that go into treating patients and the emphasis on family practice. It’s important to me to help today’s students follow their dreams.”

Mark E. Sikorski’s donation endowed a new memorial scholarship for his parents Eugene L. and Joan F. Sikorski, but it also honors an osteopathic family dynasty.

“My father was president of the Michigan Osteopathic Association, the American Osteopathic Association, a governor’s appointee to the Michigan osteopathic licensing board, and was instrumental in founding MSUCOM,” he said.

“I remember, as a boy, his talking to state legislators about establishing the college. At his death, he was president of the Michigan Osteopathic College Foundation, completing decades of service to MSUCOM.”

All four of the Sikorski offspring became D.O.’s, three of them at MSUCOM: Brenda, ’83, Lynn, ’87, and Mark, ’87. David was a graduate of the Lake Erie College of Osteopathic Medicine. In addition, noted Sikorski, their mom’s brother and first cousin and dad’s brother-in-law were osteopathic physicians, and Lynn’s son is now part of MSUCOM’s Osteopathic Medical Scholars.

“Growing up, we had two families – our Sikorski clan and the osteopathic family,” he said. “As kids, we would go to conventions and play with other D.O. children, most of whom also ultimately became osteopathic physicians.”

“My parents gave much to us as family and much to the osteopathic profession,” he said. “This scholarship is something special I can do to keep alive the memory of Mom and Dad at MSUCOM.”

MSU has appointed Suresh K. Mukherji as professor and chairperson of its Department of Radiology, a unit that is jointly administered by the College of Osteopathic Medicine and College of Human Medicine. His appointment was effective Aug. 1.

Dr. Mukherji was division director of neuroradiology at the University of Michigan for many years. He is a recognized expert in head and neck imaging, especially of head and neck cancers. His portfolio is formidable: he has published 13 textbooks, 74 chapters in books, more than 300 scientific papers and has served as an investigator on 26 grants. He serves as senior editor for three professional journals.

Mukherji received a B.A. from Duke University in 1983, an M.D. from Georgetown University Medical School in 1987, and is currently completing an M.B.A. at the University of Michigan. He took his internship at Riverside Hospital in Newport News, Va., his radiology residency at Harvard Medical School Brigham and Women’s Hospital, and a fellowship in head and neck neuroradiology at the University of Florida, Gainesville. He is a fellow of the American College of Radiology.
Bridging

Alumni, faculty and friends of MSUCOM gathered at the 2013 Summer Family Medicine Update held by the Michigan Association of Osteopathic Family Physicians Aug. 1-4 in Acme. The welcome reception (above) was held in a beachfront pavilion with an exquisite view of a Grand Traverse Bay sunset. Joanne Grzeszak, 1976 alumna and clinical faculty member, was honored for achieving President’s Club status, a recognition for donating more than $10,000 to MSU.

Upcoming Events

Sept. 30-Oct. 4 OMED: AOA’s Osteopathic Medical Conference and Exposition Las Vegas, NV, Reception on October 2
Oct. 9-13 ACOI Annual Convention Palm Springs, CA, Reception on October 11
Jan. 23-26 MAOPP Update Bellaire, MI, Reception on January 23
March 1-8 Healthy Lifestyle and Preventive Care Playa del Carmen, Mexico
March 13-15 ACOFP Philadelphia, PA

SHAPING REALITY BETWEEN THE DREAM AND THE NIGHTMARE

During the night I see:
Patients are seen same-day or within 24 hours. EMRs are efficient and time saving. The government, insurance companies, patients and ourselves. It would be good to remember that we are facing a chronic failure within our nation regarding health care, and that chronic conditions always have multiple causes.
During the night I see: Many physicians get so discouraged that they just quit, and yet some still work after they have quit. Some physicians get so tired that they just process and process and are not present with any patient or staff issue or meeting.
Then, I awake from my nightmare.
Somewhere between the dream and nightmare lies the truth. We can be present and open in our hearts and minds and display compassion and empathy to each and every person we encounter. We can listen: let the patient talk for the one minute at the beginning of the encounter even when we perceive an eternal event happening.
I have challenged myself to keep an open heart with each patient because they perceive that they have a need and are seeking “care.” Yes, many patients may have other motives and ideas that I may perceive as not productive, but even in that encounter a patient may be expressing a deeper need. I have challenged myself to not be too busy, too much in a hurry or too much in charge and to listen and really hear the patient. I have committed to be expressing a deeper need. I have challenged myself to put aside the staff issue or meeting.

In the morning I see:
Physician burnout is virtually eliminated. During the day I see: A day lived well, my soul. I am an osteopath. And I am a job well done and contentment within our nation regarding health care, and that chronic conditions always have multiple causes.
During the day I see: Many physicians get so discouraged that they just quit, and yet some still work after they have quit. Go figure. Some physicians get so tired that they just process and process and are not present with any patient or staff issue or meeting.
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2013 CALENDAR OF EVENTS

SEPTEMBER

30-4 Osteopathic Medical Conference and Exposition, American Osteopathic Association’s annual convention – Las Vegas, NV. Reception October 2. www.osteopathic.org/omed

OCTOBER


NOVEMBER


DECEMBER


JANUARY

1 CME: Symposium for Primary Care – Sheraton Detroit-Novoi Hotel, Novi. 17 Category I-A credits. Contact 248-471-8222

MARCH

19 CME: Cardiology Update – University Club, East Lansing. 8 Category 1-A credits. Chairperson Christopher Pohlod, D.O. www.com.msu.edu/cme, 517-353-9714, or cme@com.msu.edu

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