

# Family & Community MEDICINE

Fall 2002

## DR. STEVEN ZWEIG HAS DEDICATED HIS CAREER TO MAKING MU FAMILY MEDICINE STRONG

**WHEN STEVEN ZWEIG CAME TO MU** for medical school in 1975, it was clearly not his plan to stay. "But after completing my residency and fellowship in family medicine, the reasons for staying became self evident," he explains. "I had developed strong relations with people in the department who were intellectually stimulating and embodied the same values I did regarding patient care and teaching. And I had become attached to my patients; in fact, I still see many of the same patients I saw during residency. Also, I realized early on that I would have all sorts of opportunities to expand in my job here, so I didn't need to go elsewhere to make my mark."

A faculty member for nearly 20 years, Dr. Zweig has emerged as a strong, enthusiastic leader, steadfastly committed to the principles of family medicine and the mission of the department. His career has focused on clinical care, teaching, and administration, and his successes in these areas clearly demonstrate that he's made his mark at MU.

In 1984, he started the first teaching nursing home practice for residents, and in 1993, he helped develop the medical school's new Introduction to Patient Care curriculum. From 1991 to 1996, he served as director of the family practice residency, and during this time, he created the integrated residency program, which has improved the department's efforts to recruit good residents from MU's medical school.

After stepping down from residency director, Dr. Zweig went on sabbatical at Mt. Sinai School of Medicine, New York. It was a great experience, he says, and he returned - charged with the idea of expanding his role and focus in geriatrics. In the years since then, Dr. Zweig has

established himself as a highly regarded geriatrician dedicated to improving health and the quality of life for the elderly.

"Good family physicians make good geriatricians," he says, "because they are patient-centered and multidisciplinary, and have strong interest in function, quality of life, and comprehensive care."

Today, Dr. Zweig devotes more than half of his time to geriatrics and end of life care. His persistent efforts in these areas have facilitated the development of health care that helps patients and their families better deal with illness and death; learning experiences that teach medical students and residents how to care for older adults; and a fellowship that prepares family physicians for geriatric medicine.

Getting others outside the department engaged in geriatrics is important to Dr. Zweig, too. As director of MU's Care in Aging program, he leads a multidisciplinary team of University health care professionals whose goal is to create a coordinated system of care for older people. He also helped start an organization for physicians and others in Missouri who practice in the long term care continuum. The group sponsors an annual conference and produces a quarterly newsletter; Dr. Zweig serves as its editor.

When he's not doing teaching, patient care, or scholarly activities, Dr. Zweig is immersed in administrative duties. He is a co-director of the academic family medicine fellowship program, and for five years he has served as associate chair of the department, an assignment he especially values.

Dr. Zweig values each role he serves and strives to maintain focus as he

responds to the various needs of his patients, students, and colleagues. Some days, he says, this can be a challenge. However, the rewards he reaps when he sees change and positive results from his efforts make it all worthwhile.

"I like to see things change, programs succeed, residents learn and become more confident. I like to see members of the department work well together and seem satisfied in their work," he says. "I like it when my patients get well, but I recognize that reaching wholeness, whether in health or illness, may be more important than staving off death."

Dr. Zweig enjoys every aspect of his job and feels fortunate to be working for one of the best family medicine departments in the country. "Over the years we have developed a legacy that says we value caring for patients and consider teaching medical students about primary care and training residents to be good family physicians an important part of what we do. This legacy has made us strong," he says.

"So have our leaders - first, Jack Colwill and now, Hal Williamson - chairs who value the individual growth of faculty and staff. They set high goals for us and then support our efforts to reach these goals."



**STEVEN ZWEIG, MD, MSPH**  
PROFESSOR AND ASSOCIATE CHAIR

## Chair's Message

Our newsletter highlights current and former department members fulfilling our mission, and as you read this issue, you'll see we've included a bit of everything.

Like Steve Zweig. His energy has been constant for 25 years. We're proud of his efforts and the many ways he has contributed to our department's success.

David Cravens and Erik Lindbloom are making the world better for elderly patients but in two very different ways. Both are highly respected geriatricians whose work reflects well on our department.

We say good-bye to longtime colleagues Bernard Ewigman and Coleen Kivlahan as they take their vigor and expertise to Chicago. We're sad to see them go, but feel proud knowing they take with them the values and principles that have made our department strong.

Our three faculty who live and practice in Fayette recognize the importance of rural medicine. They provide wonderful role models for residents and students as they successfully blend their personal and professional lives.

Chris Farmer is a good example of an MU family practice resident training to become an accomplished practitioner. Victoria Maizes is an accomplished practitioner, and, like many of our graduates, has sought a better way of helping patients improve their lives.

Wendy Madigosky and Scott Kinkade are the first to enroll in our new "master educator" fellowship track. This fellowship should appeal to many young family physicians who hope to "make a difference" as expert educators.

Patty Schnitzer wants to reduce the occurrences of child maltreatment. She hopes to identify factors that put children at higher risk and then share this information with family physicians and others who can impact this problem.

The depth and breadth of the work featured in this newsletter is remarkable, yet it is only the "tip of the iceberg" when I consider all the myriad activities of our faculty and graduates. We look forward to sharing stories about many more of these activities in future newsletters.

**HAL WILLIAMSON**  
*Professor and Chair*

## FAMILY MEDICINE

# DEPARTMENT NEWS AND EVENTS

**ERIK LINDBLOOM** has been chosen by the Robert Wood Johnson Foundation (RWJF) to participate in its Generalist Physician Faculty Scholars Program. As a faculty scholar, Dr. Lindbloom will be awarded \$300,000 over four years to support his academic development and research project, *Risk of Elder Abuse and Neglect: Detection by the Generalist Physician*. Dr. Lindbloom, a family physician and geriatrician, has been studying elder mistreatment for three years.

"The mistreatment of older adults is a serious problem that frequently goes undetected by health care providers," Dr. Lindbloom says. "More effective risk assessment and detection by physicians should increase interventions to stop the mistreatment and improve overall health outcomes for the aging population."

Missouri's Division of Senior Services will help in this effort to identify factors associated with high risk of abuse and neglect and educate providers about these factors.

Dr. Lindbloom, a graduate of Northwestern University School of Medicine, Chicago, completed his residency at the University of California Medical Center, San Diego. He came to MU to complete a family medicine academic fellowship in research and geriatrics and has served as an assistant professor since finishing his fellowship in 2000.



**Erik Lindbloom, MD, MSPH**

**DAVID CRAVENS, MD, MSPH, CMD**, MU family medicine assistant professor, has been elected president of Missouri Association of Long Term Care Physicians (MALTCP). His term began at the MALTCP meeting held this summer in Columbia, MO. MALTCP is a statewide organization of family physicians, internists, geriatricians, and other health care professionals who practice in the long term care continuum.

Earlier this year, Dr. Cravens earned certification as a Certified Medical Director in Long Term Care, a program sponsored by the American Medical Directors Association. He currently serves as medical director at Lenoir Health Care Center, a skilled care facility that provides long term care to geriatric patients in the Columbia area.



**Coleen Kivlahan, MD, MSPH and Bernard Ewigman, MD, MSPH**

**BERNARD EWIGMAN & COLEEN KIVLAHAN**, highly respected MU family medicine professors, have decided to take advantage of new career opportunities in Chicago.

The husband and wife team completed their residency and fellowship training at MU in the early '80s. Since then, Dr. Ewigman has become a leader in family medicine research. He served as research director of the department for 10 years, and in 1999, he was named director of the Center for Family Medicine Science. Based at MU, the Center is one of only three research centers funded by the American Academy of Family Physicians. Dr. Ewigman has accepted the role of founding chair at the University of Chicago's Department of Family Medicine.

Dr. Kivlahan has served as chief medical officer for the Health Resources and Services Administration in Washington, DC and medical director of the Columbia/Boone County Health Department. Her most recent roles at the University include associate dean in the School of Medicine and director of health improvement for MU Health Care. This spring, Dr. Kivlahan received the AAMC Humanism in Medicine Award. Dr. Kivlahan is currently considering several job offers in Chicago.

"Coleen and Bernard have been important parts of our department for 20 years," says Family Medicine Chair Hal Williamson. "We wish them the best in their new jobs and continuing success in their efforts to impact family medicine."

<http://www.fcm.missouri.edu>

# FUNDAMENTAL VALUES OF RURAL FAMILY PRACTICE

Strong Doctor-Patient Relationships — The Breadth of Family Practice — A Diverse and Underserved Patient Population

MU FAMILY PHYSICIANS have cared for patients and trained residents at the Fayette Medical Clinic for years; they know and appreciate the fundamental values and rewards of rural medicine.

"Rural medicine offers an opportunity to have a major impact on a small community," says Joe Beckmann, MD, an MU family medicine faculty member and medical director at the clinic. Dr. Beckmann initially moved to Fayette in 1980 to attend Central Methodist College, a small liberal arts school located in the middle of town. While in school and working as a paramedic for the local ambulance service, Dr. Beckmann had many chances to interact with Drs. Mark Hoerl, Rick Gengelbach, and Roger Hofmeister, the first MU family physicians to manage the Fayette clinic.

Impressed by their work and the kind of medicine they practiced, Dr. Beckmann began medical school at MU with a serious interest in family medicine. He decided to pursue this interest after realizing he enjoyed every block he rotated through as a medical student. Dr. Beckmann stayed at MU for residency; then, in 1991, he joined the faculty and the clinical staff in Fayette.

"One of the things our department does so well is train competent family physicians for rural medicine," he says. "That's why when I finished residency and began practicing in Fayette, I was ready to be a small town doctor."

Paul Schoephoerster, MD joined the Fayette clinic a year later. Dr. Schoephoerster was born and raised in a small Minnesota town. While growing up, his family faced a series of illnesses, requiring them to seek health care from many different doctors.

"These experiences incited my interest in medicine as well as my determination to be a good doctor," he says. "Our family doc was a good doctor and a great role model; he helped me realize the importance and value of rural medicine."

A University of Minnesota medical school graduate, Dr. Schoephoerster came to MU for

residency because of its strong reputation in rural medicine. Then, motivated by his interest in geriatrics, he enrolled in MU's geriatrics fellowship program. After his training was complete, he was offered a faculty position at Fayette Medical Clinic.

"I bonded with the faculty and identified with the department's philosophy throughout my education," he says. "So when I was given an opportunity to stay here to teach and practice family medicine, I gladly accepted."

Tony Cook, FNP, a family nurse practitioner who is certified in family and gerontological practice, came to Fayette in 1994. He earned his nursing degree at MU and his MSN from University of North Carolina-Chapel Hill before interviewing for his current job. Even though he was born and raised in the city, Tony has always considered himself a small-town kind of person, so working in Fayette has special appeal to him.

Today, Tony is the primary care provider for his own group of patients at the clinic; he also cares for patients at many of the residential care homes in Howard County. These homes are geared to serve special-needs populations; most of their residents are

older in age.

Many of Dr. Schoephoerster's patients are older, too, and he sees them at the clinic, in nursing homes, and even in their own homes. "We all do home visits – this is unique to rural medicine," he explains. "Populations in rural areas tend to be older, so it's important for small town docs to know about geriatric care."

It's also important for small town family doctors to live in the community where they practice, says Dr. Beckmann. He says that living in Fayette improves his ability to practice medicine there. "You gain a totally different perspective of people, their care, and their lives when you are a community member."

Tony Cook agrees. "It says one thing to the population you serve if you choose to live there and share their environment, and it says another thing if you choose not to live there."

"Having the opportunity to interact with folks outside clinic, in church, school, and stores, can make providing health care easier and more rewarding for family physicians," Dr. Schoephoerster says. "Plus living in the town where we practice allows us to get involved in the community and do things we might not be able to do in larger cities."

Dr. Schoephoerster is medical director of Howard County 911 and the local Home Health and Hospice in Fayette. Tony serves as trainer for the Fayette Falcon High School football team and volunteers in the parish nurse ministry at his church. Dr. Beckmann directs the Howard County Ambulance Service, participates in local government activities, and advises community leaders on health-related issues, when asked.

J. B. Waggoner, a Fayette city council member and patient of Dr. Beckmann, recognizes the many ways the clinic and its staff contribute to the community. "Joe, Paul, and Tony have a valuable presence in our town. They care about Fayette and the people who live here, and they're committed to doing whatever they can to make this a healthy and happy community."



Family Medicine faculty who serve the Fayette Medical Clinic (left to right):

PAUL SCHOEPHOERSTER, MD; JOE BECKMANN, MD; TONY COOK, RN, MSN, FNP

THIRD YEAR RESIDENT CHRIS FARMER IS EAGER TO EMBRACE

# The Challenges and Rewards of Family Practice

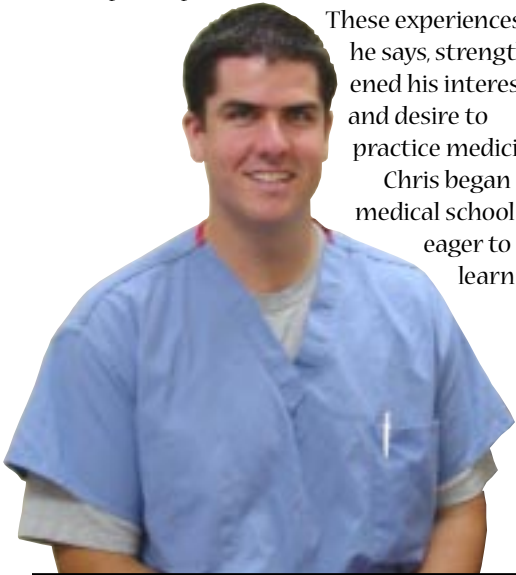
He's academically and emotionally strong. He's focused and works hard. And he cares about his patients.

WHEN CHRIS FARMER began college 10 years ago, he had a goal – to become a doctor, and being selected for MU's Conley Scholars Program made it easier for him to achieve this goal. This highly selective program assures students acceptance into medical school after completing their undergraduate work.

As a Conley Scholar, Chris had opportunities to shadow physicians and participate in other clinical activities.

These experiences, he says, strengthened his interest and desire to practice medicine.

Chris began medical school eager to learn



about every specialty, but it didn't take long for him to decide that family practice, with the diversity of patients and health care problems it provides, was most appealing to him.

Training at MU's residency program appealed to him, too, so Chris applied and was chosen for an extern position in the family practice integrated residency program. Externs are fourth-year medical students who are assigned many of the same responsibilities as first-year residents. In exchange, they receive support to help pay school expenses; plus, they are guaranteed a place in MU's Family Practice Residency after graduation.

Chris speaks highly of the extern program. "I was better prepared to play the game and succeed during residency because of my extern experience," he explains. "And because the externship gave me a headstart on my requirements, I've had more time to pursue specialized training in sports medicine."

Sports have always been important to Chris — as an athlete, a spectator, and now as a doctor. And the extra sports medicine rotations he's done during residency have allowed him to work alongside faculty who have expanded his knowledge and appreciation for this

specialty. Family and Community Medicine Clinical Associate Professor Jim Kinderknecht is one of these faculty.

"Dr. Kinderknecht has been an excellent mentor who has taught me a lot about sports medicine and how it relates to primary care," Chris says.

After Chris graduates in June, he plans to do a sports medicine fellowship. Then he'll pursue a position at a university where he can teach and provide patient care. Even though much of his time will be devoted to sports medicine, Chris is committed to making family practice the focus of his career.

"I like the idea of going to work, looking at my schedule, and having no idea what I'm in for that day," he says. "I look forward to the challenges, as well as the rewards, that family practice offers."

Chris feels good about his future, professionally and personally, and the birth of his first child – Meredith, born July 11<sup>th</sup> – is an important reason why.

"Becoming a father has already changed my perspective on being a family doctor," he explains. "I can relate better to patients who have children because I'm learning firsthand about the concerns and issues of parenting. And patients respect you more when they know you are speaking from experience."

**CHRIS FARMER, MD**  
THIRD YEAR FAMILY PRACTICE RESIDENT

## A NEW CLASS OF FAMILY PRACTICE RESIDENTS

Residency Director ERIKA RINGDAHL, MD and Associate Director STAN DORST, MD are proud to welcome these new first-year residents and externs:

<b>RESIDENT .....</b>	<b>MEDICAL SCHOOL</b>
Rebecca Collin, MD .....	Texas Tech University at Lubbock
Seema Diddee, MD .....	Gauhati Medical College (India)
Laura Eaton, MD .....	New Jersey Medical School (UMDNJ)
Bradley Labenz, MD .....	University of Missouri-Columbia
Ronald Lagasca, MD .....	Ross University (New York, NY)
Bach Nguyen, MD .....	Ross University (New York, NY)
Chris Peck, MD .....	University of Wisconsin-Madison
Rohn Rigby, MD .....	Ross University (New York, NY)
Joshua Valtos, MD .....	Emory University (Atlanta, GA)
Erek Van Riessen, MD .....	University of Missouri-Columbia
Ernest Wallace, MD .....	University of Missouri-Columbia
Alphaeus Wise, MD .....	Tulane University (New Orleans, LA)

**EXTERN IN INTEGRATED FAMILY PRACTICE RESIDENCY PROGRAM (4TH YEAR MEDICAL STUDENTS)**  
Amanda Allmon — Simon McKeown — Ryan McWilliams — BJ Schultz — Kristen Tarwater

## CONGRATULATIONS TO OUR 2002 RESIDENCY GRADUATES

**GRADUATION** for our Family Practice Residency was held in June. Two awards, whose recipients are selected by the graduates, were presented at the event.

**DILIP PARULEKAR, MD**, a surgeon who practices in Fulton, was selected for the Excellence in Teaching Award. This honor is given to a physician who is not an MU family medicine faculty member.

**DENNIS WEN, MD**, an MU family medicine physician and sports medicine specialist, won Teacher of the Year Award.

Both physicians were praised for being patient, respectful, and supportive role models and teachers.

**MARCELLA ALLEN, MD** is working on an academic fellowship at the University of Texas-San Antonio.

**MATT BECKERDITE, MD** has joined a private practice in O'Fallon, MO.

**JENNI BUESCHER, MD** is enrolled in the research track of MU's fellowship program. She has a rural practice in Fulton.

**JULIE BURDIN, MD** has joined a rural practice in Macon, MO.

**BRIAN CLONTS, MD** has joined a rural practice in Bolivar, MO.

**MICHELLE COLEN, MD** serves as a family physician at Scott Air Force Base.

**KEVIN CRAIG, MD** is enrolled in the research track of MU's fellowship program. He has a rural practice in Fayette.

**CYNTHIA HAYES, MD** is working in the ER at Fitzgibbon Hospital in Marshall, MO.

**GINA MOHART, MD** is working in Urgent Care at MU's University Hospital.

**GREG SHARP, MD** is working in Alaska; he and his wife will open a practice in rural Colorado after she finishes her residency.

**MATT THORNBURG, MD** is enrolled in the sports medicine track of MU's fellowship program. His private practice is at the Green Meadows Family Practice Center.

EVEN BEFORE SHE BECAME A PHYSICIAN, DR. VICTORIA MAIZES ASKED:

## WHAT CAN I DO TO IMPROVE THE HEALTH OF PEOPLE?

Dr. Maizes recognizes the problems of health care and has devoted her career to finding ways to make things better for patients as well as health care providers.

**VICTORIA MAIZES** is a compassionate and comprehensive physician who believes the most effective way to care for patients is to see them in the context of their families, even in terms of their communities. Nurturing meaningful relationships with patients is important to her and one of the reasons why she became a family physician.

A 1989 MU Family Practice Residency graduate, Dr. Maizes began her career in Santa Rosa, CA, where she practiced at Kaiser Permanente for nine years. Kaiser, which serves more than 2.2 million people in northern California, is one of the country's oldest and largest HMOs. It provides a full-range of health care services at no cost to its members. Going to Kaiser, says Dr. Maizes, was consistent with her interest in public health issues.

"I have a real concern for those who can't afford the health care they need," she explains. "At Kaiser, everyone was covered for all their medical needs, so we didn't have to deal with some of the insanity of the health care system today."

While practicing at Kaiser, Dr. Maizes participated in valuable activities that improved the way the HMO delivered primary care. But over time, she became discouraged by the system and the fast-paced mode in which it was forced to operate. Feeling like the philosophical ideals of family medicine were being compromised, Dr. Maizes decided to

change direction in her career. So in 1998, she went to the University of Arizona, eager to enroll in one of the first integrative medicine fellowship programs in the country.

"I've always had a strong interest in the meaning of illness for my patients," she explains. "I saw integrative medicine as an opportunity to look at patients in a more comprehensive way and to recommend things more broadly than I was taught in medical school."

Integrative medicine is healing-oriented and fits with the philosophy of family medicine. It has strong emphasis on the therapeutic relationship between doctor and patient, but also incorporates complementary or alternative medicine (CAM) when appropriate. While her training included learning about CAM, Dr. Maizes makes it clear that integrative medicine is more than just adding CAM to conventional medicine.

"Integrative medicine emphasizes the healing power of nature and the human body as well as the doctor-patient relationship that is being damaged by our current mode of practicing medicine."

Finding the best health care available from both worlds, conventional medicine and CAM, makes practicing integrative medicine challenging and time-consuming for physicians. Their initial interview with a patient usually takes up to 90 minutes, and follow-up visits can

take an hour. "Not everyone needs that much time, but we tend to see patients whose health care needs are quite complicated," Dr. Maizes says. "Many have been failed by conventional medicine; they come to us to learn what other options are available."

Dr. Maizes has been in Tucson since completing her fellowship two years ago and now serves as Executive Director of Integrative Medicine at UA. Her primary responsibilities include the fellowship program, teaching, clinical care, and administrative duties. It's a very rewarding job and where she wants to be.

"My job provides me with meaningful opportunities to make a difference for patients and medicine," she explains. "I believe integrative medicine is medicine the way it's supposed to be; it's exciting for me to see it growing and gaining acceptance in academic centers across the country."

To learn more about integrative medicine, please visit: <http://www.integrativemedicine.arizona.edu>



**VICTORIA MAIZES, MD**  
1989 Family Practice Resident

# ACADEMIC FAMILY MEDICINE FELLOWS

Fellowship Program Co-Directors STEVEN ZWEIG, MD, MSPH and MICHAEL HOSOKAWA, EdD are proud to present the MU Academic Family Medicine Fellows:

FELLOW	FAMILY PRACTICE RESIDENCY TRAINING	FELLOWSHIP TRACK/YEAR
Jennifer Buescher, MD	University of Missouri Health Care	Research: 1st Year
Kevin Craig, MD	University of Missouri Health Care	Research: 1st Year
Scott Kinkade, MD	Martin Army Family Practice (Ft Benning, GA)	Master Educator: 1st Year
Wendy Madigosky, MD	Rose Hospital, University of Colorado-Denver	Master Educator: 1st Year
Ali Mansour, MD	St. Vincent's Catholic Medical Center (NY)	Geriatrics: 2nd Year
Scott Shannon, MD	University of Missouri Health Care	Research: 3rd Year
Matt Thornburg, MD	University of Missouri Health Care	Sports Medicine: 1st Year
Dane Treat, MD	Good Samaritan Regional Medical Center (AZ)	Sports Medicine: 2nd Year
David White, MD	University of Missouri Health Care	Research: 3rd Year

## CONGRATULATIONS TO OUR 2002 FELLOWSHIP GRADUATES

**CLINT KOENIG, MD, MA, MSPH**, research fellow, has completed his master's degree in journalism. He is currently collaborating on a research project with Family Medicine Professor Dan Longo, ScD.

**PAUL TATUM III, MD, MSPH**, geriatrics fellow, has joined University of Colorado Health Sciences Center's Department of Family Medicine faculty. His duties include teaching and providing hospice and palliative care.

**CHRISTY THARENOS, MD, MSPH**, sports medicine fellow, is a physician at MU's Student Health Services. In addition, she is teaching family practice residents and medical students.

LEARN ABOUT OUR FELLOWSHIP PROGRAM BY LOGGING ONTO OUR WEB SITE: <http://www.fcm.missouri.edu>

## THE FUTURE LEADERS IN FAMILY MEDICINE EDUCATION

*Master Educator Fellowship Prepares Family Physicians for Careers in Academic Medicine*

**FAMILY DOCTORS SCOTT KINKADE AND WENDY MADIGOSKY** are enthusiastic learners who share a commitment to education. Both are seeking careers in academic medicine, and that's why they enrolled in MU's master educator fellowship program. This new and innovative program is designed to train family physicians for leadership roles in medical education.

Dr. Kinkade joined the Army after earning his medical degree in 1995. While stationed in Ft. Hood, TX, three years ago, he helped develop a family practice residency program at Darnall Army Base. Watching this program graduate its first class of residents in June was a rewarding experience for Dr. Kinkade. He values his work at Darnall Residency and credits it for initiating his interest in academic medicine. This summer, he left the Army and came to MU - eager to improve his skills as a medical educator.

Following her graduation from George Washington University Medical School in 1999, Dr. Madigosky attended University of Colorado's Rose

Hospital Family Medicine Residency in Denver. She finished residency this summer and then moved to Missouri, anxious to begin fellowship training. Academics and curriculum design have been strong interests for Dr. Madigosky as a student; now she's ready to explore these areas from a teacher's perspective.

Drs. Kinkade and Madigosky are ideal candidates for the master educator fellowship, says Michael Hosokawa, EdD, a family medicine professor who played a key role in the development of this program. Both are dedicated doctors who recognize the importance of

training competent family physicians.

"Physicians who are attracted to this fellowship see themselves as future department leaders, either in clerkships or residency programs," Dr. Hosokawa explains. "I suspect that following the fellowship, many will become institutional leaders in medical education."

Dr. Hosokawa has realized the need for this fellowship for nearly 10 years and is excited that MU is one of the first to offer master educator training. Drs. Kinkade and Madigosky are excited, too.

"I am grateful to participate in this unique opportunity; it's exactly what I wanted in a fellowship," Dr. Kinkade says. "I look forward to learning about medical education, becoming a better teacher, and working with faculty who have demonstrated success in academic family medicine."

Dr. Madigosky agrees. "I'm thrilled that this is a new concept because I've always liked being part of new and innovative systems. I also like being part of a department that has a strong reputation in family medicine education."



MASTER EDUCATOR FELLOWS

WENDY MADIGOSKY, MD AND SCOTT KINKADE, MD

# CHILD MALTREATMENT

**CHILD MALTREATMENT** can cause injury - and sometimes death. By trying to identify and define the factors that put children at a higher risk for abuse and neglect, Patricia Schnitzer, PhD, research assistant professor in the Department of Family and Community Medicine, hopes her research will reduce the occurrence of this serious problem.

Dr. Schnitzer is an epidemiologist who began her career as a registered nurse. Her first jobs and early research focused on occupational health, an interest she pursued with notable success - professionally and academically - for more than 15 years. Since coming to the University of Missouri, however, her research has had a different focus.

While working with an MU

To learn more about Dr. Schnitzer's research, please e-mail her at: [schnitzerp@health.missouri.edu](mailto:schnitzerp@health.missouri.edu)



**PATRICIA SCHNITZER, PhD**  
Research Assistant Professor

biostatistics consulting group five years ago, she was asked to participate in an ongoing research project by former Family Medicine Fellow Michael Stiffman, MD and others from the Department of Family Medicine. This study, which concluded that children living in households with one or more male adults who are not related to them are at increased risk for maltreatment injury death, initiated her interest in child abuse and neglect.

Driven by her desire to learn more, Dr. Schnitzer applied for and received a National Institutes of Health (NIH) career development award (K01 Award). In addition to financial support, this three-year award, *Risk Factors for Fatal Child Abuse and Neglect*, has given her protected time to do research, develop a research agenda, write other research proposals, and conduct a research project mentored by an expert in the field. Now in the second year of this project, Dr. Schnitzer has taken advantage of the time and opportunities her K Award has provided.

"I've talked to criminal investigators and social workers assigned to child abuse cases, learned about the child protection system from state workers, and attended meetings designed for those who specialize in this area," she explains. "I've met with physicians and other medical people who know about abuse-related injuries and can identify when a child has been abused."

Injury epidemiology and prevention

has always interested Dr. Schnitzer. So when she began studying injury in children - trying to identify whether the injury was the result of maltreatment or an accident, she recognized some of the same challenges she faced in her earlier research on work-related injuries.

"How do you identify maltreatment, which includes either physical abuse or neglect-related injuries and deaths in kids?" she asks. "Sometimes it's obvious, but sometimes it's not."

What has become obvious to Dr. Schnitzer after learning more about the different ways children die is that many injury deaths in young children are related to supervision. Motivated by this realization, Dr. Schnitzer is currently writing a proposal for another NIH grant, an R01, to study the role of adult supervision and risk of serious injury in young children. If it is funded, Dr. Schnitzer will serve as principal investigator for this five-year research project.

As her research agenda expands, so does her knowledge of maltreatment and the risk factors associated with it. Dr. Schnitzer is anxious to share the results of her work with people who can make a difference ... family physicians.

"Injury is the leading killer of kids, ages 1 to 18," she says. "Because children go to the doctor frequently during their young years, family docs have many opportunities to identify high-risk kids and families and to teach parents about protecting children from injury or potentially hazardous situations."

WE INVITE YOU TO ACCEPT THE

## COLWILL CHALLENGE

*For three years, 2002-2005, Dr. Colwill will match every gift donated to the*

### JACK M. COLWILL ACADEMIC ENDOWMENT

**\$2 FOR EVERY \$1 — UP TO \$350,000**

The Jack M. Colwill Academic Endowment was established as a tribute to Dr. Colwill's 25 years of dedicated leadership as chair of our department. Guided by his vision and strong commitment to excellence in education, we are proud to have become one of the most successful family medicine departments in the country. By offering this generous challenge, Dr. Colwill has demonstrated his continuing commitment to family medicine education.

**We invite you to take advantage of this unique opportunity to triple the size and impact of your gift. Your participation in this campaign is important to us and will be greatly appreciated.**

*For more information, please contact:* Dr. Steven Zweig, at 573/882-4991 or [zweigs@missouri.edu](mailto:zweigs@missouri.edu), or Kathy Boeckmann, at 573/884-7916 or [boeckmannk@health.missouri.edu](mailto:boeckmannk@health.missouri.edu).



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— ANNUAL —

## FAMILY PRACTICE UPDATE

May 9 - 10, 2003

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For nine consecutive years,  
a *U.S. News and World Report*  
survey of medical faculty has ranked the

**UNIVERSITY OF MISSOURI-COLUMBIA  
FAMILY AND COMMUNITY MEDICINE**  
among the top three departments in the nation.

**OUR VISION** is to be leaders in creating and imparting  
knowledge and providing service that will improve  
human health and well-being.

**OUR VALUES** include collaboration, scholarship, integrity,  
compassion, humor, and respect for self and others.  
We are committed to providing excellent care and  
service to our patients and community and  
fostering professional and personal growth.

**OUR MISSION** is to enhance health and primary care  
for our communities, emphasizing rural and underserved areas,  
through leadership in education, scholarship, and service.