

CURTIS W. & ANN H. LONG

Family & Community

MEDICINE

Summer 2011

Jack's back!

After spending the better part of his career in emergency medicine, Dr. Jack Wells decided to return to family medicine. Life as an ER doctor is fast-paced, unpredictable, and intense, and it requires taking risks. But the adrenaline rush can be huge and keeps the job exciting. Does he miss it? "No," he says, "I have no regrets about this decision. Family Medicine is a great fit for me. I should have come back sooner!"

A graduate of Ross University School of Medicine, West Indies, Dr. Wells completed his family medicine residency at Conemaugh Valley Memorial Hospital, Johnstown, PA in 1988. He did a year of private practice in Bloomington, IL before returning to Conemaugh to teach and practice family medicine. Three years later, in 1992, he embarked on his 16-year career in emergency medicine.

"When I was young, I did some moonlighting in an ER. I realized back then that I had a feel for rapid intervention," Dr. Wells says. "As an ER doc, it's about handling risks. You got to have an edge to work in an emergency room, and early in my career, I had that edge."

The first ER he worked was at a community hospital in Johnstown, PA.

"But after five years, I wanted to do the big-time trauma center," Dr. Wells says. "So I took a job at Charleston Area Medical Center, WV, where I found I could handle anything that came through the door."

Dr. Wells was feeling good about life as an ER doctor in 1998, when he joined

University of Missouri's Emergency Department. While teaching and practicing emergency medicine at MU, he was appointed medical director of MU Health Care's Staff for Life helicopter team. This role offered him new and exciting opportunities to get active in air medicine at the national level.

As the years went by, however, the level of enthusiasm he once felt for emergency medicine began decreasing.

"With age, my personality seemed less suited for ER work. It got harder for me to keep all the balls in the air at the same time. I started thinking I wasn't a doctor anymore; I felt like I had become a triage coordinator instead," Dr. Wells explains. "There's no time to really connect with patients when your job is to move them through the ER."

Dr. Wells decided to move himself out of the ER in 2008. He was working part-time in the emergency department at Audrain Medical Center in Mexico, MO at the time.

"I remember the day I called Hal Williamson (then chair of MU Family Medi-

cine) about a job. I was on my cell phone standing in the parking lot at Lowe's," Dr. Wells says. "I explained that ER work had lost its luster for me and told him I wanted to get back to my roots. Then I asked if there were any openings in his department. Hal said, 'yes.'"

Within a month, Dr. Wells had joined MU Family Medicine and was practicing at Callaway Physicians. This Fulton clinic serves a mostly rural population. His position was part-time initially, but after a year, Dr. Wells had become a full-time faculty member.

Jack Wells ... he's all about his patients.

JACK'S BACK
continued
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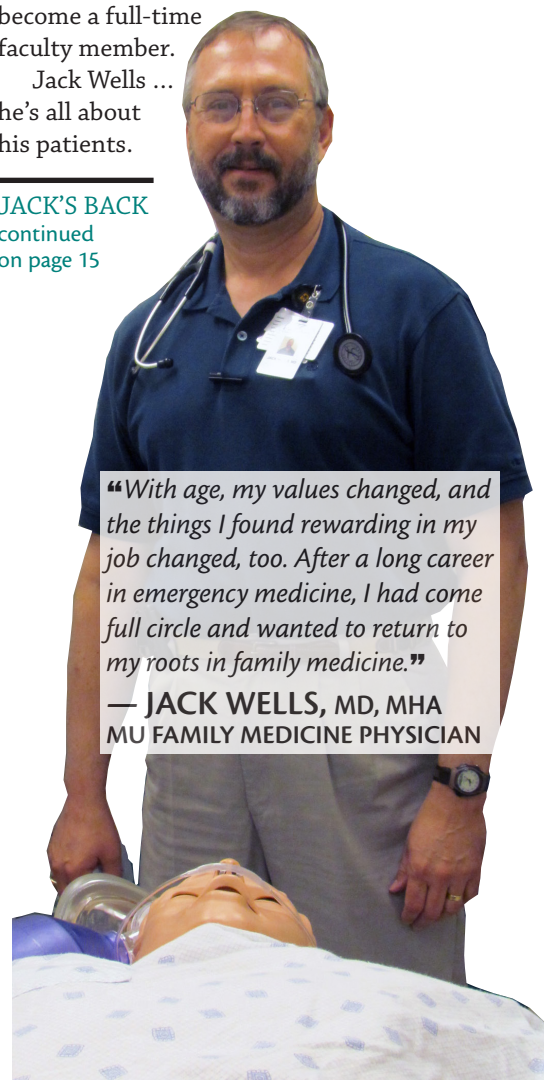
Many patients went home; some were transferred to another part of the hospital, and a few died. But only once during Dr. Wells' 16 years in the ER did a patient escape, and it's an experience he'll never forget:

"One day while working the ER at MU, an officer from the Boone County Sheriff's Department brought in a woman for a psych evaluation. After examining her, I determined she needed to be admitted for further testing and/or treatment. We put her in an exam room near the nurses' station so we could keep an eye on her while she waited to be transferred.

After a little while, we checked in on her and discovered she was gone. I was scared and very concerned, of course; no patient had ever escaped on me before. We found out later that the woman thought we were sending her to jail, so she got frightened and tried to hide.

We had no idea where she was or how she got there. Fortunately someone noticed that there was a little dirt on each shelf of the cabinet in the exam room where she'd been waiting. When we looked up, we noticed one of the ceiling tiles was askew. Then we heard a 'thunk' and watched as one of the metal supports of the ceiling buckled down. We were surprised but relieved to know which escape route she'd taken.

Our next challenge: find her. We climbed a ladder and shined a flashlight in the space, but we couldn't see her. The fire department came, and by using a hand-held infrared instrument, they were able to quickly locate the patient. She was wrapped in a blanket and tucked in between the ceiling boards. A firefighter hoisted himself onto the ceiling to get and carry her down. After re-examining the patient, I was happy to learn she was fine. And she was happy to learn she was not going to jail."



"With age, my values changed, and the things I found rewarding in my job changed, too. After a long career in emergency medicine, I had come full circle and wanted to return to my roots in family medicine."

— JACK WELLS, MD, MHA
MU FAMILY MEDICINE PHYSICIAN

CHAIR'S MESSAGE

I am sure you will agree that Kathy Boeckmann does a nice job in telling our department's story. The special issues of the newsletter focusing on our alumni such as this one so well describe our legacy – now over 400 graduates of our residency and fellowship programs. I also enjoy the in-depth stories of our current faculty and residents – and each year am proud again of our departing residents. We will see many of our colleagues moving on this year; they will be missed. Although they cannot be replaced, new folks are joining and will participate in our ever-expanding practices and academic programs.

As a department, we must both endure and change. The needs of our patients and our learners will always be there. How we provide service, enhance our training, and pursue the answers to important clinical questions, must constantly evolve.

I, for one, am optimistic. I am confident that we have the right vision, embrace the right mission, and possess the right values that will be sustaining regardless of who is in my job or working here in Columbia. While the past is a bit clearer, our future extends much further. Having just returned from Wyoming, I appreciated being able to see a 360 degree horizon. Being part of Family and Community Medicine at MU is a pretty good ride.



STEVEN C. ZWIG, MD, MSPH
PAUL REVARE FAMILY ENDOWED
PROFESSOR AND CHAIR

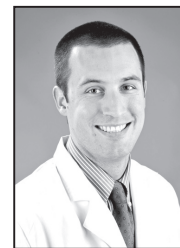
MU FAMILY AND COMMUNITY MEDICINE

FACULTY FOCUS

— — WELCOME BACK — — —

AARON GRAY, MD, has returned to the University and will be splitting his time between two departments, MU Family and Community Medicine and Missouri Sports Medicine, a unit of Orthopaedic Surgery. Dr. Gray, a 2010 graduate of our residency program, just completed a one-year primary care sports medicine fellowship at University of California-Los Angeles.

An assistant professor of clinical family and community medicine, Dr. Gray will see patients at Green Meadows Clinic, and he will teach residents in clinic and on our inpatient service.



JAMIE OGDEN, MD, has accepted an invitation to join the faculty of MU Family and Community Medicine. Dr. Ogden has practiced medicine at a rural health clinic, CoxHealth Center in Aurora, MO, since finishing her residency at MU in 2008. In addition to providing outpatient care, she worked with nursing home and hospice patients in Aurora.

An assistant professor of clinical family and community medicine, Dr. Ogden will see patients at our Smiley Lane Clinic, and she will do outpatient attending for residents.



— — FAREWELL — — —

JOSEPH BECKMANN, MD, decided to move closer to his hometown – St. Louis – where he joined the SSM Health Care system. He is practicing adult inpatient medicine with two other family physicians in St. Peters.

Dr. Beckmann, an MU School of Medicine graduate, served as a faculty member in our department since finishing his residency here in 1991. He practiced rural family medicine, including OB, at Fayette Medical Clinic for 17 years, and in 2008, he moved to our Smiley Lane Clinic.



JOSEPH LEMASTER, MD, MPH, accepted a faculty position at University of Kansas Family Medicine. Dr. LeMaster, who did missionary medical work in Nepal during the 1990s, moved to a Kansas City, KS neighborhood, where an enclave of Nepali refugees lives. While at KU, his goal is to develop a primary care clinic that provides enhanced care for refugees and immigrants.

Dr. LeMaster earned his MD from KU and did residency at John Peter Smith Hospital in Ft. Worth, TX. He was recruited by MU Family Medicine to teach, do patient care, and continue his research on diabetic foot problems in 2002, after completing his MPH at the University of Washington, Seattle.



SARAH MCELROY, MD, MS, joined her husband in Oregon to practice outpatient family medicine at Southern Oregon Rehabilitation Center and Clinics (SORCC) in White City, OR. Her husband, T. Hewitt McElroy, DDS, directs the dental department at SORCC.

Dr. McElroy was a dietician before pursuing her career in medicine. She joined the MU Family Medicine faculty in 2000, after finishing medical school and residency here at the University of Missouri. She has practiced at Keene Family Medicine Clinic for the past 11 years.



CHRISTY THARENOS, MD, MSPH, is enrolled in a medical humanities fellowship at Georgetown University, Washington, DC. While at Georgetown, she will do patient care and teach. She will also be developing a medical humanities project that incorporates visual arts and filmmaking ... her passions.

Dr. Tharenos completed her MD, residency, and an academic fellowship at MU. In 2002, she joined MU's Family Medicine faculty and the staff at the Student Health Center. For nearly 10 years, Dr. Tharenos has been attending for residents at Green Meadows Clinic and providing primary care, with an emphasis on sports medicine, to University of Missouri students.



RALPH SCHMITZ, MD, who earned his BS from UMKC, worked five years at a blood center before deciding to become a doctor. He graduated from MU School of Medicine in 1987, and after completing family medicine residency at MU, he moved to Monett. A town of 7,400 located in southwest Missouri, Monett has been a great community for Dr. Schmitz to live and practice. He loves being a small town family doctor. He enjoys his work as a preceptor, too. Medical students value their time with him and are inspired by his positive attitude, strong work ethic, and commitment to patients.

“DR. SCHMITZ is an excellent preceptor who promotes medicine as a life-long learning profession. By example, he showed me that the highest priority in medicine is caring for the patient.”

“DR. SCHMITZ was conscientious about orienting me to his clinic and made clear his expectations of me as his student. After I presented a patient, participated in a procedure, or did a physical exam, he'd give me immediate feedback about my work. And he allowed me time in clinic to read about disease processes I'd seen in actual patients; that helped me solidify learning points then and there.”

“DR. SCHMITZ is respectful and encouraging, and he communicates well with patients and with students.”



What attracted you to family medicine?

RS: Several factors influenced my decision to pursue family medicine. I grew up in Westphalia, a town outside Jef City, and my family had one physician who took care of all eight of us. I have fond memories of our family doc and the care he provided.

As a med student, I enjoyed interacting with family medicine faculty and felt like I had a lot in common with them. During my third year, I was sent to Aurora, MO for my rural preceptorship. After that, I knew I wanted to become a small town family doctor.

Why rural medicine?

RS: Because of my great preceptorship experience, I wanted to go back and practice in Aurora. But they had no need for a doctor when I finished residency. Monett did need me, however. I was eager to go, but my wife had reservations about moving to a rural area. She was a med tech with her own career, and opportunities to pursue it would be limited in a small town. I convinced her to come, and for the past 20 years, she has been incredibly supportive of me and our decision to move here.

How would you describe your practice?

RS: When I moved to Monett in 1990, there was a hospital and one other family doctor in town. At the start, I had a solo practice and did it all (except OB): clinic, call, ER, inpatient, and nursing homes. Today, I have a partner who covers for me when I'm out of town. If I am in town, however, I always take my own call. I think continuity of care is important for me and my patients.

My practice is affiliated with St. John's Regional Medical Center, and this affiliation gives us access to up-to-date health literature, the electronic health record, and a network of specialists in the region. Our hospital, now owned by CoxHealth, has hired a group of hospitalists, so I no longer do ER or inpatient care.

We currently have eight physicians who practice in Monett, seven family physicians and one surgeon. If my patients need specialty care, I refer them to someone in either Springfield or Joplin.

And what about your patient population?

RS: I can't give you an exact number, but I'm sure I have thousands of patients in the area. Some of them I've seen since I first came to Monett. They are all ages – babies to people who are over 100 years old. I do clinic four days and make about 100 nursing home visits every week. We have two nursing homes in town, and I am medical director of one of them.

When and why did you begin precepting?

RS: I wasn't sure I had the time or knowledge to teach, so I wasn't a preceptor during my first years in practice. But my attitude and confidence about teaching changed after the MU Area Health Education Center came to our area around five years ago. MU-AHEC has been a great resource. Not only has it given me the option, tools, and training to teach, it's also provided me opportunities to network with my colleagues from rural areas.

Today, I precept a couple students a year ... enough to make me feel like I'm making a difference. I teach only MU students because my experiences with them have always been good. I enjoy their enthusiasm, energy, and eagerness to learn.

Why and how do you teach?

RS: I enjoy teaching and believe that I have things to share with students. I want their time with me to be valuable, so I try hard to give them something interesting to see while they are here.

When they leave, I want them to feel like they've learned a lot, so I inundate them with info – inside and outside the exam room. And it's not just the routine things students see me do; they also see me face and respond to new situations. Sometimes we're all learning at the same time, and that's exciting for everyone.

I am honest with students about the challenges and the rewards of being a small town doctor. I love what I do and hope students see that. My goal is to make them want to become the best doctor they can be in whatever specialty they choose.

What are the rewards/the challenges of your job?

RS: I consider it a privilege to take care of my patients and be such an important part of their lives. The challenge has always been to balance my professional and personal responsibilities. I've been blessed with an understanding wife and terrific children.

What makes you want to come to work every day?

RS: I've always been fascinated by the daily, continuous learning process – the science – of medicine. But what I value most about my job are the opportunities I have to use the art of medicine to help and heal people when they need it.

Family?

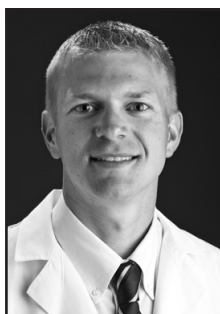
RS: Geri, my wife of 29 years, and I have two children: Allison just finished graduate work in occupational therapy at Rockhurst, and Jonathan is pursuing a graduate degree in landscape architecture at University of Arkansas-Fayetteville.

CONGRATULATIONS TO OUR RESIDENCY GRADUATES

CLASS OF



THEA BERNARDO, MD
Thea is moving to Chicago to do a Maternal and Child Health Fellowship at PCC Community Wellness Center/West Suburban Hospital, Oak Park, Illinois.



CORY BETHMANN, MD
Cory is staying in Columbia while his wife, Sheri, completes year three of her family medicine residency. Cory is practicing at the new Boone Family Medicine Clinic.



JILL BOSANQUET, MD
Jill has joined our faculty and is practicing at Keene Family Medicine Clinic while her husband, James, finishes his internal medicine residency at MU.

2011



CRYSTAL COOK, MD
Crystal moved with her husband, David, and their daughter, Lydia, to California, a small, rural town in mid-Missouri. Crystal is practicing at the California Family Health Center.



MARGARET DAY, MD
Margaret, who lives in Columbia with her husband, Darren, and their children, Kathryn and Charlie, has joined our faculty and is practicing at Keene Family Medicine Clinic.



KIMETHA FAIRCHILD, MD
Kimetha and her husband, Jason, are staying in Columbia so Kimetha can continue caring for uninsured and underinsured Boone County families at the Family Health Center.



JOY FROELICH, MD
Joy, who lives in Columbia with her children, Kol, Kya, Ty, Jacoby, and Eli, is practicing at Boone Family Medicine Clinic while Rylie, her SO, completes his neurosurgery residency at MU.



DONNIE GOELLER, MD
Donnie, his wife, Emily, and children, Sophie and Cici, moved to St. Louis. Donnie is working at Urgent Care while Emily, who begins dermatology residency next year, does a one-year internship.



NICK GREINER, DO
Nick moved to St. Louis and will begin the one-year Primary Care Sports Medicine Fellowship Program directed by St. Louis University Department of Family and Community Medicine.



JAMIE HARRISON, MD
Jamie, her husband, Michael, and their daughter, Katherine, moved to Jackson, a small town in southeast Missouri. Jamie is practicing at Plaza Primary Care in Cape Girardeau.



LANDON HOUGH, MD
Landon and his family, wife Jenette and daughter Elizabeth, are living in New York City while he completes a Primary Care Sports Medicine Fellowship at the Hospital for Special Surgery.



LUKE STEPHENS, MD
Luke is staying at MU to complete a two-year academic fellowship. He and his wife, Amanda, an OB/GYN resident, have a daughter, Isabella, and are expecting a son this fall.



CASEY WILLIAMS, MD
Casey is staying in Columbia and has enrolled in the research track of our department's two-year fellowship program. He plans to pursue a career in academic medicine.

A NEW CLASS OF FAMILY MEDICINE RESIDENTS

WE ARE PLEASED TO PRESENT OUR FIRST-YEAR AND INTEGRATED RESIDENTS

RESIDENT	MEDICAL SCHOOL
Blake Barnes, MD	University of Missouri
Mark Barnett, MD	University of Missouri
Joni Bramon, DO	Kirkville Osteopathic
Christina Crumpecker, MD	University of Colorado
Emily Doucette, MD	University of Missouri
Morgan Unruh Elmore, DO	Kansas City University
Erin Fisk, MD	St. Louis University
Nathan Granneman, MD	University of Missouri
Kim Lock, MD	University of Missouri
Ashley Millham, MD	University of Missouri
Cameron Rumsey, MD	University of South Dakota
Lincoln Sheets, MD	University of Missouri
Amanda Shipp, MD	University of Missouri



INTEGRATED RESIDENTS (4TH-YEAR MU MEDICAL STUDENTS):

Natalie Abert – Kristina Anderson – Craig Luetkemeyer – Mark Mueller – Morgan Schiermeier – Jamie Yust

WELCOME TO OUR NEW FELLOWS

We are proud to introduce our new Family Medicine Fellows:

LUKE STEPHENS, MD RESEARCH FELLOW

MEDICAL SCHOOL:
University of Missouri
FAMILY MEDICINE RESIDENCY:
University of Missouri

CASEY WILLIAMS, MD RESEARCH FELLOW

MEDICAL SCHOOL:
University of Missouri
FAMILY MEDICINE RESIDENCY:
University of Missouri

ALUMNI UPDATES

ROB CRANE ('81 Resident) was chosen for AAFP's 2011 Public Health Award, an honor that recognizes an individual for his/her extraordinary contribution to the health of America. Rob is a faculty member at Ohio State University Family Medicine, and throughout his career, he has focused much of his time and energy on nationwide efforts to prevent tobacco addiction.

JERRY KRUSE ('82 Resident; '84 Fellow) was selected president-elect of the STFM Board of Directors in April. Jerry joined Quincy Family Medicine, a residency training site for Southern Illinois University (SIU) in 1984, and since 1998 he's served as chair of SIU's Department of Family and Community Medicine. Jerry continues to practice, teach, and live in Quincy.

KEVIN CRAIG ('02 Resident; '05 Fellow) and his wife, Angie, welcomed their second son, Declan James, to their family in April 2011. Declan is the younger brother of Kylan Joseph, who was born in January 2009. Kevin, a geriatrician, is on faculty here at MU Family Medicine.

JAMES BIRCH ('06 Fellow), assistant professor at KU Family Medicine, won the 2011 Mentor of the Year award. He was recognized for his leadership and dedication to family medicine residents.

JACK ('09 Resident) and **DANA** ('10 Resident) **GALBRAITH** adopted their first child, a son named Joseph Abate, born April 26, 2009 in Ethiopia. Joseph came to the U.S. to join his new family on April 11, 2011. Jack and Dana live in St. Louis and practice at St. Anthony's Family Health Partners.

FAMILY MEDICINE GRADUATES

These graduates were not included in our 2011 ASK FOR ADVICE project (pgs 6-13).

BRYCE PALCHICK, MD **RESIDENCY CLASS OF 1981**
Preferred Primary Care Physicians PITTSBURGH, PENNSYLVANIA

DIANA WIDICUS-DAVIS, MD **RESIDENCY CLASS OF 1981**
Springfield Priority Care SPRINGFIELD, ILLINOIS

DENISE JOHNSON, MD **RESIDENCY CLASS OF 1991**
Lake Pointe Medical Partners ROWLETT, TEXAS

BETTY ANNE NOLL, MD **RESIDENCY CLASS OF 1991**
Family Health Center MARCELINE, MISSOURI

LARRY SCROGGINS, MD **RESIDENCY CLASS OF 1991**
Boone Hospital Center Emergency Room COLUMBIA, MISSOURI

MARK KORTE, MD **RESIDENCY CLASS OF 2001**
Logan Primary Care HERRIN, ILLINOIS

TADD THOMPSON, MD **RESIDENCY CLASS OF 2001**
Maury Regional Ambulatory Care Center COLUMBIA, TENNESSEE

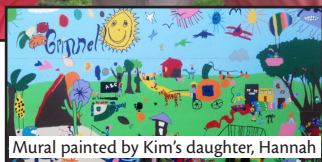
JAMES BRILLHART, MD, MSPH **FELLOWSHIP CLASS OF 2001**
St. John's Mercy Hospital Emergency Room WASHINGTON, MISSOURI

If you would like to participate in this project, please call or e-mail your advice to:
Kathy Boeckmann @ 573-884-7916 or boeckmannk@health.missouri.edu

We'll publish it in a future newsletter!



Kim with wife, Elaine, and daughter, Nora



Mural painted by Kim's daughter, Hannah

“ ■ On my first day of medical school, I was told that to find out what was wrong with a patient, you need to take a good history. I believe this advice more every year. Those who think this job can be delegated to someone else who clicks it in for them is: A) out of their ever-loving mind, B) a plaintiff attorney's dream, and C) not going to be my doctor.

■ (20 years)(365 days)(57 calories) = 416,000 calories, the number of calories in 100 pounds of fat. It's not hard to put 57 calories in your mouth at one time, but to burn those 57 calories, you'll need to walk or run half a mile. You will care for a lot of patients who gain 100 pounds of fat in 20 years. They will tell you, “I don't eat that much!”

■ Eat less/Move more. It's OK to be hungry.

■ Everyone wakes up each day and repeats the day before. Bad habits perpetuate themselves, so develop good ones. We're all in a rut; the trick is to get into the right one.

■ You will wait a long time before you hear, “Doctor, I eat too much salt.” After 25 years, I finally had someone spontaneously say that.

■ One day I asked Gerald Perkoff, whom I was fortunate to have as an attending in med school

and residency, “How could that happen all of a sudden?” He looked at me like I was out of my mind and replied, “Son, everything happens all of a sudden. No matter what the condition is, you go from one day when you feel fine to the next day when you don't. If you are standing next to a 10-foot tank that a guy is adding a teaspoon of water to daily, it will take a long time to fill ... but there will come a day when you get wet – all of a sudden.” Patients will think that the suddenness of the onset of symptoms is the key clue to what's wrong with them. It's not often so.”

KIM COLTER, MD
RESIDENCY CLASS OF **1981**

DR. COLTER: “Tim Long and I formed a partnership to cover obstetric patients during our chief resident year 31 years ago, and I am still fortunate to call him my partner now. Our group – Patients First Healthcare based in Washington, MO – now numbers 11, six of whom are alumni of the residency program,” he says. “I find the day-to-day practice of medicine to be rewarding, despite the frustrations of EMR, pre-certification, the hurdles to patient care placed by various entrepreneurs, and the obesity epidemic.”

Dr. Colter continues, “Elaine and I are the parents of two daughters, Nora and Hannah, who have outstripped their parents academically and athletically. (They take after their mother, and they may have been blessed more by growing up in a home without television than by any genes they received.) I am very grateful for each sunset, birthday, and graduation – having survived a colon cancer 16+ years ago. I am grateful to still be able to experience the large measure of solace that comes from the pleasant exhaustion at the end of a long run. Observing deep sky objects with a very large aperture telescope while listening to the owls hoot and the deer snort has become another source of peace.”

“Life is short. Do what you need to do to make it work for you and those you love. Change is inevitable. You might as well be the engine as the caboose.”

ROB CRANE, MD
RESIDENCY CLASS OF **1981**

DR. CRANE: “30 years, wow. I should have had a V-8!” he says.

After Columbia, Dr. Crane moved with Sandy Sullivan to Flagstaff, AZ, where he set up a full service, solo practice. He and Sandy married and had their daughter, Whitney.

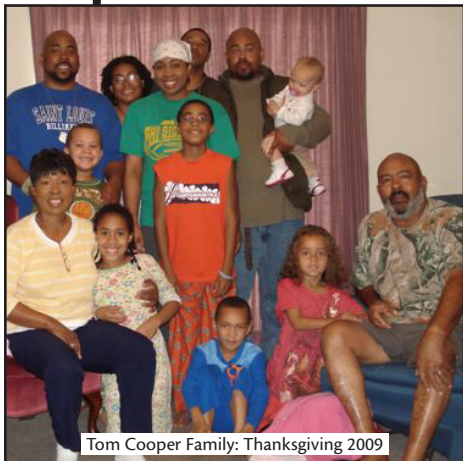
“I was working too hard in Flagstaff and also worrying about my dad who had developed lung cancer, so I moved back to my hometown, Columbus, OH, and accepted the role of associate director of Riverside Family Medicine Residency,” he says. “During my 10 years there, I became an HIV specialist and eventually joined Ohio State University's residency, where I work today.”

In the late '90s, when HIV became more chronic disease and less death sentence, Dr. Crane began to focus on tobacco issues. He started Preventing Tobacco Addiction Foundation, an organization dedicated to raising the tobacco purchase age to 21 (tobacco21.org). Despite spirited attempts in several states, including a close call in California, T21 never succeeded anywhere, he says. But he later co-founded SmokeFree Columbus, and that group took the largest city outside of New York and California entirely smokefree in 2004. Ohio voters approved a statewide smoking ban two years later.

“My marriage, not quite so successful, ended in 1993, but Sandy and I achieved an interesting parenting arrangement (KidsStay.org). I married Shannon in 2002, and we have two boys: Connor, 7, and Chase, 4. Whitney just finished her MPH at Yale, and I remain blissful and still teaching, primarily Med1s and R1s,” says Dr. Crane.



Rob with son, Chase



Tom Cooper Family: Thanksgiving 2009

“Spend as much time understanding your surroundings as you spend on medicine itself, while staying on the cutting edge of whatever you do. Pay attention to traffic on both sides of life’s highway. Dedicate more time to observing, listening, and absorbing information than to dispensing it. Know that ALL PEOPLE are important and that NO ONE knows enough. Lastly, I offer this quote that I’ve paraphrased from Jerry Rice – the best-ever receiver in the NFL, ‘I do things today that no one else is doing, so that tomorrow I can do things that others can’t.’”

TOM COOPER, MD
RESIDENCY CLASS OF **1981**

DR. COOPER: “I’m trying to be the best small farmer I can be – raising feeder calves and farming about 400 hundred acres of grasslands. I truly enjoy being a father and grandfather and improve at these roles daily. In recent years, I’ve gotten involved in the alumni associations of my high school, Lincoln University (Jefferson City), and MU School of Medicine, and I’ve become more active in my community (Fulton),” he says. “Never before in my 64+ years on this earth have I been able to put in so many hours doing what I really enjoy doing ... Life is great!”

“Find a good partner and stick with him (or her)!”

MIKE FREDERICH, MD
RESIDENCY CLASS OF **1981**



Mike with grandchildren, Samantha and Caden

DR. FREDERICH: After residency, Dr. Frederich spent four years doing private practice in Fulton, one year helping set up a family medicine residency program at Deaconess Hospital in St. Louis, and another four years on faculty at the SIU-Belleville (IL) Family Practice Residency Program.

After these experiences, Dr. Frederich served 20

years as a full-time hospice medical director in many different locations, including Belleville, IL; Jacksonville, FL; Indianapolis, IN; and San Diego, Riverside, and Los Angeles, CA. For eight of these years, he served on the board of directors of the American Academy of Hospice and Palliative Medicine, and he assisted with the birth of the new hospice and palliative medicine specialty. Dr. Frederich ended his hospice career in Martinsburg, WV.

“In 2010, my wife, Diane, and I moved to Las Cruces, NM primarily to be near my son, Jason, and our two grandchildren, Samantha and Caden. Since that time, I’ve returned to private practice with the Rio Grande Medical Group. I work full-time providing primary care in an inpatient office and have staff appointments in our two community hospitals,” Dr. Frederich says. “Other than being with family and grandchildren, I continue to enjoy reading and fly fishing. And for the past ten years, I’ve been a civil war re-enactor, portraying either a common private soldier or a regimental surgeon for union or confederate forces.”

■ Be ready for change in your career; it will happen. Most of all, enjoy your patients – young and old – and learn from them. If you listen, they will tell you all you need to know.

■ Family steadies your life; love and respect them for they will be your lifeboat when you need to escape from a leaky ship!”

DOUG KENNEY, MD
RESIDENCY CLASS OF **1981**

DR. KENNEY: Dr. Kenney has practiced at the same location in Clinton, MO since finishing residency. For the past 30 years, he has delivered more than 2,000 babies (he quit OB in 2005), worked the local ER and ICU, and cared for a large and diverse patient population. He credits the residency training he received at MU for adequately preparing him to do all of these things.

“My wife, Kristi, and I have raised four children: three boys and a girl (a federal agent, electrical engineer, and two school teachers). My daughter, Jaime, played college basketball as a four-year starter at Avila University in Kansas City, MO. We also have three grandgirls!” Dr. Kenney says. “Kristi is an attorney and enjoys an active practice. She (we) had two tries at running for state representative. She (we) failed both times but made many new friends during the processes. (real life experiences!)”

“I’ve enjoyed playing softball (quit two years ago), hunting (the quail have vanished), and supporting our children through their school and sports activities,” he adds.



Doug Kenney Family

“WHAT ADVICE DO YOU HAVE FOR OUR 2011 FAMILY MEDICINE GRADUATES?”

CLASSES
1981 — of — 1991 — 2001



Ellen with business partners, Lucas and Larry Schreiber

“ ■ Get privileges for colonoscopies and get good at them; then do them one-half day each week.

■ Find a job that allows you to do the work you enjoy doing and encourages you to continue learning so you are able to become the best doctor you can be.

■ Be thankful that you grow in humility, empathy, and true love for the people you serve.”

ELLEN RHEA WARREN, MD

RESIDENCY CLASS OF **1981**

DR. WARREN: “I seem to be in the middle of a mid-life crisis ... hopefully starting down the slope on the other side!” she says.

Dr. Warren is still business partners with Larry Schreiber and practices in Taos, NM. When they stopped doing inpatient (including OB and ICU) in 2008, the hours and demands of their practice improved. She was home at night and didn't have to do morning rounds at the hospital every day. She played softball, racquetball, and tennis, and she enjoyed hiking, skiing, and playing the piano. “Our children were okay,” she says. “Life was good.”

But several challenges made Dr. Warren's life difficult late last year. She had to go online (she doesn't like computers) to complete three modules required to maintain her certification in family medicine, and she had to take a test to recertify as a clinical bone densitometrist. Her office went live with the EHR (Athena) in November. Around that same time, her dog went on hospice and died, and then, while walking across the tennis court, she suffered a painful back injury.

Things have started improving for Dr. Warren, however. She explains, “I completed all three modules for family medicine certification and passed the bone densitometrist test. My attitude toward computers is getting better; now, at the end of each visit, I can hand my patients a typed copy of their complete medical record,” she says. “I'm slowly getting back to slow pitch softball, and most important, my son is proud of his mother.”

“Continue to seek out private practice opportunities with physician-based medical groups that are dedicated to the care of their patients, their communities, and to the physicians themselves. Surround yourself with colleagues who share your same interests but also allow yourself to be challenged by those with different points of view. Resist the temptation to slide into mediocrity.

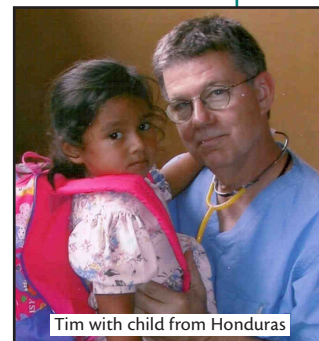
“Hang around with people who are smarter than you!” — that piece of advice has always helped me out.”

TIM LONG, MD

RESIDENCY CLASS OF **1981**

DR. LONG: “I continue to practice in Marthasville, MO, as a member of Patients First Healthcare – Family Health Care Division. I'm still with my two original partners, Jim Turner and Kim Colter, and am thankful to have eight other younger partners. I have long since given up obstetrics but continue to enjoy the full spectrum of family medicine, frequently serving four generations of families. In spite of, and perhaps because of, the electronic medical record, I find myself in exciting times medically. HMOs and PHAs are now poised to metamorphosis into the ACO or value-based network. Who knows?” he says.

“Jan and I remain happily married with three children and five grandchildren. We continue to travel to Honduras annually. Next year, 2012, will mark our 20th trip with the Washington overseas mission: www.overseasmission.org,” Dr. Long adds.



Tim with child from Honduras

“Go with the flow.”

DAVID CRAVENS, MD, MSPH

RESIDENCY CLASS OF **1981**

DR. CRAVENS: Dr. Cravens continues to be a faculty member at MU Family Medicine. His specialty is geriatric medicine, and he serves as medical director of two nursing homes, The Bluffs and Lenoir Woods.

He and his wife, Tookie, have been married 35 years.



David

“ ■ Learn to manage chronic pain.
■ Learn psychiatry and psychopharmacology well.
■ Practicing good medicine requires long hours and hard work, but avoid fuzzy boundaries between work and family.”

JOE BECKMANN, MD

RESIDENCY CLASS OF **1991**

DR. BECKMANN: “After 20 years on faculty at MU Family Medicine, I decided to leave mid-Missouri. This decision was driven by a desire to live closer to my hometown and family,” he says. “My wife, Leissa, and I moved to St. Peters, a city just outside of St. Louis. I've joined the SSM group in a relatively new practice with two other family physicians and am excited to be doing adult inpatient medicine. I no longer provide prenatal and delivery care, which is a sad thing when the sun is shining and not a bad thing in the middle of the night!”

“Leissa, a nurse, has accepted a position in the surgical intensive care unit at St. Anthony's Hospital. My oldest daughter, Brittany, is a senior in college and engaged to be married. My youngest daughter, Sydney, graduates from high school next year. My stepson, Josh, has completed school to be a certified welder and works in mid-Missouri. My stepdaughter, Kyana, graduated from high school and will live with us while she attends college. We are, of course, very proud of all of them,” Dr. Beckmann adds.



Joe with wife, Leissa

“Value the lessons you learn from your patients and the children in your lives. They are among our most valuable teachers.”

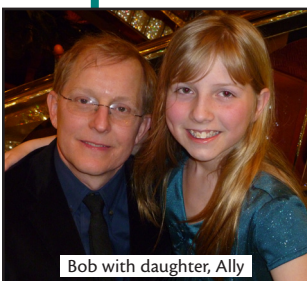
DEBRA HOWENSTINE, MD
RESIDENCY CLASS OF **1991**

DR. HOWENSTINE: “Greetings. Bart and I are still in Columbia, and our daughters, Corey and Emelyn, are now 16 and almost 14. We live in the ‘country,’ just outside of town and enjoy the wildlife (recently Barred Owls) and space for a garden and animals. Corey and Em have gradually accumulated a large menagerie of pets (three large donkeys, one mule, 28 chickens, two dogs, four cats, two chinchillas, a cockatiel, two geckos, many fish, and most recently six ducklings who started out in the bathtub). Bart still runs a plant nursery, specializing in unusual plants for the avid gardener,” she says.

“Clinically, I continue to work with underserved patients and am medical director of Boone County Health Department. I attend for family medicine residents at the local federally qualified health center, and I’m a faculty advisor for med students who work at MedZou, a student-initiated free clinic. In addition, I’m addressing issues related to culturally effective health care/disparities/literacy in the med school curriculum,” Dr. Howenstine adds.



Debra Howenstine Family



Bob with daughter, Ally

“To get your patients to love you and believe that you are the best physician they’ve ever seen, do two things:

■ **FIRST** (probably the more important piece of advice): Listen to their stories. Yes, at times you can guide the conversation, but no matter what time of day it is or how busy you are, give them your full attention. Another physician

may know more than you, but listening gives you an edge and will be the key to your success.

■ **SECOND:** When you are with a patient, remember HE or SHE IS the most important and the most interesting patient of the day.

Doing these things has always worked for me and is the reason why after 20 years I still love my profession. Smooth sailing!”

BOB NEUBAUER, MD
RESIDENCY CLASS OF **1991**

DR. NEUBAUER: “It’s hard to imagine that I’ve been working in Wasilla, AK for the past 20 years. Cindy, my wife, and I moved here on the two-year plan after residency. I have a unique practice that combines primary care, urgent care, and some ED work. For several years, I was medical director for our local hospice program, and this role was one the most rewarding experiences I’ve had in Alaska,” he says.

“We have two great kids, Zach, 15, and Ally, 12. Both my wife and I are quite involved in our children’s school activities and were coaches for their Science Olympiad teams,” Dr. Neubauer says. “I helped create Alaskans for Palmer Hayflats, a non-for-profit organization formed to protect our local wildlife refuge, and I’m involved with efforts to start an anti-drug coalition that will be run through our United Way. Both projects have been fulfilling for me.”

“Currently, I run a 24-foot Bayliner in Prince William Sound. If you’re interested, let me know and I’ll talk about Halibut hot spots,” adds Dr. Neubauer.

“Make good choices!”

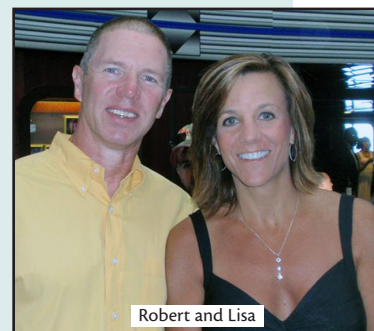
**ROBERT PIERCE, MD, MSPH
& LISA PIERCE, MD**
RESIDENCY CLASS OF **1991**

DRS. ROBERT & LISA PIERCE:

“Robert and I still run the private practice, Fulton Family Health Associates (FFHA), that Robert started in 1993. Our group now includes another partner and two physician assistants,” says Lisa. “Robert was the driving force behind converting our practice to an EMR in 2003. We use a McKesson product, Practice Partner. After becoming a ‘super user’ within this EMR community, Robert was hired by McKesson this year to be medical director of product development. Even though his EMR work keeps him very busy, Robert continues to see patients one day a week.”

“I see patients full-time at FFHA,” Lisa adds. “I just finished a term on Fulton Public Schools Board of Education, but I remain active in Fulton Band Boosters and other local organizations.”

The Pierces have three children. Adam, 20, is studying mechanical engineering at Purdue University. Jacob, a senior, and Allison, a junior, attend Fulton High School.



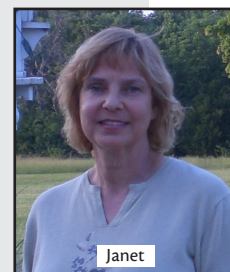
Robert and Lisa

“Treat your staff with kindness and respect, and let them know how much you appreciate their hard work. You must function as a team to have a happy workplace.”

JANET BAXTER, MD
RESIDENCY CLASS OF **1991**

DR. BAXTER: “I’ve lived in Columbia since coming to MU as an undergraduate in 1970,” she says. “I retired from practice in 2010. Now I keep busy maintaining my 16-acre mini-farm. I’m learning how to do home repair and woodworking, and I’m pursuing all those ‘one of these days’ projects that I’ve been putting off for years.”

Sadly, Dr. Baxter lost her husband to cancer in 2007, but she’s looking forward to the birth of her first grandchild this summer.



Janet

“WHAT ADVICE DO YOU HAVE FOR OUR 2011 FAMILY MEDICINE GRADUATES?”

CLASSES
1981 ♦ of 1991 ♦ 2001

“You have the remarkable opportunity and privilege to learn from your patients. Learn by assessing outcomes. Do regular systematic evaluations of your own practice, and/or participate in a practice-based research network. Learn on the personal and spiritual level. Listen a little bit more carefully and openly. There are countless elements of quiet heroism in our patients’ lives, including our most frustrating or noncompliant patients. Let your patients challenge you to consider new ways of looking at things. You shouldn’t adopt every patient’s perspective, but you can learn something from all of them.”

JOE STANFORD, MD, MSPH
RESIDENCY CLASS OF **1991**

DR. STANFORD: “Kathleen and I have seven sons (Matthew, Jesse, Hyrum, Caleb, Thomas, Benjamin, Edward) and, as of last fall, one daughter-in-law (Shikara, see photo). We enjoy living in Salt Lake City with family, friends, neighbors, and the outdoors,” he says.

“I’m professor of Family and Preventive Medicine at University of Utah. Currently I’m principal investigator on three funded research projects and co-investigator on a few more. I’m excited about a project that involves international practice-based research in natural procreative technology. I teach and mentor medical students, fellows, and junior faculty (Family Med, Peds, and OB/GYN), and master’s and PhD students in Public Health. I also practice part-time, with a focus on maternal child health,” Dr. Stanford says.



Joe Stanford Family: Son's Wedding 2010

“As you get older and know that you want to stay in medicine, find a job that you truly enjoy. For me, that job has been hospice and palliative care.”

WARREN STARK, DO
RESIDENCY CLASS OF **1991**

DR. STARK: “As a faculty member at Research Family Medicine Residency Program in Kansas City, MO, I teach residents and see patients at Goppert-Trinity Family Care Clinic. I also practice emergency medicine part-time at Excelsior Springs Medical Center, Excelsior Springs, MO. And I am hospice director for Crossroads Hospice in Kansas City, MO,” he says.

Dr. Stark has four grown children, three boys and a girl: Blake, 30, Chase, 28, Cole, 26, and Jenna, 21.



Warren

■ Build a strong network of specialists to support you. Doing this has made my job so much easier – I am able to call the cardiologist and run a problem by him any time. Connections are important!

■ Hire a well-organized, skilled clinic nurse. A good nurse can help you stay organized and keep your office running efficiently. When your practice operates smoothly, patient satisfaction will be strong. And you will enjoy your job more because it will be easier to balance home and work responsibilities.

■ Remember: keep your family as your top priority, keep your chin up, and keep a smile on your face!”

MONA BROWNFIELD, MD
RESIDENCY CLASS OF **2001**

DR. BROWNFIELD: Dr. Brownfield has practiced in Boonville, MO since finishing residency. Her group, which is owned by the local county hospital, includes four family physicians and two nurse practitioners. In addition to her outpatient practice, she has a nursing home practice and provides inpatient care at the local hospital. Her patients are all ages.

“Our clinic functions as a rural health clinic,” she says. “Being 25 miles from Columbia allows me great access to specialized care for my patients when they need it. I enjoy precepting MU medical students a couple times a year.”

“Having lived in Boonville since 1979, I couldn’t think of a better place to raise my family and ‘give back’ to the community. My husband, Ken, and I have a son, Kellen, 10, and a daughter, Addi, 7. We are very involved in their sporting events and school activities,” says Dr. Brownfield. “If I got paid for all the curbside consults that come with living in a small town, I’d be retired! But, I wouldn’t trade it for anything. Knowing patients personally truly offers a great advantage in patient care.”



Mona with children, Kellen and Addi

“Get as much practice management experience as you can before entering the real world. Expose yourself to as many clinical experiences as possible during training as there is no way to predict where your career path will take you. During the past ten years, I have practiced OB, worked as

an intensivist, and practiced emergency room medicine. I was CERTAIN that I wouldn’t be doing any of those things when I finished residency.”

TRACI BUXTON, MD
RESIDENCY CLASS OF **2001**

DR. BUXTON: Dr. Buxton lives in Jonesboro, AR with her two children. For the first three years after residency, she worked at a rural community health center. Today, she is an urgent care physician at First Care Family Practice clinic.



Traci with children, Amanda and Joshua



Andy Gayle Family

“■ Take control of your practice. Make it what you want it to be, but don't let it control you and your life. If you like what you're doing and where you're doing it, you will be a better doctor.

■ Make time for family, friends, and yourself. Don't

let work get in the way of the more important things in life.

■ Try to give back whenever you have the opportunity, to those whom you know and those you may not know.

■ Always be a teacher. You have spent a large part of your life acquiring a vast pool of knowledge. Whenever you get the chance, share it with anyone who is willing to learn. Every time you impart even a small bit of knowledge, you make the world a better place.”

ANDY GAYLE, MD
RESIDENCY CLASS OF **2001**

DR. GAYLE: Dr. Gayle lives and practices family medicine in Piedmont, MO. He owns his group and works alongside his dad, who is semi-retired, and three nurse practitioners. He's focused on outpatient medicine, but because the nearest ER is 50 miles away, he frequently provides urgent and semi-emergent care. He is medical director of, and sees patients at, two local nursing homes. Dr. Gayle loves his job and his patients, but the hours have become more challenging. His group had three doctors when he joined it; now it's down to one and a half physicians.

“My wife and I have three daughters, Darrian, 15, Drew, 6, and Emily, 4, and we spend most of our free time trying to keep up with them. With one in high school who plays three sports and two who are younger and involved in different activities, our schedules can be difficult to manage,” Dr. Gayle says. “I have found that a man who lives in a house with four females can become overdosed on ‘pink’, hair bows, and shopping trips. So occasionally when I feel a need to get away, I go fishing. And while I don't go as often as I'd like, I probably go more than I should. Being on the water has become my personal therapy time.”

“If you're not happy with your circumstances, change them. I didn't realize that I could truly love my career until I left my ‘dream’ of practicing small town medicine. I was so unhappy living my ‘dream’ that I almost left medicine to get a doctorate in neuroscience.

After a short time away from medicine, I realized I truly am a physician at heart. And it wasn't medicine that I didn't love, but rather how and where I was practicing it. Today, I have a career that doesn't dominate me; instead, I define and control my career. The last four years have been the happiest, healthiest, and most content years for me and my family. Whatever you do, don't settle for anything less.”

JIM HENDERSON, MD
RESIDENCY CLASS OF **2001**

DR. HENDERSON: “For four years, my wife, Jenny, our daughter, Veronica, and I have been living in Bettendorf, IA, close to the towns where we grew up. I am a full-time ER physician at the local hospital. Jenny is a parish nurse, and our flexible schedules allow us to homeschool Veronica,” he says. “Veronica and I are budding pianists. And our home is so filled with every kind of pet that we've become the neighborhood petting zoo.”



Jim Henderson Family

“I'd like to reinforce that medicine offers many options; consider those options as you begin your career. By choosing jobs that allow shift work, I've been able to maintain balance between time spent at home and at work.”

TARA FLYNN, MD
RESIDENCY CLASS OF **2001**

DR. FLYNN: After residency, Dr. Flynn moved to Sitka, AK, where she did hospitalist/ER/OB medicine. She returned to Columbia six years later, and today she is an ER physician at MU's Women's and Children's Hospital.

Dr. Flynn and her husband, Marty, have six children, ages 21 months to 13 years old. Choosing jobs that allow shift work has made it easier for Dr. Flynn to raise her large family.



“■ Remember that true richness is not measured by material wealth. In Ghana, I've met SO many dear friends who earn less than the equivalent of \$50 a month (U.S. dollars), yet they are richer than most of the people I know.

■ Remember to share your knowledge, time, and resources with those who so desperately need it. If any of you would like to do volunteer work in Ghana, I have an apartment where you can stay, and a great friend there who has a program aching for health outreach volunteers! I'm very serious about this. If interested, e-mail me at sanitybreak@gmail.com”

JEANIE HERTZ, MD
RESIDENCY CLASS OF **2001**

DR. HERTZ: Dr. Hertz has been married since graduating from medical school and lives in Freeport, IL with her three (soon to be four) lovely daughters. She quit practicing medicine in 2004. Today, she's a full-time mom and a foster parent. Some of the children she's fostered have had extensive medical needs. Dr. Hertz has adopted a little girl, 10, from Ghana.

“Going to Ghana changed everything for me. I fell in love with the people and their culture, and I returned there so I could help the many families who needed it,” she says. “I'm in Ghana now, partly to adopt our daughter's little sister, and also to support a Ghanaian friend who is helping several farming villages address needs in education, farming, water contamination, and healthcare.”

“WHAT ADVICE DO YOU HAVE FOR OUR 2011 FAMILY MEDICINE GRADUATES?”

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Shamita Misra Family

“The human vulnerability that we come across every day in our patients demands the utmost compassion and respect. As I mature, I am learning, ‘So that things remain stable, I will need to change.’”

SHAMITA MISRA, MD
RESIDENCY CLASS OF **2001**

DR. MISRA: Since completing residency, Shamita has served on MU’s Family Medicine faculty. A member of the Blue Team at Green Meadows Clinic, Dr. Misra sees patients of all ages. She continues to practice OB, and in fact, she still cares for the first baby she delivered ten years ago as a resident.

Teaching family medicine residents is exciting for Dr. Misra. She does grand rounds, and she teaches them in clinic and on the inpatient service. Watching the evolution and transitions that every resident experiences is one of the perks of working in an academic environment, she says.

Shamita and Madhukar, a nephrologist at MU, have been married 29 years and have two children. Runjhun, their daughter, is a recent graduate of Tourro University College of Osteopathic Medicine in Nevada. She just completed the first year of her internal medicine residency at University of Connecticut. Their son, Sidhant, just finished his first year at Harvard. His major is economics.

Dr. Misra’s love for freestyle dancing continues. “If I hear music, I have to get up and dance,” she says. “I love to move with the groove and make up steps whenever I listen to music.”

“The best piece of advice that I can give is this: figure out what type of practice you really want and then seek it out. There are many jobs out there with a wide variety of practice styles. You don’t have to settle for the first job that comes your way.”

CAREY WATERS, MD
RESIDENCY CLASS OF **2001**



Carey Waters Family

DR. WATERS: Dr. Waters lives in Tulsa, OK with his wife and two daughters. He works for OMNI Medical Group, which is part of St. John’s Health System. This group includes approximately 80 physicians who practice either family medicine or internal medicine in Tulsa and its surrounding communities.

“I work in Owasso with two family physicians and a physician assistant. My practice will be completely outpatient this summer after the newly hired hospitalist service comes on board to provide all inpatient care at our hospital,” Dr. Waters says.

“So much is changing in medicine these days. But what should never change is the doctor-patient relationship. This relationship is central to a physician’s ability to deliver excellent care.

When solutions to health care problems are offered, don’t accept them until you’re sure they won’t limit your time for patient care. Don’t let EMRs, pharmaceutical reps, or insurance companies insert themselves between you and your patient. Focus on your relationships with patients because good medicine will flow from them, and they will be the most rewarding part of your practice. Peace on Earth.”

MELINDA MENEZES, MD
RESIDENCY CLASS OF **2001**

DR. MENEZES: “Ten years after finishing residency, I’m fortunate to be in private practice on the North Shore of Kauai, an outer island of Hawaii. I work in a close knit, semi-rural, culturally diverse community about an hour from the main hospital on the island. This year I’m on the Hawaii Academy of Family Medicine Board, and I’m president of the Kauai Medical Association, which is involved in implementing Patient Centered Medical Home through the largest insurer in Hawaii,” she says.

“I have two sons. Victor, 14, and Tomas, 11! They play in-line hockey and are interested in robotics and other geeky things. We enjoy hiking and snorkeling (Tomas just got his scuba certification),” Dr. Menezes says. “Our German Shepherd is enrolled in agility classes, and we have five laying hens and a garden.”



Melinda with sons, Victor and Tomas

“Your first job choice after residency does not have to be your last. The elements you look for in a job right out of residency may change after you practice a few years. Don’t be afraid to change! Sometimes the grass is greener on the other side of the fence.”

SAMANTHA SATTTLER, MD
RESIDENCY CLASS OF **2001**

DR. SATTTLER: Dr. Sattler has been practicing family medicine with the St. Charles Clinic Medical Group in St. Charles, MO since 2006. She teaches medical students from St. Louis University and appreciates the opportunity to help them grow and learn.

“Two years ago, I got back into golf (a sport I started playing in jr high school!), and now I play a few times per week. I live close to my parents as well as my sister and her family, and I really enjoy spending time with them,” Dr. Sattler says. “I also help my husband with his small business.”



Samantha with husband, Baheir Sultan



David with wife, Pam

“Never stop asking questions *and* always have the courage to change!”

DAVID FERGUSON, MD, MSPH
FELLOWSHIP CLASS OF **1991**

DR. FERGUSON: “I’ve been in Fort Collins, CO for 18 years. Initially, I was on faculty at the local family medicine residency program, but for the past 10 years, I’ve worked at a small private practice,” he says.

“Pam and I have two children, Andrew, 21, and Mallory, 19. Andy is studying sports management at MU, and Mal will pursue an elementary education degree after she earns her AA from the community college,” Dr. Ferguson adds. “My life has been busy but blessed with the joys of family, faith, and a little fun from time to time.”

“The practice of medicine seems to change frequently: billing and coding, delivery systems, computer technology, and reimbursement. Patients change also, with respect to age, lifestyle, and values. Some times they’ll be disrespectful, but other times they’ll surprise you with their gratitude. However, ‘one-on-one’ in the room with a patient, our profession stays the same. When it gets hard, and it will, just remember ‘one-on-one’... it’s a privilege to be there!”

CARIN REUST, MD, MSPH
FELLOWSHIP CLASS OF **2001**

DR. REUST: After fellowship, Dr. Reust practiced at UP-Hallsville, one of MU’s community practice clinics, until the facility closed in 2008. MU Family Medicine recruited her that year to join the medical staff at Smiley Lane Clinic, which was just opening its doors to patients. In addition to patient care, including OB, Dr. Reust teaches residents and medical students. And she now serves as medical director of Smiley Lane Clinic.

Dr. Reust is married and has two children, Will and Jessi.



Carin Reust Family

“■ If you dream of a solo practice, do it now. If you’ve never dreamed of a solo practice, why not?”

■ You know your patient better than any other doctor. Use recommendations from specialists and referral sources in a manner personally suited to your individual patient. Trust your instincts and implement treatment plans with confidence, even if they defy the recommendation of a specialist.

■ When a difficult patient raises your hackles, embrace the opportunity to create a fruitful and lasting relationship.”

SUSAN SCHNEIDER, MD, MSPH
FELLOWSHIP CLASS OF **2001**

DR. SCHNEIDER: Dr. Schneider works at the Cocoa Beach, FL office of Sunshine Healthcare Solutions, which is a group that provides comprehensive care to seniors. She has a solo practice with a focus in geriatric medicine, hospice, and palliative medicine, and she admits patients to Cape Canaveral Hospital.



Susan and Michael Pitcher with daughter, Amelia

“If you have a specific goal that seems too big to achieve, be logical, patient, and open to opportunities. But first of all, figure out if you really want to spend your time working on achieving that goal.”

BRIAN ALPER, MD, MSPH
FELLOWSHIP CLASS OF **2001**

DR. ALPER: Professionally, I’ve put my research, teaching, and clinical experiences together in order to develop and maintain DynaMed (www.ebscohost.com/dynamed).

DynaMed is used by an estimated 500,000 clinicians in 125 countries. The DynaMed department within EBSCO Publishing employs 46 people including 10 physicians, four PhDs, three medical librarians, an epidemiologist, and seven other health care professionals. The DynaMed community now has more than 1,500 clinicians who volunteer to do peer review or other services that maintain DynaMed’s ability to deliver useful information at the point of care. About 25 residency programs from six disciplines have participated in the peer review process.

“Personally, Karen and I live in Ipswich, MA, in a location that allows me to walk to work and Karen to walk to the park with our two dogs, Buddy (a rescue from MO) and Marshall (a rescue from MA). After years of searching for an activity that we both enjoy doing together (stimulating our physical and intellectual needs), we finally found one: indoor rock climbing,” Dr. Alper says.



Brian



MU FAMILY MEDICINE RESIDENT MAKES AAFP'S TOP TEN LIST

There are 3,500 family medicine residents in more than 400 programs across the nation ... ONLY 10 RESIDENTS ARE SELECTED BY AAFP FOR THIS ANNUAL AWARD

KARLI URBAN, MD, 28, was a leader at MU throughout her undergraduate and medical school years, and she continues that tradition in her residency today.

A third-year Family Medicine Resident, Karli is one of ten residents selected nationwide to receive the American Academy of Family Physicians (AAFP) Bristol-Myers Squibb Award for Excellence in Education. This award recognizes residents for leadership, civic involvement, social commitment, patient care skills, and interest in family medicine. Karli's dedication to family medicine, specifically geriatrics, made her the clear choice for the nominating committee at MU.

Erik Lindbloom, MD, MSPH, associate director of MU's Family Medicine Residency and a nationally recognized geriatrician, also made AAFP's Top 10 list in 1996, when he was a resident at University of California-San Diego. He has known Karli nearly seven years.

"She first came to our attention as an undergraduate when she was working on the LIFE project," Dr. Lindbloom says.

Karli created the Lasting Intergenerational Fellowship Experience (LIFE) program in 2002, when she was in the Honors College Community Involvement Program at MU.

Her idea was simple: she wanted to create a program involving local middle school students and senior citizens in residential living facilities. She wrote a proposal about her dream idea, and two organizations responded.

Gentry Middle School and South Hampton Place senior living facility participated in the LIFE program.

"It offered great opportunities for middle school students and senior citizens to learn from each other," Karli says.

Karli continued the program until early 2008, when the demands of medical school left her little time to coordinate LIFE activities. Without her, the program ended. However, people across the country were impressed by the curriculum she had created and started similar programs elsewhere.

During medical school, Karli was very active in the Geriatrics Interest Group (GIG) and served as GIG president from 2006-'08. Dr. Lindbloom was the group's adviser at that time.

"While Karli was president, the membership and activities of GIG skyrocketed," he says. "We begged her to stay on an extra year because she was doing such a great job."

In medical school, Karli participated in the Heyssel Senior

Teacher Education Partnership Program (STEP). The program pairs medical students with seniors who live in Columbia.

Karli says that most of the seniors who participate in STEP are very active in the community, and this encourages medical students to get involved in local activities and learn more about Columbia.

Her interest in geriatrics developed while she was in high school. Karli had a close relationship with her grandparents, and she attended a church whose congregation was largely seniors. These experiences helped her understand and appreciate older people. They also sparked her desire to pursue a career that involved working with seniors.

Karli wasn't sure how she would do that until she began med school and decided to specialize in geriatric medicine.

"It's rare for someone to develop such a strong interest and connection with older adults at such a young age. And Karli has maintained her interest during college and throughout her medical training," Dr. Lindbloom says.

Even though she began medical school knowing it would be hard work, Karli looked forward to the experience. Getting to know and work with MU's geriatricians was a huge factor in her decision to stay at MU for Family Medicine Residency.

"Residency is going well for me. Every day I gain a new and different perspective about family medicine — new patient experiences, new opportunities to learn," Karli says. "It's been very fulfilling so far."

Karli, now in her final year of residency, has been selected by faculty and classmates to be one of this year's four chief residents. Dr. Lindbloom says she's a natural for the role.

Dr. Lindbloom and Karli recently co-authored a chapter for a book on evidence-based geriatric medicine. The chapter they wrote focuses on elder abuse.

"Elder abuse is increasingly recognized as a major medical and community problem. I knew this topic would interest Karli, so I invited her to help write the chapter," Dr. Lindbloom says.

"Dr. Lindbloom was very gracious to let me participate in this project," Karli says. "It increased my knowledge, awareness, and concerns about elder abuse."

After residency, Karli plans to do a Geriatric Medicine Fellowship at MU. Then she'll practice geriatric medicine.

"The sky's the limit," Dr. Lindbloom says of Karli. "That might sound like a cliché, but she has tremendous promise as a future leader, both in academics and in the community."

This is a modified version of an article written by MU Journalism student Bridget Murphy and published in the Columbia Missourian on June 16, 2011

First-Year Family Medicine Resident Ashley Millham, MD, was a member of the MU Health Care consulting team that won the annual CLARION National Interprofessional Team Case Competition hosted by University of Minnesota last April. MU's four-person team, which included students from the School of Medicine (SOM), Health Management and Informatics, Public Health, and School of Nursing, competed with 10 other universities from across the nation. Ashley, a fourth-year medical student at the time of the competition, represented MU's SOM on this interprofessional team.

Focused on patient safety, the CLARION competition challenges teams' analytical skills to improve health care outcomes.





JACK'S BACK continued from page 1

And now that he has returned to family medicine, he enjoys the time he has to develop long-term relationships with them.

"By getting to really know my patients and provide them ongoing care, it's easier for me to keep them healthy and out of the ER," he says.

"Practicing family medicine is great, but so is teaching it," he adds. "I train residents and medical students in clinic. I also have inpatient duties at Callaway Hospital, which is located across the street from our clinic."

The knowledge and experience he gained during his years in emergency medicine make Dr. Wells the perfect person to be leading a new project designed to improve residents' inpatient care skills. His excitement builds as he talks about it.

"Many residents don't feel as comfortable as they think they should about approaching a patient on the floor who suddenly becomes unresponsive or starts experiencing shortness of breath, chest pain, or a drop in blood pressure," Dr. Wells says. "We're still in the pilot stage of this project, but

our plan is to first do a lecture on how to approach the various problems a critical patient might develop, then follow up with hands-on training using a highly sophisticated patient simulator at MU's clinical simulation lab."

This is an ideal opportunity for Dr. Wells. As an ER doc, his days were filled with risks, rapid intervention, and quick decisions, and by drawing upon these ER experiences, he will be able to make this a valuable learning project that benefits residents and their patients.

His energy is high and his passion is strong as he talks about his patients, students, and colleagues. "This is an amazing department and the exact place I want to be," Dr. Wells says. "It's great to be back in family medicine."

"You have to make the health system work when you're in the emergency room, and if/when it doesn't, you are held accountable. When you're 30 and full of adrenaline – it's cool. But when you're 50 and have done it for a while, the job is harder and the risks are greater."

— JACK WELLS, MD, MHA
MU FAMILY MEDICINE PHYSICIAN

— CONGRATULATIONS TO OUR FACULTY! —



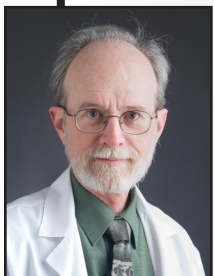
DEBRA HOWENSTINE, MD, Assistant Professor of Clinical Family and Community Medicine, was nominated for the 2011 Arnold P. Gold Foundation Humanism in Medicine Award. This award, administered by AAMC's Organization of Student Representatives (OSR), honors a medical school faculty physician who serves as a caring and compassionate mentor for medical students. In addition, the nominee must possess the qualities necessary for the practice of patient-centered medicine. The goal of this award is to emphasize and reinforce the importance of humanistic qualities among medical students and faculty.

In the nomination packet, submitted by MU's OSR representative Robin Lund, Dr. Howenstine was described as the epitome of humanism:

"She inspires so many to not only be physicians, but also healers. Her entire existence is devoted to serving others. Dr. Howenstine's life can be grouped into practicing as a physician, community service, and teaching. Her passion for helping others stands as the nexus between all these entities. Professionally, she works with the underserved; academically, she mentors others in working with this population. Simply put, Dr. Howenstine embodies humanism. From her personal life to her professional life, this woman gives selflessly to others less fortunate than her."

Dr. Howenstine, who joined our faculty in 1991 after completing her residency at MU, is medical director of the Columbia/Boone County Health Department. In addition, she sees patients and teaches residents at the Family Health Center, a federally funded facility that serves uninsured and underinsured patients in the Columbia area.

NOTE: The winner of the 2011 Humanism in Medicine Award will be announced in late summer.



DANIEL VINSON, MD, MSPH, Professor and Opal Lewis Distinguished Faculty Scholar, was appointed to the Missouri Physician's Health Program (MPHP) Advisory Committee. Sponsored by the Missouri State Medical Association, MPHP is available to help physicians who have life problems, including substance abuse, mental health stress, and other issues that prevent them from functioning at their best. The goal of this program is to facilitate the physician's return to healthy personal and professional functioning through early identification, intervention, and treatment.

Dr. Vinson joined our faculty after completing his academic fellowship here in 1990. In 1994 he was chosen to participate in the prestigious Robert Wood Johnson Foundation (RWJF) Generalist Physician Faculty Scholars program, a four-year program that provided valuable support for his early alcohol studies. Dr. Vinson's experience as a RWJF faculty scholar ignited his passion for patient-oriented research and provided a solid foundation for his career in academic medicine. For 20 years, he has devoted much of his time to studying alcohol problems and what family doctors can and should do to address these problems.

"Alcohol and drug use disorders are common, dangerous, deadly, and hidden," Dr. Vinson says. "But they are also treatable."



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Columbia, Missouri 65212
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Fax: 573-882-9096

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Associate Chair:

Michael L. LeFevre, MD, MSPH

Administrative Manager:

Pamela Mulholland, MHA

*Questions and comments about this
newsletter should be directed to:*

Kathy Boeckmann, MA
573-884-7916
boeckmannk@health.missouri.edu

FACULTY PHYSICIAN – FAYETTE MEDICAL CLINIC

MU Family and Community Medicine is seeking a faculty physician to contribute to its mission of improving the health of Missourians while creating exemplary care environments for effective teaching of medical students and resident physicians.

Primary responsibilities for this position are clinical practice at our Fayette Medical Clinic, along with considerable opportunities for medical student and residency teaching. Applicants should be a board certified or board eligible MD or DO and have a valid license to practice medicine in Missouri.

The Department of Family and Community Medicine is nationally recognized and has been ranked by U.S. News & World Report in the top ten programs for more than 15 years. Comprehensive benefits package and incentive plan. Salary and academic rank are commensurate with all positions. For more information about our department, please visit fcm.missouri.edu.

PLEASE SEND A LETTER OF INTEREST AND CV TO:

Steven Zweig, MD, MSPH c/o Adam Swofford
University of Missouri Department of Family and Community Medicine
M228 Medical Sciences Building; DC032.00 Columbia, MO 65212
Email: swofforda@health.missouri.edu Phone: 573-882-5626



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Fayette is a picturesque town located 25 miles northwest of Columbia in the rolling farmland of mid-Missouri.

In an effort to improve health and encourage physicians to practice in rural areas of Missouri, MU Family and Community established the Fayette Medical Clinic in 1980. During the past 30 years, Fayette has become a vital health care center in its community. Today, with more than 10,000 patient visits annually, Fayette Medical Clinic provides a full spectrum of ambulatory family medicine services to a largely rural population as well as valuable learning experiences to MU medical students and family medicine residents.