Affiliated Programs

Dept. of Family Medicine, CHM
East Lansing, Michigan

Genesys Family Medicine
Residency Program
Grand Blanc, Michigan

Grand Rapids Family Medicine
Residency Program
Grand Rapids, Michigan

Kalamazoo Family Medicine
Residency Program MSU/KCMS
Kalamazoo, Michigan

Marquette Family Medicine
Residency Program
Marquette, Michigan

McLaren Family Practice
Residency Program
Flint, Michigan

Midland Family Medicine
Residency Program
Midland, Michigan

Munson Family Practice
Residency Program
Traverse City, Michigan

Sparrow/MSU Family Medicine
Residency Program
Lansing, Michigan

Synergy Medical Education
Alliance Family Medicine
Residency Program
Saginaw, Michigan
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The Michigan State University (MSU) Department of Family Medicine was founded as the Department of Family Practice in 1974, with Roy Gerard, MD, as its first chairperson. William C. Wadland, MD, MS, now serves as the department chairperson. Interests and activities of the department’s faculty cover the spectrum of primary care. Associated programs include the Michigan State Geriatric Education Center (GEC); the Family Care Research Program; the National Family Medicine Board Review Course; the Great Lakes Research into Practice Network (GRIN); and advanced training and scholarship in sports medicine, geriatrics/gerontology, and preventive medicine/public health.

The number of MSU College of Human Medicine (CHM) graduates who choose careers in Family Medicine is impressive. In 2002, CHM earned a Gold Achievement Award from the American Academy of Family Physicians for the school’s outstanding efforts in developing student interest in family medicine and producing graduates who enter the specialty. This year the school earned an award for placing in the Top Ten. These awards are based on a three-year average of CHM graduates who entered family medicine residencies.

The success of the department is directly linked to the active role of its residency network. This network encompasses family medicine residency programs in Flint, Grand Blanc, Grand Rapids, Kalamazoo, Lansing, Marquette, Midland, Saginaw, and Traverse City, with a total of 104 faculty members, 194 resident physicians in training, and five fellows in Sports Medicine and Geriatrics. These programs, in conjunction with the East Lansing campus, all join in meeting the department’s mission.

The academic department in East Lansing includes 26 faculty members, a Family Health Center on the MSU campus, a thriving research unit, educational specialists, and a creative and talented administrative group.

Mission Statement

The Michigan State University Department of Family Medicine functions as a collaborative network with the following purposes:

- Training physicians who will provide quality, compassionate, cost-effective primary care.
- Providing patient care in settings characterized by excellence and innovation.
- Conducting community-based research.
- Advancing knowledge relevant to primary care and medical education.
- Advocating the ideals of family medicine to students, residents, and the community.
- Serving the people.
From the Chair:

In 2008, we devoted major efforts towards network building which is key to the MSU approach to community engagement.

Our nine MSU affiliated residency programs continue to graduate and retain high numbers of family physicians who remain in Michigan. These programs are essential to meeting the critical shortages in primary care across the state. During the past year, after a kick-off retreat in Grand Rapids, these programs committed to work towards transforming their model practice sites to meet the expectations of the Patient Centered Medical Home (PCMH) to improve patient care, education, and scholarship. They are also sharing best practices. Under the direction of Rebecca Malouin, these programs are completing assessments such as Barbara Starfield’s PCAT (Primary Care Assessment Tool) to determine areas of practice enhancement. Five programs also are participating in the development of a network approach to starting new fellowship programs in geriatrics supported by a federal grant to form a new departmental division of Geriatrics. These are excellent examples of collaboration and networking.

We are also building a network focused on preventive medicine and public health by connecting with the 35 medical directors of public health across Michigan. Many of the directors are already connected with our community campuses and function as clinical faculty. The new network has enhanced communication for problem solving, case management, information sharing, and bridging to clinical practices in communities across Michigan. Building bridges between public health and medical practices has tremendous potential to enhance community services, educational programs, applied research, and, most important, health outcomes for communities.

As we approach the year 2010, the department will be working to celebrate the 35th year of family medicine at Michigan State University in the College of Human Medicine. We plan to focus our efforts for that celebration on strengthening the support of the department leadership and student scholarship programs.

I wish to thank all of you who have contributed to and participated in our educational programs during this past year.

William C. Wadland, MD, MS
Professor and Chair
Department of Family Medicine
The Department of Family Medicine remains financially stable due to the hard work of all the members of the department. In spite of annual general fund budget cuts, the department has been able to maintain or increase research and clinical revenue. The department continues to pursue an expanded research agenda, including the addition of clinical trials relevant to family medicine.

The Geriatrics Division of the department has worked with external partners to move a geriatrics outpatient practice into a Federally Qualified Health Center to maximize reimbursement and save the practice from closure. Contracts for faculty time (with both internal and external entities) have increased as a source of revenue for the department and have become a vehicle for partnering to enhance new faculty recruitment. Development of endowed funds to sustain faculty positions and provide student scholarships has been incorporated into the department agenda, recognizing how important the discipline of family medicine will be into the future.

Finally, the department has renewed contacts and communications with alumni and friends of the department through the development of newsletters and other electronic media. We continue to build traditions and share the exciting things that are happening in the department.
Awards and Achievements

Three members of the Department of Family Medicine were recognized for their outstanding academic contributions and achievements and received 2007-2008 College of Human Medicine Faculty and Academic Staff Awards at a reception in the MSU Clinical Center’s Radiology Atrium on May 13. They include:

James Hubbard, MD  
MSU College of Human Medicine Outstanding Community Volunteer Faculty Award

Janis Yonker, MS  
MSU College of Human Medicine Distinguished Academic Staff Award

Paul T. Werner, MD  
Lester J. Evans, MD, MSU College of Human Medicine Distinguished Service Award

James Hubbard, MD, named Michigan’s 2008 Family Physician of Year

James Hubbard, MD, of Grand View Health System in Ironwood was chosen Michigan’s 2008 Family Physician of the Year. The award is presented annually based on nominations by Michigan Academy of Family Physicians members, component chapters, and county medical societies. The award is presented to a physician who exemplifies the tradition of family physicians and their contributions to the health of Michigan’s citizens.

Dr. Hubbard was nominated by Suzanne Clarke, MD, Michigan State University College of Human Medicine, Rural Physician Program, family medicine clerkship director. Letters of support were provided by Bill Short, MD, Marquette Family Medicine Residency Program director and Sarah Roberts, MD, a 2008 graduate of the Rural Physician Program. The Rural Physician Program recruits students from small-town backgrounds who then complete their training in a rural setting.

“Dr. Hubbard is an excellent teacher and role model for our students and residents here in the Upper Peninsula. I only wish there were more like him,” said Clarke.

Gregory S. Holzman, MD, MPH, receives MSMS Presidential Citation

Gregory S. Holzman, MD, MPH, Chief Medical Executive at the Michigan Department of Community Health, was presented with a Presidential Citation during the 143rd annual meeting of the Michigan State Medical Society (MSMS) House of Delegates May 2008 in Dearborn. Dr. Holzman was cited by outgoing MSMS president AppaRao Mukkamala, MD, for his contributions to improving public health in Michigan.

“I am presenting Doctor Holzman with a Presidential Citation because he embodies the spirit of the ‘Wellness’ guiding principle as outlined in the MSMS Future of Medicine report,” Doctor Mukkamala said.
in presenting the award before 350 physicians and guests at the medical society’s annual meeting.

The MSMS report, *The Future of Medicine: Leading the Way to a Better Health Care System*, has become the medical society’s outline for health care reform. The report is based on the principles of wellness, quality, value and universal coverage.

"Dr. Holzman is passionate about making public health a priority in Michigan," Dr. Mukkamala said. "Throughout his career, he has embodied the Future of Medicine principle ‘to promote a culture of wellness and healthy communities.’" Dr. Holzman’s areas of interest include chronic disease management and public health issues including health disparities, tobacco control, health promotion, and disease prevention.

Dr. Holzman is an Associate Professor in the Department of Family Medicine at the Michigan State University College of Human Medicine as well as an Adjunct Associate Professor in the University of Michigan School of Public Health. In addition to his professional duties, he gives time to the Ingham County Medical Society, serving on the MSMS Liaison Committee with Michigan’s Public Health and as a speaker at MSMS education events.

Dr. Holzman received his undergraduate degree from Michigan State University. He earned his medical degree at the University of Florida College of Medicine and completed residencies in Family Practice and Preventive Medicine. He is board certified in both specialties. He came back to Michigan after working with a Family Medicine residency program in Maine, teaching at the University of North Dakota School of Medicine and Health Sciences, and working with the Indian Health Service in Montana.

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**MSU honors Kay Backus with 2008 Jack Breslin Distinguished Staff award**

Kay Backus was among six MSU staff employees who received the Jack Breslin Distinguished Staff Award for 2008. Selections are based on overall excellence, supportive attitude, contributions to the unit or university that lead to efficiency and effectiveness, and valuable service to the university. Each recipient received $2,500. Backus is educational programs coordinator for the Department of Family Medicine. Her initiative and foresight in carrying out her responsibilities encourage collaboration and trust. She was cited for ethics and high integrity in all that she does.

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**Four Promotions from the Family Medicine Residency Network**

In fall of 2008, four faculty members in our network of affiliated family medicine residencies received a promotion in their academic rank. Department Chair William C. Wadland, MD, MS, notes, "I am particularly impressed with the residency program faculty who have achieved academic promotion at Michigan State University in the College of Human Medicine, considering all the demands on their time for teaching and clinical care. They have gone the extra mile to be scholars in Family Medicine making significant contributions to our discipline."

**Ron Hunt, MD**, Associate Director of the McLaren Medicine Practice Residency Program in Flint, was promoted to Associate Professor. Dr. Hunt has received numerous teaching awards for the Residency, and received the Best Teacher Award five times. He has been the program’s associate director since 1994 and was former Clerkship coordinator, and provides leadership on several McLaren committees.

**Edward Jackson, MD**, Director of the Synergy Medical Education Alliance Cooperative Family Medicine Residency Program in Saginaw, was promoted to Professor. He has been recognized as one of the "Best Doctors in America" and has received the MSU/CHM Outstanding Clinician Award. Dr. Jackson is the founder of the Geriatric Assessment Program in the greater Saginaw area. He has been program director of the residency program since 2001. He has also been a keynote speaker for a national review course on family medicine. He has participated in academic reviews and a development of relevant summaries to clinical practice. These projects have resulted in highly relevant publications to the practice of clinical medicine.

**John vanSchagen, MD**, Director of the Grand Rapids Family Medicine Residency, was promoted to Associate Professor. Dr. vanSchagen was instrumental in enabling his practice to receive the Governor’s Award on numerous occasions. He has received resident teaching awards and a Certificate of Teaching Excellence from the MSU Department of Family Medicine. He has developed a web-based module for Clerkship training in musculoskeletal conditions that was adopted system-wide. Dr. van-
Schagen has participated in four book chapters and grants on group visits for chronic pain patients.

Daniel Webster, MD, then Director of the Munson Family Practice Residency Program in Traverse City, was promoted to Associate Professor. He has been medical director of addiction treatment services. He has provided leadership at administrative programs and mentorship for other advancing leaders and program directors. He was instrumental in obtaining accreditation for the first dual program in osteopathic and allopathic family medicine in the state of Michigan. Dr. Webster has provided administrative leadership for development of Traverse City as the site of a CHM community campus. He has participated in collaborative grant activity and a project related to breast cancer early detection and prevention.

Family Medicine Faculty Named as "Best Doctors in America"

Fourteen CHM Department of Family Medicine physician faculty members have been named to the 2007–2008 Best Doctors in America® list. The listing, developed through an extensive, year-long peer-reviewed process by Boston-based Best Doctors, Inc., represents the doctors rated by their peers as being among the very best in their specialty. Department of Family Medicine physician faculty who are on the Best Doctor’s in America list include:

James A. Applegate, MD, Grand Rapids; David Blair, MD, Grand Rapids; Neil C Colegrove, MD, Grand Rapids; James E. Flood, MD, Lansing; Neil A Friedman, MD, Flint; Edward A Jackson, MD, Saginaw; Peter B Lundeen, MD, Grand Rapids; James F Peggs, MD, Flint; Ernest V Quiroz, MD, Grand Rapids; Mark M Richardson, MD, Lansing; James W Setchfield, MD, Grand Rapids; Janet L Talmo, MD, Grand Rapids; Timothy Tobolic, MD, Grand Rapids; and Timothy Wellemeyer, MD, Lansing.

William P. Gifford, MD, receives Walter F. Patenge Medal of Public Service

On May 5, William P. Gifford, MD, was honored by the Michigan State University College of Osteopathic Medicine with its Walter F. Patenge Medal of Public Service at a dinner and awards ceremony at the Kellogg Center. The award honors individuals “exemplifying the best tradition of humane, concerned administration and public involvement, and for public policy leadership exemplifying the best tradition of democratic concern for the public good and welfare.”

Dr. Gifford is Director of Medical Education at Sparrow Health System in Lansing and clinical director of the Sparrow Family Medical Services Bone Density Center. He also serves as an associate professor in the Department of Family Medicine at MSU’s College of Human Medicine.

Karen Ogle, MD, named a State Pain Initiative Champion

Karen Ogle, MD, a professor in the Department of Family Medicine in MSU’s College of Human Medicine, was named a State Pain Initiative Champion for her work benefiting Michigan residents dealing with pain management. The annual award, given by the national Alliance of State Pain Initiatives, was presented to Ogle at the organization’s annual meeting in Austin, Texas.

Ogle is a national leader in palliative medicine and has served on the American Board of Hospice and Palliative Medicine, the National Board of Medical Examiners, and the American Academy of Hospice and Palliative Medicine. She serves as president of the Michigan Cancer Pain Initiative. For more information, visit http://mipain.org. The Alliance of State Pain Initiatives is a network of state-based pain initiative organizations that work to remove the barriers that impede pain relief through education, advocacy and institutional improvement.
In Memoriam
David Torkelson, MD

Dr. David Torkelson, 53, died at the scene of a motorcycle accident in Atrim County September 7, 2008.

Torkelson was born in Midland, graduated from the H.H. Dow High School in 1973, and attended colleges in Utah, Pennsylvania and New Mexico. He worked in various states until he joined the Janes Street Academic Community Health Center in Saginaw in 1987, then returned to Midland to work in 1994. William Dery, MD, Director of the Family Medicine Residency Program, said his colleague last worked as medical director for the Kings Daughters, Stratford and Tender-care nursing homes, was the assistant director of the Midland Family Practice Residency Program at the MidMichigan Medical Center, and worked at his own medical practice.

Dr. Dery called Torkelson the "epitome of a partner," at work and at play. "He would find a way to get things accomplished," Dery said. Torkelson took the time to know the residents he taught and was interested in them as people, always telling them the things they did well. "I think that's why the residents always liked him," Dery said.

"This is going to be a profound loss" to Torkelson's family, his patients, and the medical community, Dery said. "He was the rock of his family."

"All of us are deeply saddened by the loss of Dr. Torkelson," said Al Adan, president of MidMichigan Physicians Group and a vice president of MidMichigan Medical Center-Midland. "He will be greatly missed, both as a physician whose experience and dedication contributed so much to MidMichigan and his patients, and as a friend, whose humor and thoughtfulness will always be remembered."

Torkelson's interests included duck hunting on the worst fall weather days (the best time to hunt ducks), skiing, playing piano, fishing and even wind surfing, Dery said.

He is survived by his wife, Dr. Shirley Layko, their children, John, Natalie, Lars and Mark, as well as other family members.

Condensed from article by Kelly Dame of the Daily News, September 10, 2008
Our role as an academic department of Family Medicine is to continue to engage and improve upon the education of the next generation of physicians, to do research relevant to the life and work of family physicians, and to disseminate our work thru scholarship. This is, of course, in addition to our clinical work. As a department, an even greater asset during challenging times may be maintaining and serving our mission and maintaining enough flexibility to weather continuously shifting demands. On all these fronts I believe we have been successful during 2008.

We continue to teach at all levels of the college, teaching more per full-time equivalent faculty member than any other department. This is something we should be very proud of. And our teaching is well-regarded!

We continue to be in leadership roles throughout the college. Four of seven of our community assistant deans are family physicians: David Luoma, MD, in Marquette; Elizabeth Burns, MD, in Kalamazoo; Margaret Thompson, MD, in Grand Rapids; and in our newest community, Traverse City, Dan Webster, MD. William Wadland, MD, MS, continues to serve the College in his role as Associate Dean for Faculty Affairs and Development. We are well represented on college committees and continue to be central to the functioning of the college’s clinical skills with leadership from Steven Roskos, MD (clinical skills director), Robin DeMuth, MD (clinical skills assistant director) and Eugene Tay, MD (clinical skills director for Grand Rapids).

In the fall of 2007 CHM added 50 students to its entering class. The additional students are now in Grand Rapids for their second year of medical school and this marks the first time we have had second year students there. These students will begin their clinical work in the fall of 2009. We will need an expanded corps of excellent community preceptors to teach these students and while this is challenging we will meet this demand.

In 2008 we implemented a CME incentive policy which allots additional funds annually to support junior faculty attendance at national meetings. I am pleased that all of these funds were depleted for 2008. Our monthly faculty meetings now include 90 minutes of time for educational scholarship discussions every other month giving us needed time to continue to think and develop our work. At the 2008 Society of Teachers of Family Medicine (STFM) annual spring meeting we had 26 attendees from throughout our MSU/CHM family medicine network of whom 18 presented at 17 different sessions. We also further developed our Lansing-based “student clinic.” This alternative learning experience for third year students allows a faculty member to shadow our student a few times during their eight-week rotation, giving the students the role of carrying a patient visit from start to finish. This work will be presented at the 2009 STFM predoctoral conference, and it remains popular with students and faculty.

We continue to grow and change. We have deepened our engagement with the public health community by creating greater linkages to Michigan county health departments. We are developing geriatric fellowship opportunities in many communities around the state, and we continue to search for clinicians and leaders of our geriatric division and for additional clinical faculty as well. Engagement with grant and contract work with regard to the Patient-Centered Medical Home model has been an additional focus of our department and our residency network in 2008. Our own clinical practice, as well as the practices of all of our affiliated residencies, is working hard to incorporate essential elements of the medical home model into practice.

This is a busy place!
Family Medicine Clerkships

FMP 580. Special Topics in Family Medicine
Exploration of special aspects of family medicine. Possible examples include ethnicity and aging, clinical nutrition, sports medicine, death and dying, health care of women, research methods in primary care.

FMP 608. Family Medicine Clerkship
The Family Medicine Clerkship is a required eight-week clinical clerkship, taken during Block III of the CHM curriculum. The clerkship introduces students to the profession of family medicine.

FMP 610. Elective Clerkship in Family Medicine — Outpatient
The family medicine elective clerkship trains the student in the broad range of patient problems cared for in family medicine, with particular emphasis on patient interviewing, clinical procedures, diagnosis, and the use of community resources. The family medicine elective clerkship may be taken as a four or an eight week block experience.

FMP 611. Geriatrics Elective
Students participate in interdisciplinary team evaluation of geriatric patients; gain experience in recognition, diagnosis, and treatment of geriatric problems; and understand the process of advance care directives.

FMP 612. Inpatient Clerkship in Family Medicine
This four-week clerkship introduces students to the role of the family physician in caring for hospitalized patients. Management of the care of the hospitalized patient, and especially of the relationships among physicians and other health care providers in the hospital, is the major focus of attention in this clerkship.

FMP 613. Clinical Research in Family Medicine
This elective is offered in two modes: as a purely clinical experience, and as a combined clinical and research experience. It is intended for third and fourth year medical students with a research interest in primary care. Students enrolled in this research elective will learn the practical application of basic research skills through involvement in a primary care research project.

FMP 616. Advanced Rural Family Medicine Elective
This clerkship is designed to enhance the medical students ability to integrate clinical medicine with experience in rural medical communities. The medical student cares for residents in rural communities in the Upper Peninsula of Michigan. Two separate settings are available for this clerkship: rural communities or Native American communities.

FMP 617. Sports Medicine Clerkship
Primary care aspects of sports medicine. Care of acute and chronic sports injuries, mostly of college level athletes.

FMP 618. Palliative Care/End of Life Elective
Basic knowledge and skills necessary to manage patients and families faced with end of life illnesses.

FMP 620. Family Medicine Sub-Internship Elective Clerkship
This Elective Clerkship is in Community Practices and Community Health Centers for the underserved throughout Michigan. The clerkship gives the fourth year medical student the opportunity to be involved in the care and management of patients.
Student Awards, Spring 2008

Blake W.H. Smith Memorial Primary Health Care Endowment Scholarship

This scholarship provides a stipend of $1,000 for a CHM student, resident or faculty member engaged in “furthering the goals of primary health care or community-oriented medical education [in] international settings or underserved areas and populations...” The award can be used for education, research, or service experiences in primary care.

In 2008, two awards were given. Sarah Roberts of the Upper Peninsula Campus studied International Health Care and Medical Spanish in Guatemala for one month, including a week of volunteer medical service at a clinic in Puerto San Jose. Dr. Roberts is now a resident at the Alaska Family Medicine Residency, Providence Hospital, in Anchorage. The other award winner, medical student Thammi Ramanan, traveled to Agogo, Ghana, to research Buruli Ulcer.

David Hough Award for Excellence in Family Medicine

This highly competitive scholarship was established to honor Dr. Hough’s nationally recognized and pioneering application of the principles of family medicine to the field of sports medicine. Outstanding fourth-year CHM students who demonstrate the healing spirit embodied in Dr. Hough and who plan to enter a family medicine residency program are considered for this award. The 2008 award recipient was EmmaLeigh Smith. After graduation from MSU/CHM, Dr. Smith became a resident at the Family Medicine Residency Program at Memorial Hospital of South Bend, Indiana.
As promised, 2008 has proven to be an exciting, albeit challenging, year for our Family Health Center. Much change has been focused on transforming our practice into a Patient-Centered Medical Home and continuously improving access to and the quality of health care provided to our patients.

Our Family Health Center is participating in the Michigan Improving Performance in Practice Grant Program alongside many other Family Medicine, Pediatric, and Internal Medicine Practices across the state. Our clinical focus for MI IPIP is diabetes. While our diabetes quality, for most metrics, meets or exceeds the National Committee for Quality Improvement’s Diabetes Provider Recognition Program, we still have significant room for improvement:

- HbA1c Measured 86%^  
- HbA1c Control > 9% 14%*  
- HbA1c Control < 7% 43%*  
- Blood Pressure Control ≥ 140/9 27%*  
- Blood Pressure Control ≤ 130/8 41%*  
- LDL Measured 93%^  
- LDL Control ≥ 130 mg/dl 21%*  
- LDL Control ≤ 100 mg/dl 56%*  
- Eye Examination 31%  
- Foot Examination 60%  
- Nephropathy Assessment 87%*  
- Smoking Status & Cessation Advice  
- or Treatment100% / 51%*  
- Current Influenza Vaccination 66%^  
- Aspirin Recommendation 67%^  
- Statin Recommendation 56%^  
- ^ Not an NCQA DPRP Metric  
- * Meets or Exceeds NCQA DPRP Metric

MI IPIP focuses on practice transformation and adoption of Patient-Centered Medical Home principles as a means to improve the quality of care provided to diabetic and/or asthmatic patients. We have been busy working on the following pilot and/or ongoing projects:

- Writing a document describing the Rights and Responsibilities of Patients and Providers in a Patient-Centered Medical Home, which we have begun to distribute to our patients and plan to further refine based upon ongoing patient and provider feedback
- Expanding office access to five hours outside of the traditional 8-5 day
- Partnering with local urgent care centers to ensure timely information regarding our patients who seek care when our office is not available
- A pilot project to use a medical social worker to reinforce self-management goals, which should help to improve outcomes for our patients
- Adapt our current diabetes registry to provide performance data for all of our providers
- Work with our providers to standardize and optimize patient care data entry into our EMR
- A HealthTeam-wide focus on monitoring and reporting patient satisfaction, which shows that our overall patient satisfaction is 100%, with 74.2% of our patients giving us the highest possible score

In 2009, we will continue our adoption of Patient-Centered Medical Home principles through such projects as:

- Secure messaging access between our patients and providers
- Electronic prescribing
- Adoption of a commercial patient registry
- Wider adoption of evidence-based guidelines available at the point of care
- And likely many, exciting others.
Federal budget woes created a great deal of excitement, buzz, and depression. Nonetheless, our faculty kept their focus on scholarly work. Department faculty obtained nearly $2 million from foundations, state and federal government agencies, and industry to support many of our various scholarly projects. In response to the economic stimulus package, our scholars have also been like busy beavers furiously cranking out even more proposals.

The department continues its support of the Great Lakes Research into Practice Network (GRIN). In partnership with the University of Michigan Department of Family Medicine, the GRIN network supports projects where investigators enroll patients directly from community practices.

Members of the department were involved in the university's Clinical and Translational Science Awards (CTSA) submission. At this time, we have been told that it was scored, but we have not been informed of its funding status. The areas where the department had significant input were in training and community engagement, traditional department strengths.

Finally, members of the department have been working with the CHM Research Office to create a research basics training program. This training program teaches research fundamentals and helps learners develop research projects from conceptualization to implementation and finally to dissemination.

As you will see in the listing of individual accomplishments, our community of scholars has been involved in wide scope of projects including promotion of healthy behavior, addiction, mental health, patient-centered care, patient safety, medical student career choice and educational assessment. The range of projects reflects the range of interests in family medicine!
East Lansing Campus Grants

New Funding – Family Medicine Principal Investigator

Establishing an Academic Division of Geriatrics/Gerontology

| William C. Wadland (PI) with Raza Haque, Francis Komara, Marolee Neuberger, Mary Noel, David Solomon, and Carlos Ríos-Bedoya – HRSA - $935,982 (Submitted 12/5/07) – Proposed dates: 9/1/08-8/31/11

Abstract: The State of Michigan confronts unprecedented challenges in meeting the health needs of older adults. Michigan State University (MSU) has a vision to address the issues of aging as a leader in geriatrics and gerontology building a model of innovative, collaborative, multidisciplinary, and community-based research, training, and education. The purpose of this proposal is to establish an administrative division on Geriatrics and Gerontology in the Department of Family Medicine within the College of Human Medicine (CHM) at MSU. Five (5) residency directors in the MSU-affiliated Family Medicine Residency Program Network have requested that the CHM Department of Family Medicine assist them in developing and implementing geriatric fellowship training in their programs. This proposal builds on the strengths of the two (2) existing geriatric fellowship programs affiliated with MSU (Lansing-Sparrow and Flint-Hurley). The four major objectives of the project will achieve the following outcomes: 1) establish a formal division of geriatric medicine and gerontology, 2) create and disseminate network-wide curricula on geriatrics, 3) implement clinical performance assessments, and 4) conduct clinical impact evaluations of participating fellowship programs across Michigan. The proposal will establish administrative infrastructure and linkages across multiple programs, creating an expansive, innovative, multi-disciplinary division that provides support for education, scholarship and clinical service across Michigan. During the course of the project, the affiliated MSU fellowship programs in geriatric medicine will grow from two (2) programs offering three (3) fellowship positions to seven (7) programs offering 12-15 fellowship positions. The network fellowship programs will provide training for physicians from family medicine, internal medicine, allopathic, and osteopathic backgrounds. An innovative curriculum of six intensives, virtual journal clubs, case reports, and grand rounds will be disseminated using advanced telemedicine communications. Evaluations of fellows will include: performance assessments, scholarly projects, clinical competence assessments, and certification in Geriatric Medicine. Cumulative analysis of key measurable clinical indicators of care will assess the impact of the project on health care for older adults in the participating programs. The project clearly addresses the national goals of the Healthy People 2010 Focus Areas and will impact the quality of care provided to the elderly in many underserved communities and regions across the state of Michigan. The dissemination of the project’s educational programs will also influence the learning of over 200 resident physicians in geriatric medicine at MSU affiliate residencies in family and internal medicine from both the College of Human Medicine and the College of Osteopathic Medicine. The project should serve as a unique, collaborative model to enhance geriatric medicine fellowship training and scholarship to be emulated by other academic departments.

Preventive Medicine/Public Health Division

| William C. Wadland (PI) with TBN Division Director – MDCH (with MSU Institute for Health Studies Match) - $75,000 (+ $75,000 match) – (Submitted 1/14/08) – Proposed dates: 5/1/08-9/30/08

Background: The Michigan Public Health Code (P.A. 368 of 1078) requires that all counties develop and operate local health departments. As a result, the state is served by 45 local health departments (30 single county departments, one city department and 14 multi-county district departments). A key resource for each health department is the public health physician. This individual must be licensed in Michigan as an MD or DO and comply with one of the following criteria: a) Board certification in preventive medicine or public health; b) MPH or MSPH and not less than two years of full time public health practice; c) Not less than three years of full time public health practice and 24 graduate credits acceptable toward a public health degree.

Need/Issues: In June 2007, a survey showed that there are 33 physicians serving as medical directors in Michigan’s 45 local health departments. Several physicians serve more than one jurisdiction.
There is wide variation in credentials and quality of services. There is wide variation in financial resources available to pay competitive salaries. At least eight of these physicians may leave practice by January 2009. Departments have struggled to recruit and retain qualified physicians.

Proposal: Propose a blending of the organizational and financial resources of the Michigan Department of Community Health (MDCH) and MSU through the CHM Department of Family Medicine to build a Division of Preventive Medicine/Public Health. The Division will be headed by a physician trained and boarded in Preventive Medicine and will serve to coordinate preventive medicine/public health services and activities through the stated project objectives. The Division will receive administrative and support services from the Department of Family Medicine and the MSU-Institute of Health Care Studies. The expectation is to improve the quality and availability of Medical Directors for the local health departments. The proposal will also bring teaching sites and research opportunities to the University. This proposal is aligned with the land grant mission of the University and follows the boldness by design strategic imperatives: Enhance the student experience, Enrich community, economic, and family life, Increase research opportunities.

Project objectives: 1) Provide leadership to improve the knowledge, skills, linkages and overall capacity of Michigan physicians working in public health, government agencies, universities, and community organizations; 2) Support practicing public health physicians by facilitating learning, linking practicing physicians and students-in-training to public health research and teaching; 3) Identify and establish relationships with the resources of MSU that contribute to public health practice, research and teaching and also to develop and maintain relationships with the community campuses and networks of affiliates that support medical education for the Colleges of Human Medicine (CHM), Osteopathic Medicine (COM) and Nursing (CON); 4) Establish linkages of the local medical directors of health departments in each region across Michigan with the community campuses and teaching hospitals of the above Colleges; 5) Establish enhanced networking of the public health medical directors through regular meetings and telecommunications promoting learning and problem solving; 6) Provide academic appointments in CHM and COM with opportunities for joint appointments in other departments that open opportunities for involvement in teaching and research; 7) Elevate the status of public health medical directors so that all directors are qualified professionals fully committed to the public health in their region and Michigan; 8) Promote interest for and involvement in public health activities, learning experiences, and scholarly projects by health professionals in training; 9) Promote enhanced connections of public health and community resources with clinical practices across Michigan; 10) Increase utilization of available community resources (such as quitlines for tobacco use or weight reduction counseling) by clinicians across Michigan.

Project methods: 1) recruitment of a lead physician to direct the division; 2) recruitment of a full-time coordinator with at least master's training and experience; 3) provide staff support; 4) arrange telecommunications networking; 5) arrange biannual face-to-face meetings of all public health medical directors; 6) plan a comprehensive retreat to set mission, vision, and action steps for the program involving key stakeholders from MDCH, MSU, and community health; and 7) identify and activate a grant writing process to secure additional extramural support for the project proposal.

Deliverables: 1) establishment of administrative infrastructure to support completion of all objectives; 2) enhanced standards and quality of public health medical director service across Michigan; and 3) receipt of on-going extramural support from foundations such a Robert Wood Johnson or Kellogg.

Preventive Medicine/Public Health Division

  | William C. Wadland (PI) – MDCH (with MSU Institute for Health Studies Match) - $150,000 (+ $150,000 match) – (Submitted 7/2/08) – Proposed dates Year 2 continuation: 10/1/08-9/30/09 
  (See above description.)

Teaching Introductory Medical Error to Students

  | Henry C. Barry (PI) with Mary Noel, Chris Reznich, Marolee Neuberger, Dianne Wagner, Vince WinklerPrins – HRSA - $443,365 (Submitted 12/5/07) – Proposed dates: 7/1/08-6/30/11

The goal for this project is to develop and implement an introductory curriculum for third year medical students on systematic approaches to assessing and addressing medication errors, an important patient safety problem. We will implement the curriculum during a required Family Medicine Clerkship at the College of Human Medicine at Michigan State University.
Rationale: This proposal will improve CHM medical students' preparedness for residency and practice by training them in systematic approaches to addressing medication errors, an important component of patient safety. This curricular initiative addresses important national and local needs. The Institute of Medicine, in its report “To Err is Human” reported that over 44,000 Americans die each year from medical error, singling out medication-related error as an important factor. Furthermore, the Institute reports that doctors, nurses, pharmacists and other health professionals are not adequately prepared to provide the highest quality and safest medical care possible. In the midst of these important national needs, CHM has no formal curriculum addressing medication errors. This may explain why fewer than half of students embarking on their fourth year recognized the inappropriate use of medications in a Gateway Assessment case of a patient with an acute exacerbation of asthma. This proposal builds on the tradition of curriculum innovation at the College of Human Medicine (CHM) of Michigan State University. CHM was an early adopter of problem-based learning and training students in evidence-based medicine. CHM’s most recent initiatives include extensive use of performance-based assessment6 and curricular initiatives in Information Management. CHM has provided a test-bed for many worthy and successful experiments in undergraduate medical education. The Department of Family Medicine has played a significant role in the College’s tradition of innovation, including the creation of programs to address pain management, smoking cessation, the healthcare needs of the elderly, evidence-based medicine, and shared medical decision-making. We propose to build on these traditions of curricular innovation and to address national and local patient safety needs by developing a new curriculum on addressing medication errors for third year medical students during a required third year family medicine clerkship.

Objectives: 1) develop and implement an introductory curriculum which teaches a systematic approach to preventing, identifying and rectifying medication errors; 2) assess learner competence in a systematic approach to assessing and addressing potential sources of medication error; 3) develop strategies for reinforcing the content in other clerkships, including 4th year electives; and 4) disseminate results at national meetings, in the peer-reviewed literature, and online.

Methods: Project faculty working with content experts, instructional design experts, and Family Medicine Clerkship Directors will follow a systematic process of instructional design to develop instructional objectives appropriate for third year medical students. The team will develop the desired functional competence using the RIME framework of Pangaro. We will implement the curriculum during the required eight-week third year family medicine clerkship in the six communities where CHM students spend their clinical years. The final curriculum will likely address many themes, including: health literacy; working in teams; transitions in care between clinicians and venues of care; drug interactions; appropriate use of medications; team care; the principles of root cause analysis and failure mode effect analysis, and communication. In the first year of the project, we will develop the curriculum, pilot test it and make refinements. In the second and third years of this project, the curriculum will be fully implemented. Throughout all three years of the project, we will assess learners’ knowledge, skills and attitudes related to safe medication use. We will evaluate learners based on the specific criteria created by the curriculum development group. We will develop written examinations of relevant content, use the existing standardized patient Gateway Assessments to evaluate learner skills, and refine our Clinical Performance Evaluations to enable Clerkship faculty to rate students as they care for actual patients. Finally, we will survey residency directors of CHM graduates to assess how CHM students compare to graduates of other medical schools. We are seeking grant support for developing, pilot testing, implementing and evaluating the medication error curriculum. We have assembled a team with the requisite skill and experience to fulfill all grant-related activities. The proposal includes a well-developed curriculum development and evaluation plan. We plan to present the project outcomes and curriculum materials at national meetings and to submit publications of project results in the peer-reviewed literature, and to submit curriculum materials to on-line repositories sponsored by the Association of American Medical Colleges and the Society of Teachers of Family Medicine.

Michigan Improving Performance in Practice (IPIP)

David Walsworth (PI). AIAG (Auto Industry Action Group/Robert Wood Johnson Foundation (Submitted 8/6/07), $24,419, Proposed Dates: 10/1/07-09/30/08

IPIP is a primary care, physician-driven, quality improvement initiative that seeks to improve patient care outcomes by:

- Integrating quality improvement methods into practices to increase efficiency and improve care
• Implementing improved care processes for the delivery of preventive and chronic illness care
• Collecting and reporting data on identified quality measures
• Developing and applying strategies to expand and sustain improvements to care
• Offices that participate in the IPIP initiative will receive
  • Expert consultation from "quality improvement coaches" about ways to improve their practice
    infrastructure and systems
  • A proven registry system for disease management, data collection and outcome measure
    reports
  • CME credit towards maintenance of board certification.

University of Michigan Institute for Clinical and Translational Science Award
(CTSA – MICHR)

| Jodi Summers Holtrop (MSU PI) subcontract with Lee Green at University of Michigan / National Institutes of Health (submitted 1/17/07) – (MSU sub $170,954) – proposed dates – 9/30/2007 – 9/29/2012 (proposal received highest score of all submitted) |

GRIN is an essential collaborator in the Clinical Translation Network. The scope of work of this sub-
contract is to support that portion of GRIN operations we expect to be devoted to CTSA activities, at
the high level of effectiveness that Ms. Sokolnicki and Dr. Barry have established and that member
practices expect.

University of Michigan Institute for Clinical and Translational Science Award
(CTSA – MICHR)

| Jodi Summers Holtrop (MSU PI) subcontract with Lee Green at University of Michigan/NIH (submitted 1/17/07) – (MSU sub $162,555) – 2/01/2008 – 9/29/2012 |

(See section above.)

Smoking Cessation via Text Messaging: Feasibility Testing of Stop My Smoking (SMS) USA

| Jodi Summers Holtrop (Sub PI) - Internet Solutions for Kids/NIH - $36,341(MSU) ISK ($425,294) Dates: 7/1/09-6/30/11 |

About one in four young adults are current smokers. Although over half report the desire to quit or cut
down, quit rates in this age group have remained stagnant in the last 10 years. Text messaging may
represent a compelling intervention delivery method for smoking cessation for young adults because
it is a medium they have widely adopted. Cell phone interventions also are unique because of their
‘always on’ capability—interventions are never far from the young adult’s research and they are re-
ceived automatically instead of requiring the participant to initiate contact in order to receive the infor-
mation. Dr. Ybarra, along with Drs. Holtrop and Graham, have developed SMS Turkey, an innovative
behavioral intervention that uses text messaging to deliver CBT-based smoking cessation information
to participants daily. Successful use of text messaging to deliver smoking cessation programs has
been reported by Rodgers and colleagues in New Zealand and a replication study they are leading in
the UK. These data provide optimism for the feasibility of text messaging-based smoking cessation
programs in the United States. Using qualitative methods to inform design and content, and quantita-
tive methods to assess the feasibility of the program, we propose to design and test SMS (Stop My
Smoking) USA, a cell-phone based smoking cessation program for young adults ages 18-25. This
innovative smoking cessation program uses technology widely adopted by young adults, an under-
targeted population, to deliver a proactive, cognitive behavioral therapy (CBT)-based intervention.
Our multidisciplinary team of researchers brings together expertise in Internet health and the design
of tailored smoking cessation interventions.

UnitedHealthCare PCMH Evaluation


Scope/Objective: The objective of this scope of work is provide support to UnitedHealthcare and
practices participating in the UnitedHealthcare PCMH pilot in evaluation of change in attainment of the attributes of primary care, over time, of the practices in the pilot and comparison groups. The consultant will provide support in survey implementation, data collection, data analysis, report generation and data dissemination of results. Specifically, the consultant will utilize the Primary Care Assessment Tool (PCAT), developed by Dr. Barbara Starfield at Johns Hopkins University. The tool includes provider, facility and patient (both adult and child) versions and has undergone extensive psychometric testing for reliability and validity.

Children's Healthcare Access Program (CHAP) Evaluation

| Rebecca Malouin (PI) – SRA International – (Submitted 12/18/08) - $25,000 – Dates: 12/1/08-12/01/09

*Deliverables:* 1) Attend evaluation team meetings; attend, as appropriate, onsite evaluation team meetings (in Grand Rapids) and advise on development of evaluation metrics for short term and long term outcomes, in general for the initiative as a whole, and specifically related to experience with CHAP. 2) Use expertise to advise SRA International and the Children’s Healthcare Access Program (CHAP) on the following: a) Developing process metrics/outcomes, b) Developing short-term metrics/outcomes, and c) Developing long-term metrics/outcomes. The deliverables associated with these tasks will be memos to SRA and CHAP manager detailing recommended metrics and outcomes identified. The memo should include recommendations on where and how to collect the proposed metrics, as appropriate. No effort to establish a data collection system is associated with these deliverables. 3) Conduct a medical home survey with CHAP practices at baseline and at the end of the pilot year in order to measure their “medical homeness” and what/how they are looking to develop more into the medical home model in the future. 4) Provide feedback to evaluation plans developed by SRA for the process, short-term and long-term evaluation. Written feedback for each deliverable will be sent to SRA and CHAP manager with recommendations for improvement and/or contextual factors that would be important to evaluating outcomes.

Patient-Centered Medical Home (PCMH) External Evaluation

| Rebecca Malouin (PI) – Priority Health – (Submitted 8/29/08) - $30,981 – Proposed Dates: 8/1/08 – 7/31/09

*Purpose:* The purpose of this project is to provide an external evaluation to the patient-centered medical home grants initiative of Priority Health. In the spring of 2008, Priority Health announced the availability of funds for 3-5 pilot projects to implement elements of the Patient-centered Medical Home (PCMH) in primary care physician offices or networks in the Priority Health provider network. The three focal areas included: 1) access to care; 2) care coordination and/or; 3) patient engagement.

*Goal:* The goal of this scope of work is to describe a plan for an external evaluation of the PCMH grant program to be conducted in partnership with Priority Health with consultation by the grantees.

Factors Affecting Medical Trainee Specialty Choice & Service to Underserved Populations

| Julie Phillips (PI) – AAFP / Josiah Macy Jr. Foundation - $2,500 – (Submitted 8/13/08) – Proposed dates – 8/1/08-10/31/08

The Subcontractor Co-Investigator will research and write background section(s) of publication(s) anticipated from the project, with ongoing collaboration and supervision of the AAFP Principal Investigator.

Beta Testing of the Medical Office Survey on Patient Safety (SOPS)

| Jodi Summers Holtrop (PI). (Letter of Intent as a subcontract) – Oregon Rural Practice-Based Research Network / AHRQ - $17,496 – (Submitted 5/23/08) – Proposed dates: 9/1/08-8/31/09

The GRIN Network would collaborate with the consortium led by the Oregon Rural Practice-Based Research Network to implement the AHRQ task order: SOPS. Each network is responsible for recruiting 25 practices, orienting the practices to the SOPS survey, distributing and collecting the surveys to all personnel in the practices, providing ORPRN with contact information for the follow-up survey of practices, and participating in coordinating calls with ORPRN and the other sites.
New Funding – Family Medicine Co-Investigator

Intervention to Improve Adherence and Symptoms from Oral Agents

| Barbara Given (PI) with Charles Given and Barbara Conley – ONS – (Submitted 9/18/07) - $200,000 - Proposed dates 11/1/07-10/31/09. |

Purpose: This pilot longitudinal randomized trial tests and compares two nurse strategies and an Automated Voice Response (AVR) system for improving cancer patients’ adherence to three oral chemotherapy agents. Two of the strategies link improved symptom management with greater adherence; the third focuses on adherence strategies alone.

Aims: 1) to compare three trial arms according to differences on adherence outcomes as measured by the average percent prescribed number of pills taken at the trial endpoints; 2) to compare among trial arms how reduction in symptom severity is related to improved adherence at the trial endpoints; 3) to assess patient acceptance as defined by attrition from automated calls, nurse and AVR intervention arms; 4) to assess satisfaction with automated calls, nurse and AVR intervention arms. Rationale/Significance: This study makes important contributions to the new ONS Research Agenda priority by promoting and managing treatment adherence. If management of patient symptoms is shown to improve adherence to oral cancer medications, this will link these two abiding concerns among oncology nurses who interact with ambulatory patients.

Conceptual Framework: The Framework builds upon a cognitive behavioral framework tested for symptom management and now extends it to patient adherence. Research Variables: Symptom management, oral agents prescribed/taken, patient adherence, beliefs about medications, scripts filled, out-of-pocket costs, depression, acceptance, and satisfaction. Design and Methods: Patients divided according to the three oral agents will be enrolled, and have medical records audited to determine prescribed number of pills per day. All patients receive a copy of the Symptom Management Guide (SMG). Patients receive intake interviews for symptom severity, satisfaction, and beliefs about oral agents. All patients receive three calls from an AVR system to assess severity of 15 symptoms and number of oral agents taken. Following the third AVR call, the percent of prescribed pills actually taken will be identified, and a computerized minimization procedure will randomize patients to one of three groups, all receiving five additional weekly calls. Arm 1 continues to receive AVR calls. Arm 2 receives calls from a nurse who assesses symptom severity and adherence and provides strategies to manage both. Arm 3 receives calls from a nurse who assesses symptoms and adherence but delivers strategies to assist with adherence only. Patients in all arms will have the SMG for symptom management. A 10-weeks’ interview will be administered to all patients, medical records audited for dose changes in oral agents, adverse toxic events noted, and specialty pharmacies contacted to obtain scripts filled.

Setting: City of Hope, a Comprehensive Cancer Center; Cancer Care Associates, a Community Clinical Oncology Program (CCOP); and Breslin Cancer Center, a community Cancer Center.

Sample: Patients with breast, colon, or lung cancer prescribed Tykerb, Xeloda, or Tarceva.

Implications for Practice: This research will identify and thus target the conditions (oral agents, patient characteristics) where nurses can be more effective in managing patient adherence and how symptom management can improve levels of adherence. This will allow patients to take therapeutic effective doses, thus supporting the new ONS Research Agenda.

Adjusting for Non-Ignorable Missing Data in Population-Based Cancer Research

| David Todem (PI), with Charles Given, Mentor (Epidemiology) – NIH – 12/1/07 – 11/30/12 - $675,345 |

CATCH Grant for Mental Health Services in Mid-Michigan and Teaching Pediatric Residents

| Yakov Sigal (PI), with Rebecca Malouin (Pediatrics) — AAP - 11/1/08-8/31/09 - $12,000 |

We will bring university and community resources together to create a Medical Home for children with behavior and mental health problems at the residency continuity clinic at Ingham County Health Department. We will begin by identifying children with special behavior/mental health needs; child
psychiatry fellows will work with pediatric residents to care for those children, and community partners will work together to identify ways to improve access to mental health services across the community. Such collaborative work will dramatically improve quality of care for these children as well as improve the training of Pediatric residents.

**NIDA Epidemiology Training Program: ICOHRTA**

| James Anthony (PI), Carlos Rios-Bedoya (Epidemiology) – NIH/NIDA – 3/1/09-4/30/11 - $1,085,412 |

Two research-oriented university partners propose additional D43 ICOHRTA funding to sustain continued development and refinement of research training activities and collaborations during a five-year renewal period. The proposed work is focused on the science missions of NIH/NIDA and the Fogarty International Center, seeking solutions to priority public health research questions about tobacco smoking, cocaine use, and other population health and safety issues linked to use of psychoactive drugs. The two collaborating universities are Michigan State University (MSU) and Universidad Peruana Cayetano Heredia (UPCH) of Lima, Peru. The MSU Principal Investigator, James C. Anthony, is a NIDA K05 Senior Scientist award recipient and PI for a multi-year R01 project that is helping to map and define the global burden of drug dependence and related hazards of psychoactive drug use; he also has been founding director for a small NIDA T32 drug dependence epidemiology training program for United States citizens. This D43 program for trainees from Peru and Andean South America complements that T32 program, bringing the US and overseas trainees and faculty close together for productive research collaborations in relation to the R01 project and related projects. The Major Foreign Collaborator (MFC) is Dra. Marina Piazza, Profesora in the School of Public Health at UPCH, where J. Anthony has been awarded the title of ‘Profesor Honorario’ by virtue of this D43 collaboration in research capacity and research training development. Together, the MFC and PI direct the activities of the D43 program faculty and trainees, with the aid of Robert J. Gilman of Johns Hopkins University, who also holds the UPCH title of “Investigative Professor.” As a leadership team, with the assistance of multiple MSU and UPCH program faculty affiliates, they recruited more than 150 individuals for initial D43 program activities in Peru, including NIDA subject matter and research methods short courses and workshops, through which they taught UPCH program faculty and trainee-candidates about the mission and aims of the D43 training and capacity-building program. From this pool, qualified candidates were recruited for short-term or intermediate training experiences (2-8 months); six were selected for long-term training (predoc and/or PDF). Now at steady-state, this program can support 2-3 predoc fellows with 4-5 year study plans, and one PDF (8-12 months, except when the MSc degree is sought). The progress report describes creation of a Drug Use Research Unit at UPCH, reflecting increased NIDA-oriented faculty and trainee strengths, and their demonstrated capacities to secure outside (local & international) funding for studies that can generate future NIH R01 proposals and research articles. In renewal, the partners will solve problems that surfaced in the first years (e.g., augment science writing instruction; use internet for frequent video-conferencing).

**Data Coordinating Center for Autism and Other Disabilities**

| Philip Reed, David Weismantel (Epidemiology) – CDC – 7/1/08-4/30/09 - $700,000 |

**Predoctoral Training in Primary Care**

| David Weismantel (Co-Investigator with Gary Ferenchick, Michael Zaroukian, and David Solomon - Medicine) – HRSA – 3/1/09-6/30/09 - $180,000 |

**BCOG Fellowship Training Program**

| Barbara Given (PI) with Charles Given – (Submitted 5/15/08) - Walther Cancer Foundation, $97,923 – Proposed Dates: 7/1/08-6/30/09 |

**Summary:** This core is composed of supports that enable the functioning of the Mary Margaret Walther Program for Cancer Care Research (MMWP), Behavioral Cooperative Oncology Group (BCOG) Training at Indiana University, Michigan State University, University of Michigan and Ohio State University. Included in the core are faculty salaries; Scientific Director supplements; and staff support. Also included in the core are training monies for Pre and Postdoctoral Fellowship candidates at each university site, travel for BCOG and other related Walther Cancer Institute Foundation, and expense monies for each fellow.
Clinicians’ Concepts of Racial/Ethnic Differences in the Management of Chronic Illness

| Linda Hunt (PI) with Margaret Holmes Rovner, Jodi Summers Holtrop, John Gerlach, Michael Netzloff, and Adesuwa Olomu – NIH - $3,292,609 – (Proposed dates 8/16/08-8/15/13)

Specific Aims: Genetic knowledge is becoming increasingly central to the way human health and disease are understood and addressed. New genetic information is routinely being imported from the abstracted world of laboratory research into the practical context of clinical practice and everyday life. In order to assure appropriate translation of this emerging knowledge into effective medical practice, it is important to know how developments in genetic knowledge are being understood and interpreted and applied by clinicians and patients in their routine medical encounters. At the same time, there is currently great interest amongst policy makers, health researchers and clinicians in understanding and alleviating the unequal burden of disease affecting certain racial/ethnic populations in the United States. Research has shown that health disparities are largely attributable to non-genetic factors such as socio-economic status, racial discrimination, inadequate health insurance, and unequal exposure to environmental hazards. Still, many believe that genetic research holds a key to explaining and addressing racial/ethnic health disparities. How clinicians translate genetic knowledge into clinical practice, how they integrate genetic and non-genetic illness explanations, and how patients in turn understand and interpret this information has not as yet been carefully studied. The proposed study will explore how emerging genetic explanations of common chronic illnesses are understood and interpreted by a group of primary care clinicians and their patients. We will examine the clinicians’ approaches to diagnosis, treatment and long-term management of two prominent chronic illnesses known to differentially impact racial/ethnic minorities: diabetes and cardiovascular disease. The study will examine Clinicians’ understandings of susceptibility and management of these diseases. We will pay special attention to the ways they interpret emerging genetic information pertaining both to these diseases and to racial/ethnic populations, as well as their consideration of non-genetic factors known to impact disease incidence, course, treatment and adherence in minority populations. We will also explore how these factors are manifest in clinical interactions with diverse patients, and how those patients in turn understand these concepts. The study will be conducted in three major cities in the Midwest, where African American and Hispanic patients constitute a large proportion of people receiving treatment for these conditions. Open-ended interviews will be conducted with a group of clinicians and their patients, and their clinical interactions will be observed. Comparative qualitative analysis will be used to generate specific profiles of ways that genetic information is interpreted and applied by these clinicians and their patients. The study will conclude with a national survey of primary care clinicians, designed to test the generalizability of findings from the qualitative data analysis, and examine any hypotheses emerging from that analysis. Our specific aims are to: 1) Understand how genetic concepts of racial/ethnic difference are interpreted and applied by clinicians serving minority populations. 2) Understand the nature of genetic versus non-genetic factors in clinicians’ understandings of the causes and management of these common chronic illnesses, which differentially impact minority populations. 3) Understand patients’ interpretations of these concepts and of their own risk, health status and treatment responsibility. 4) Generate knowledge of how emerging genetic science can effectively be presented to clinicians and patients, to promote appropriate interpretation and application of genetic knowledge while avoiding possible misinterpretation and racial/ethnic stereotyping.

Continuing Funding

Henry Barry. Michigan Clinical Research Collaboratory (MCRC) Project - 9/1/04-06/30/08- UofM / NIH - $353,822

Henry Barry. Women’s Utilities for Perimenopausal Vasomotor Symptoms - 10/1/06-03/31/08- BCB-SM Foundation - $61,996

J. Dwyer. Geriatric Education Center of Michigan – 9/1/07-8/31/10 – HRSA - $1,292,996

Bill Given. Integrating Symptom Trials: Secondary Analysis (K05) – 7/1/05 – 6/30/10 – NIH - $612,648

Bill Given, Given BA, Bradley C, Scholnik A, Rahbar M. Automated Telephone Monitoring for System Management – 05/02/03-10/31/08 – NIH - $3,559,146

Bill Given, Gardiner J (Bradley C). In-Depth Examination of Disparities in Cancer Outcomes – VCU/
NIH – 030/1/05-04/30/08 - $329,781

Bill Given, Barbara Given. Senior Scientist – Walther Cancer Institute – 07/01/07-06/30/08 - $100,000

Bill Given. Michael K. Guest Award – 02/01/05 – 01/31/07 – Walther - $30,000

Jodi Summers Holtrop (PI) – with: David Weismantel; and UofM: Don Nease, Cynthia Pomerleau. – to AAFP Depression, Anxiety and Health Risk Behaviors: What is the Real Scope of the Problem in Primary Care? (11/1/06) - 1/01/07 -12/31/07 - $14,520.

Jodi Summers Holtrop J. RWJF (Invited to Submit – 6/28/07) - Community Health Educator Referral Liaison (CHERL) Transition Supplement $80,000 – Proposed Dates: 9/1/07-8/31/08


Margaret Thompson (PI) with Mary Noel, and Brian Mavis. Blue Cross Blue Shield of Michigan Foundation – What is Happening to Standardized Patients? Changing Health Behavior and Raising Patient Expectations with Community - $10,000 – 07/1/07-06/30/08.
Faculty Achievements

Cathy Abbott, MD  
Assistant Professor

Book Chapters

Committees
Family Medicine, Clinical Policy and Performance Committee (Chair, 2007-2008), 2000-2008.
MSU Health Team, Peer-Review Committee (Chair, 2007-Present), 2004-present.

Elizabeth Alexander, MD, MS  
Professor  
University Physician

Committees
Chair, Implementation Committee for Student Health Insurance, Faculty Group Practice, 1994-present.
Chair, Steering Committee, Managed Care Institute, Blue Cross Blue Shield/MSU, 1995-present.
Primary Care Task Force, Clinical Practice Executive Committee, Human Health Programs, MSU, 1991-present.
Policy Committee, Human Health Programs, MSU, 1991-present.
Children, Youth, Families, Diversity Colloquium Committee, 1992-present.
Clinical Practice Exec Committee, Elected to represent CHM, Vice Provost for Human Health Programs, MSU, 1991-present.
Member, All University Task Force on Gay and Lesbian Issues, Appointed by Provost, MSU, 1991-present.
MSU, Vice Provost's Committee on Cultural Diversity, 1989-present.
Sparrow Hospital Managed Care Task Force Committee, Representative of CHM, MSU, 1991-present.

Hend Azhary, MD  
Assistant Professor

Presentations

Committees
Member, Clinical Policy and Performance Committee, 2007-2008.

Henry C. Barry, MD, MS  
Associate Professor  
Associate Chair for Research

Articles
Barry HC. (POEM) Early motion + surgery
Barry HC. (POEM) Guideline for medications in CF. Journal of Hospital Medicine, 2008.

**Book Chapters**

**Presentations**
Barry HC, Reznich C. Challenges Evaluating Medical Student Competence in Evidence-Based Medicine, STFM, 41st Annual Spring Conference, Baltimore, MD, April 2008.

**Committees**
Family Medicine, Executive Committee, 1996-present.
CHM, Committee on Research, August 2008-August 2010.
CHM, Committee on Graduate Studies & Research, August 1998-2008.
EBM Consultant, American Academy of Family Physicians’ Commission on Continuing Profes-

Karen Blackman, MD
Assistant Professor

**Conference Presentations**
Blackman K., Introduction to Antidepressants for the Treatment of Depression and Anxiety, MSU Counseling Center, East Lansing, MI, January 2008.

**Committees**
Family Medicine, Executive Committee, Executive Committee, Department of Family Medicine MSU, 2006-present.
Roy Gerard, MD
Professor

Presentations

Committees
BCBSM Foundation, Grant Advisory Panel, MSU, CHM, 1998-present.
Member, Board of Curators, Center for the History of Family Medicine, 2006-2009.
Member, Development Subcommittee of the Board, Center for the History of Family Medicine, 2008.

Charles W. Given, PhD
Professor

Articles

Cancer Therapy, 2008;6(B):367-76.


**Presentations**


**Committees**

Mary Margaret Walther Post-Doctoral Fellow Review Committee, 1999-present.

Mary Margaret Walther BCOG Executive Committee, Chair, 1999-present.

Behavioral Cooperative Oncology Group Advisory Committee, 2000-present.


MSU, Committee on Conflicts of Interest, 2008.

MSU, Committee on Academic Council, Faculty Council, 2008.


EBM Consultant, AAFP Committee of Continuing Professional Development (National), 2008.

MDCH, Sudden Cardiac Death of the Young, member Expert Review Panel (Community), 2007-present.

Family Medicine, Reappointment, Promotion & Tenure Committee, 2008-2010.

Research Mentor, MSU undergraduate Medical Scholars program, 2001-present.

CHM, Graduate Studies Committee, August 2008-August 2009.

CHM, College-wide Mentor Group, 2008.

Family Medicine, Curriculum Committee, 2008.

Family Medicine, By-Laws Committee, 2008.

Family Medicine, Recruitment Committee, 2008.

MSU, Cancer Center Cancer Control Committee, 2008.

MSU, Research Initiation Grant Review Committee, 2008.

MSU, Graduate Council, 2008.

MSU, University Committee on Intellectual Integrity, 2008.
Raza Haque, MD
Assistant Professor

Articles

Presentations
Haque R. Beta Blocker and their Role in Non-Healing Pressure Ulcers in Long-Term Care Facilities, American Medical Directors Association, March 2008.

Awards

Committees
Reviewer, HRSA, 2007-present.
Family Medicine, Clinical Peer Review Committee, 2008-2010.
Chair, Geriatric Care, MSMS, 2008.
Family Medicine, Chair, Geriatric Search Committee, 2008.
Supervising MSU Resident Research, Grief Survey on Hospice Nurses & Training Residents, 2008.
Supervising, Fellowship Student Research, Role of Music Therapy and Dementia (Survey), 2008.
Mentorship, two College of Human Medicine Medical Students, 2008.

Jodi Summers Holtrop, PhD, CHES
Assistant Professor

Articles

Presentations


Committees

Family Medicine, RPT Committee (Annual Renewable) (Chair 07-08, 08-09), 2004-2009.

Family Medicine, Executive Committee, March 2006-2008.


David Kozishek, MA, BCC
Assistant Professor

Articles


Presentations

Kozishek D. The Use of 'Miracle' Language in the Clinical Setting, MSU Center for Ethics & Humanities in the Life Sciences Brown Bag Series, East Lansing, MI, April 2008.

Kozishek D. Religious Language in the Clinical Setting, Sparrow Hospital Ethics Committee Education, Lansing, MI, April 2008.


Committees

CHM, Professionalism Task Force Member, 2007-present.

Ingham Regional Medical Center Clinical Ethics Committee, member, 2007-present.

Rebecca Malouin, PhD, MPH
Assistant Professor

Articles


Presentations


Malouin R, Duquette D. Looking Back…Think-
ing Ahead: Applications of Family Health History to Primary Care, CDC's 10th Anniversary of Public Health Genomic, Atlanta, GA, January 2008.


Marolee Neuberger, MS
Director, Residency Program Network

Presentations
Neuberger M. Health Literacy Activities Across NAO Programs (Poster), NAO National Conference, Denver, CO June 2008.


Mary Barth Noel, PhD, MPH, RD
Professor Senior Associate Chair

Presentations

Mavis B, Henry R, Noel MM, Reznich C. (Poster) A Tail of Two Cohorts: Student Performance Variability in an OSCE. Undergraduate Medical Education, Central Group on Educational Affairs (AAMC), Columbus, OH, April 2008


Reznich C, Noel MM. (Poster) The Curricular SOAP Note: A Clinical Tool for Curriculum Evaluation. The 41st Annual Society for Teachers of Family Medicine, Baltimore, MD, April 2008


Mavis B, Henry R, Noel MM, Wagner D, Reznich C. (Presentation)) Student Performance Variability in an OSCE: Poor Performance versus Poor Performers. Research in Medical Education (AAMC), San Antonio, TX, November 2008

Awards

Committees
Family Medicine, Executive Committee, 1997-present.

Celiac Support Group, Nutrition Adviser (Community), 1998-present.

CHM, College Advisory Committee (CAC), 2003-2008.


MDCH, Colo-Rectal Cancer Advisory Committee (Community), 1997-present.

Michigan Surgeon General Task Force on
Karen S. Ogle, MD
Professor

Articles

Book Chapters

Authored Web Site

Presentations

Awards
State Pain Initiative Champion, Alliance of State Pain Initiatives, 2008.

Committees
American Academy of Hospice & Palliative Medicine, 1990-present.
Michigan Cancer Pain Initiative, President, 2006-present.
State of Michigan, Legislative Advisory Committee on Pain and Symptom Management, 1998-present.
Michigan Hospice and Palliative Care Organization, Member, 1992-present.

Dorothy R. Pathak, PhD, MS
Professor

Articles

Committees
Master’s Thesis Committee, Department of Epidemiology, 1995-present.
Epidemiology, Reappointment, Promotion, and Tenure Committee, 1997-present.
Family Medicine, Reappointment, Promotion & Tenure Committee, 2003-2009.

Randolph L. Pearson, MD, FACSM, FAAFP
Associate Professor

Committees
Education Committee, St. Lawrence Hospital, 1993-present.
Management Committee, Department of Family Medicine, MSU, 1999-present.
Clinicians’ Council, MSU HealthTeam, 2001-present.
Julie P. Phillips, MD, MPH
Assistant Professor

Presentations

Committees
Member, Michigan Primary Care Consortium, Workforce Committee, 2008.
CHM, MSU, Family Medicine Clerkship Committee, Member-at-Large, 2008.
Supervising Faculty Member, "Buruli Ulcer in the Asante Akim District: Role of Traditional Treatment," Medical student quality research study, 2008.

Brian Z. Rayala, MD
Assistant Professor

Committees
Continuing Medical Education Committee, CHM/MSU, September 2008 – Present.
Executive Committee, Department of Family Medicine, CHM/MSU, January 2008 – December 2008.

Teaching Responsibilities
Teaching Attending Physician, Sparrow/Michigan State University Family Medicine Residency Program, Ambulatory Clinic, July 2006 – Present.
Faculty Preceptor, Family Medicine Clerkship Rotation, Ambulatory Clinic, Block 3, CHM/MSU, July 2005 – Present.
Faculty Advisor to medical students in difficulty, Clinical Skills Department, Office of Academic Programs, CHM/MSU, July 2005 – June 2008.
Instructor, Interactional Skills Course (Small Group Teaching), Block 1 Clinical Skills, CHM/MSU, August 2005 – Present.
Lecturer, Common Dermatologic Conditions in Family Medicine, Family Medicine Clerkship Rotation, Block 3, CHM/MSU, August 2005 – Present.
Faculty Mentor, Mentor Program, CHM/MSU, September 2005 – Present.
Instructor, Introduction to the Patient-Physician Relationship Course (Small Group Teaching), Block 1 Clinical Skills, CHM/MSU, October 2005 – Present.
Faculty Advisor, Family Medicine Interest Group, Department of Family Medicine, CHM/MSU, January 2006 – December 2008.
Instructor and Lecturer, Physical Examination Course, Block 1 Clinical Skills (Large and Small Group Teaching), CHM/MSU, January 2006 – June 2008.
Lecturer, Section on Health Maintenance, Block 2 Clinical Skills, CHM/MSU, January 2006 – June 2008.

Carlos F. Ríos-Bedoya, ScD
Assistant Professor

Articles

Presentations
Ríos-Bedoya CF. Inter-Ethnic Differences on the Lifetime Risk for Alcohol, Cannabis, and Cocaine Use among Latinos, 70th Annual Scientific Meeting of the College on Problems of Drug Dependence, San Juan, Puerto Rico, June 2008.

Awards
American Legacy Foundation Travel Scholarship to Increase Diversity in Nicotine and Tobacco Research, American Legacy Foundation, 2008.

Committees
Family Medicine, Reappointment, Promotion and Tenure Committee, 2007-2008.

Steven E. Roskos, MD
Associate Professor

Articles
Wallace LS, Keenum AJ, Roskos SE, Koopman RJ, Young KG. Blood glucose monitor quick


Presentations
Wallace, L.S., Keenum, A.J., & Roskos, S.E. Cognitive Complexity and Reading Demands of Patient Self-Administered Opioid Assessment Screening Tools. Poster session presented at the 24th Annual Meeting of the American Academy of Pain Medicine, Orlando, FL. February 2008. This poster was selected as one of the top five posters at this meeting and so was presented again at the American Conference on Pain Management, New York, NY. April 2008.


Committees
Member, Christian Medical Association, 1990-present.
Member, Christian Community Health Fellowship, 1991-present.
Member, American Academy of Family Physicians, 1992-present.
Member, Michigan Academy of Family Physicians, 2007-present.
STFM, Group on Family-Centered Perinatal Care, 2004-present.
STFM, Group on Pain Management & Palliative Care, 2004-present.
Member, Group on Evidence-Based Medicine, 2004-present.
Member, Group on Hospital Medicine and Procedural Training, 2004-present.
CHM Committee on Admissions, January-June 2008.

Mindy A. Smith, MD, MS
Associate Professor

Book Chapters

Committees
Co-Director Research Track and Faculty Mentor, Primary Care Faculty Development Fellowship Program (OMERAD), 1998-present.
Faculty, Mock Study Section, Grant Generating Project (GGP) Fellowship, University of Missouri Columbia, 1999-present.

Suzanne Sorkin, MD
Assistant Professor

Committees
CHM Student Awards Committee, 1996-present.
Sparrow Hospital Credentials & Privileges Committee, 1998-present.
Volunteer Physician, Friendship Clinic (Occasional Saturday mornings supervising students at free clinic), 2005-present.
William C. Wadland, MD, MS
Professor and Chair
Associate Dean, CHM Faculty
Affairs and Development

Articles

Book Chapters

Presentations
Wadland WC. Public Health / Academic Medicine, Association of Department of Family Medicine, 2008.
Wadland WC. New Faculty Orientation, 2008.
Anderson WA, Wadland WC, Mylona E, Foltz MA. Best Practices for Orienting New Medical School Faculty. AAMC Faculty Affairs Professional Development Conference, Pittsburgh, PA, August 2008.

Committees
CHM, Executive Committee, Chair, 1992-present.
MSU, Faculty Group Practice, Finance Committee, Human Health Programs, 1992-present.
CHM, Faculty Group Practice Board of Directors/Advisory Committee, MSU, 1992-present.
Family Medicine, Executive Committee, 1992-present.
Michigan Health Counsel Task Force on Tobacco Abuse, Representative for MAFP, 1995-present.
AAMC, Committee on Research in Faculty Affairs, 2008-present.
CHM, Ex-Officio member, College Advisory Council, 2008-2009.
UPHEC, Medical Education Board of Trustees, Marquette, MI, 2002-present.
CHM, Ex-Officio Member, Reappointment, Promotion, and Tenure Committee (RPT), 2003-present.
Society of Teachers of Family Medicine (STFM) Strategic Planning Committee, 2008-present.

David Walsworth, MD, FAAFP
Assistant Professor
Associate Chair for Clinical Affairs
Medical Director of the Family Health Clinic

Presentations
Walsworth D. Invited Panel Discussant, State Medical Societies’ Role in Advancing the Quality Agenda, AMA House of Delegates Meeting, Chicago, IL, June 2008.

Awards
Golden Crow Award, MAFP, 2008.

Committees
MAFP, President Elect, 2008.
Family Medicine, Quality Improvement Committee, 2005-2009.
AAFP, Subcommittee on Assembly Scientific Program, 2006-present.
Family Medicine, Clinical Policy & Performance Committee, 2005-present.
Family Medicine, Executive Committee, 2005-present.
Family Medicine, Chair, Clinical Executive Committee, 2005-2009.
Family Medicine, Chair, Patient Care Peer Review Committee, 2005-present.
Family Medicine, Chair, Group Practice Committee, 2005-2009.
Family Medicine, Geriatrics Committee, 2005-2009.
MAFP, Executive Committee, 2005-present.
MAFP, Board of Directors, 2001-present.
MAFP, Committee on Economics & Practice Environments, 2002-present.
MAFP, Committee on Economics & Practice Environments (Chair), 2005-present.
MAFP, Committee on Legislative & Government Affairs, 2002-present.
MSMS, Annual Scientific Meeting Planning Committee, 2003-present.
MSMS, Advisory Committee on Practice Economics, 2006-present.
MSMS, Committee on Membership & Recruitment, 2005-present.
MSMS, Committee on Aging, 2005-2008.
ICMS, Board of Directors, 2006-present.
ICMS, Co-Chair, Legislative Committee, 2005-present.
AAFP, Commission on Continuing Professional Development, 2006-present.
MSU, Credentials & Enrollment Committee (Chair), 2007-present.
MAFP, Foundation, Treasurer, 2005-present.
MAFP, Foundation, Board of Directors, 2005-present.
MAFP, Political Action Committee, Board of Directors, 2005-present.
ICMS, Delegate, MSMS House of Delegates, 2006-present.
MAFP, First Vice President, 2007-2008.
MAFP, Committee on Professional Development & Accreditation (Chair), 2007-present.
MSU, Quality Council (Chair), 2007-present.
MSU, Risk Management Committee, 2007-present.
MSU, Department Advisory Committee, 2006-2009.
Physicians Health Plan, Quality Improvement Committee, 2007-present.
AMA, Alternate Representative to AMA Physician Consortium for Quality Improvement, 2008.
AMA, Alternate Delegate to AMA House of Delegates, 2007-present.
MSMS, Annual Scientific Meeting Planning Committee (Co-Chair), 2007-2008.
MSMS, Committee on CME Planning, 2007-present.
MSMS, Committee on CME Accreditation, 2007-present.
MSMS, Committee on Health Care Quality, Efficiency and Economics, 2006-present.
MAFP Foundation, Treasurer, 2005-present.
MAFP Foundation, Board of Directors, 2005-present.
MAFP Political Action Committee, Board of Directors, 2005-present.
BCN of Mid-Michigan, Medical Directors' Committee, 2005-present.

David Weismantel, MD
Associate Professor

Articles

Book Chapters

Presentations
Malouin R, Weismantel D, Gerard R. Evaluation of a New Family History Form in a Family Practice Electronic Medical Record, STFM 41st
Annual, Baltimore, MD, April 2008.


Committees
Family Medicine, Executive Committee, 2006-present.
CHM, Reappointment, Promotion & Tenure Committee, 2006- August 2010.
Family Medicine, Clinical Policy & Performance Committee (MSU), 2007-2009.
Family Medicine, Clinical Policy and Performance Committee (MSU), 2007-2009.

Awards
CHM Nominee for AAMC Humanism in Medicine Award, AAMC, 2008.

Book Chapters

Presentations
The Family Medicine Residency Program Network is a collaborative effort of the nine Family Medicine Residency Programs affiliated with MSU. The Network strives to foster communication between the University and residency programs, encourage collaboration and resource exchanges, disseminate timely information, and support scholarly endeavors. By working together, we hope to serve each program more fully in accomplishing their goals and to improve the quality of family medicine education in Michigan. The past year was an exciting one in the Network with many new activities, events, and opportunities.

Family medicine residency programs participating in the Network include:

- Genesys Health System (Grand Blanc)
- Kalamazoo Center for Medical Studies (Kalamazoo)
- Marquette General Hospital (Marquette)
- McLaren Medical Center (Flint)
- MidMichigan Medical Center (Midland)
- Munson Medical Center (Traverse City)
- Sparrow Hospital/MSU (Lansing)
- St. Mary’s Hospital (Grand Rapids)
- Synergy Medical Education Alliance, Inc. (Saginaw)

Network Activities

The Senior Resident Leadership Training was held May 8-9, 2008, at the Kettunen Retreat Center in Tustin, Michigan. The focus of this training is on developing leadership skills (particularly interpersonal and administrative skills) among “to-be” senior residents (particularly chief residents). The training also encourages future communication and collaboration among residents in the Network. Nearly 30 residents attended.

The Residency Program Annual Retreat, September 11-12, 2008, was hosted by the Grand Rapids Family Medicine Residency. John Saultz, MD, Professor and Chair of the Department of Family Medicine at Oregon Health and Science University presented the keynote address, “The Patient-Centered Medical Home.”

Residency Program Director’s Meetings are held four times during the academic year to discuss Network activities and facilitate sharing across programs.

The National Family Medicine Board Review Course was revised and delivered in 2008 by the Network in three courses during May (Baltimore) and June (Dallas and Las Vegas). This is a collaboration of the Center for Medical Education, Inc. and Dowden Health Media, along with the MSU Department of Family Medicine. Compact discs of all the slide presentations and an audio version of the course have been delivered to each participating residency program.
Three Days with a Family Doctor Program: The Network sponsored an elective to introduce medical students to individual family doctors and provide them with a unique three-day experience. This included the opportunity to spend three full days and nights with a family doctor and his/her family. Students received one elective credit and their mileage expenses are reimbursed. Students completing the experience find it extremely rewarding. This year's student was Dexter Fossitt, whose three days were spent with Donald R. Ellis III, MD, of Oscoda.

The Residency Network website includes pdf copies of the annual report, a curriculum clearing house, current news and upcoming events, practice opportunities, etc.

FMR-NET is a listserv for the faculty of the network, allowing communication with many faculty by sending one message. Updates and resources relating to family medicine and graduate medical education are sent as needed. Members can send messages by sending email to fmr-net@list.msu.edu.

Network Director Marolee Neuberger can be reached at marolee.neuberger@hc.msu.edu or 517-884-0439.

With her appointment as Coordinator of the Marquette Family Medicine Residency Program in 2000, Susan Tincknell quickly developed a passion for learning as much about effective program administration as possible. She joined the Association of Family Medicine Administrators (AFMA) and, as a new coordinator, completed their Residency Administrative Training Program. She has been a presenter at both the Residency Program Solutions conference and the National Center for the Evaluation of Family Medicine Residency Program annual conference.

A few years ago the National Board of Training Administrators of Graduate Medical Education Programs (TAGME) and AFMA began to explore the possibility of establishing a certification program for Family Medicine administrative professionals. In early 2007, AFMA conducted a survey of its membership to determine if AFMA members were interested in certification.

It became clear that there was interest in TAGME certification among the membership. So, in September 2007 AFMA, on behalf of Family Medicine, petitioned TAGME to begin development of assessment tools for Family Medicine.

Tincknell enthusiastically became a member of the TAGME Task Force to create the Family Medicine Certification Assessment. She was responsible for writing questions for the Monitored Assessment Test, piloted the exam, and created the Family Medicine Acronym Guide.

The requirements for certification include completion of two assessment tools. Part I is written in a monitored setting; Part II is a work effort product. There are also several requirements regarding depth and breadth of the applicant's professional experience.

All TAGME Task Force members, themselves, had to take both portions of the exam to become certified, and Tincknell thus became one of the first to be certified.

To lessen the financial burden of certification, TAGME has identified multiple regional assessment sites to choose from. For our MSU coordinators interested in becoming certified, The University of Michigan in Ann Arbor is one of the open sites. For more information go to http://tagme.org/ or call Tincknell at 1-800-774-4844.
What It’s Really Like — Three Days with a Family Doctor

By Dexter Fossitt
MSU Medical Student
July 31, 2008

My three days were spent with Donald R. Ellis III, MD, of Oscoda. I arrived at Dr. Ellis’s house on July 27, 2008, and was greeted by a slew of people. Eleven of his family members were just getting ready for dinner. That night I was introduced to his wife, children, parents, sister, and sister’s children. Afterwards I was given a tour of his house, while everyone else was leaving. That night we talked at length about his experiences working in a rural area and he gave me an opportunity to voice my thoughts and beliefs about becoming a family physician.

The next three days amounted to a great learning experience. During the morning of the first day we saw patients in the hospital. Three of the patients were having COPD exacerbations and the other had inflammatory breast cancer. My past experiences with family medicine gave me the impression that family physicians only treated basic issues and mainly referred patients to specialists for any complicated issue. This experience shot that belief down.

After our stint at the hospital we went to the outpatient clinic and saw patients there for the next 2.5 days. St. Joseph’s Oscoda Health Park where Dr. Ellis practices provides comprehensive care to the people of northern Iosco and Alcona Counties. Oscoda and the surrounding towns are located directly on Lake Huron and are mainly resort towns. The population consists predominately of elderly people who have multiple co-existing chronic diseases. We only saw a few pediatric patients. I didn’t really consider this a big factor in my future career, but it really is. Matching my interests with the population I will be taking care of will be a large factor in deciding my residency location and ultimately where I practice as an attending physician.

We saw so many interesting cases in the clinic that reinforced what I learned during my first year of medical school. We saw one older woman treated recently with aminoglycoside antibiotics who had new onset hearing loss. We saw a pregnant woman with pruritic urticarial papules and plaques of pregnancy (PUPPP), which is an itchy rash occurring in about 1 in every 200 pregnancies. We saw a baby with elevated bilirubin and determined that she was possibly having a mild hemolytic response instead of physiologic jaundice.

In addition to clinical activities, Dr. Ellis gave me a lot of information about billing properly, maintaining good relationships with the other staff and how to boost their morale, and even of the importance of practicing evidence-based medicine.

Dr. Ellis was a great example of a physician who could maintain a happy home life and a rewarding practice simultaneously. At work he was an excellent clinician who seemed to be this guru of nearly every area of medicine. Dr. Ellis had such a great relationship with his patients and had known many of them ever since he started practicing 8 years ago. When we left the office his focus seemed to change completely to his family. He would play with his three young children and spend time with his wife.

Becoming a family physician was at the top of my list and this experience just strengthened that. In particular, I want to work in a rural area in both the inpatient and outpatient settings. Overall this experience cleared up all of my preconceptions about family medicine and showed me the true scope of specialty.
Achievements & Transitions

We enjoyed another exciting and rewarding year as our Genesys Family Medicine Residency Program celebrated its 36th year of training family physicians. One of the highlights of our year was receiving a full five-year accreditation of our program from the Accreditation Council for Graduate Medical Education.

With the start of the new academic year, we welcomed John Georgakopoulos, DO, as our new Co-Program Director to oversee the fulfillment of the American Osteopathic Association requirements of our duly-accredited program. His predecessor Dr. Richard LaBaere was promoted to Director of Medical Education at Genesys when Robert Sutton, PhD, accepted a position as Associate Dean of Academic Affairs with Pacific Northwest University College of Osteopathic Medicine in Yakima, Washington.

In preparation for our 2008-09 academic year, our faculty worked together to develop a new and innovative curriculum to respond to the changing environment of our specialty, while maintaining the academic requirements of both of our accrediting bodies. Our curriculum was completely revamped to create three separate educational tracks for our residents: an ambulatory track, an obstetrical track, and a hospitalist track.

As always, our goal is to prepare our residents to be comfortable and proficient in all aspects of family medicine, from the hospital, to the ambulatory setting, to the business side of medicine. Under the leadership of Dr. Nick Buttar, our residents receive extensive inpatient and outpatient billing and coding education. In fact, our graduates often call to tell us that they are looked at as the “experts” in billing and coding in their new practices!

Prabhat Pokhrel, MD, joined us as a full-time faculty member this year and in addition to his responsibilities with the residency program, he has assumed the primary teaching role for the MSU-CHM Family Practice Clerkship.

Guozhen Liu, MD, was honored by our graduating residents as this year’s recipient of the Outstanding Teacher in Family Medicine Award.

New and Graduating Residents

On June 20, 2008, we celebrated the accomplishments of our senior residents at our annual Graduation Dinner & Awards Ceremony.

Anita Asadoraian, DO, was this year’s recipient of the Ayman N. Elotei Memorial Award in recognition of her genuine caring and compassion to patients, physicians and staff. In addition, Dr. Asadoraian was honored as one of our Co-Chief Residents for the past year.

Harbir Bhullar, MD, returned to Canada following graduation to join a private practice in Windsor, Ontario.

Deborah Cornell, MD, was also the recipient of the Ayman N. Elotei Memorial Award. Our faculty honored Dr. Cornell with this award in recognition of her extraordinary caring and compassion for her patients. Dr. Cornell plans to practice in Grand Rapids, Michigan following graduation.

Atsushi Endo, MD, was honored as this year’s recipient of the Academic Achievement Award. His plans after graduation include training in the Primary Care Sports Medicine fellowship at MSU-KCMS.

Yogesh Jagirdar, MD, received the Resident Teacher Award for his outstanding dedication to teaching medical students and residents. Following graduation, Dr. Jagirdar accepted a “hospitalist” position in Roanoke, Virginia.
Clarissa Kroese, DO, accepted a position with a group practice in Fenton, Michigan following graduation.

Madhavi Madugula, MD, an outstanding resident, was undecided about her future plans at the time of graduation.

Kelly Mason, DO, was honored as a Co-Chief Resident and received an additional honor as the recipient of this year’s Society of Teachers in Family Medicine award.

Neha Patel, MD, joined Emergency Physicians Medical Group, St. John’s Mercy in Ann Arbor, Michigan, following graduation.

Ariel Ponce, DO, joined one of Beaumont’s family medicine groups in Hartland, Michigan, following graduation.

Harishchandra Rathod, MD, joined a private practice in Indiana after graduation.

Robert Zaid, DO, was awarded the Resident Teacher Award for his enthusiasm and commitment to teaching. He joined a private practice in Novi, Michigan, following graduation.

In July, we welcomed our new PGY I class to our program and anticipate an exciting year as they begin their training with us. Our class includes: Rama Atla, MD, Siddhartha Medical College, India; James Bennie, MD, American University of the Caribbean; Chaitanya Chekkilla, MD, Kakatiya Medical College, India; Alistair Co, MD, Cebu Institute of Medicine, Philippines; Manuj Goel, MD, Maulana Azad Medical College, India; Lisa Hendricks, DO, Michigan State University College of Osteopathic Medicine; Robert Hutchins, DO, Michigan State University College of Osteopathic Medicine; Suja Jeyasingh, MD, Christian Medical College, Ludhiana, India; Sunil Kumar, MD, Kasturba Medical College, India; Priti Nikte, MD, Mahatma Gandhi Mission’s Medical College, India; Nicole Ryke, MD, Wayne State University School of Medicine, Detroit, Michigan; Jonny Salim, MD, Universitas Trisakti, Indonesia; and Li Wang, MD, Shanghai Second Medical University, China.
Grand Rapids Family Medicine Residency Program

John E. vanSchagen, MD, Program Director
300 Lafayette SE, #3400
Grand Rapids, MI 49503
(616) 752-6741
http://www.grmerc.net/familypractice/

Grand Rapids hosted the Annual MSU Family Medicine Network Retreat September 11-12, 2008, at the Grand Valley State University Eberhard Center. There were approximately 50 people in attendance. John Saultz, MD, was the keynote speaker on the “Patient Centered Medical Home.”

This year we initiated an Orientation Month for Family Medicine interns. In July they received an in-depth introduction to inpatient and outpatient Family Medicine. The interns also completed our clinical judgment scenario evaluation piece and hands-on physical exam workshops. We also scheduled two hours, three times a week, for didactics. Topics included many basic clinical science lectures and other orientation pieces. We utilized one of our graduates, Dr. Jeff Chamberlain, as an education consultant during this month. He was an extra set of eyes on the service and worked in conjunction with the faculty rounder over the course of the month.

We hosted an Advanced Life Support in Obstetrics (ALSO) Course during the Orientation Month. Along with the first year Family Medicine residents, first year Obstetrics residents from Grand Rapids, and first year Family Medicine residents from the Kalamazoo program attended. Multiple attending family physicians and a few midwives and nurse practitioners also attended. Dr. Barb Stanford organized this course, and many of our faculty helped as instructors. Dr. Stanford has recently been approved as an ALSO Advisor Faculty by the American Academy of Family Physicians (AAFP). We continue to have other members of our faculty attend the ALSO Instructor Courses provided by the AAFP, growing the number of certified instructors in our community.

Faculty/Staff Achievements

Dr. Tom Hils participated in a faculty development course offered by the University of Michigan, and Dr. John vanSchagen successfully completed the National Institute for Program Director Development Fellowship sponsored by the AFMRD.

Publications and Research

Dr. John vanSchagen wrote an article for DynaMed with Dr. Mike Cabasug, PG2 Resident on DeQuervain’s Tenosynovitis. This is an on-line primary care resource. PG1 Resident Dr. Rajani Lohani will give a case presentation at GRMERC Research Day on April 22, 2009. Her case is “Virus Induced Autoimmune Hemolytic Anemia.” Drs. Nap Bravo and Ali Dacanay, both PG3 residents, will give a case presentation on ”Prospective Cohort Study on Improving Management of Chronic Non-Malignant Pain in a Primary Care Setting.” Dr. John vanSchagen and fellow faculty Dr. Jean Thomas will do a poster presentation on “A Case of Geographic Skin Eruption in a Scuba Diver.”

New and Graduating Residents

On June 13, 2008, we celebrated with our 2008 graduates at the Amway Grand Plaza. Outstanding Teacher Awards were presented to Drs. Steve Ashmead, Matt Dikin, Jack Schneider, Helen Scott, Jan Talmo, and Marc Travis. Dr. Phil Baty received the Teacher of the Year Award. Residents Dr. Jeff Chamberlain and Dr. Alanna Wiarda received awards.

Drs. Jeff Chamberlain and Alanna Wiarda joined Advantage Health in Grand Rapids. Dr. Mitch Gadow is working with Spectrum Health Urgent Care in Grand Rapids. Dr. Matt Boyd was accepted into the Sports Medicine Fellowship at MSU in Lansing. Paul Dibble MD, will work at Partners in Family Medicine in Hudsonville. Kamran Khan, MD, will work at an Outpatient Clinic in Parish, New York. Dr. Ron Luanzon will move to Hermiston, Oregon, to work in the Hermiston Community Health Center.
**Dr. Gwen Unzicker** will be at the Holland Community Health Center. **Luc Vlad, MD,** will work at Blue Ridge Cardiology and Internal Medicine in Mt Airy, North Carolina.

We welcomed nine new interns in July: **Dr. Kevin Ali** from the Medical University of the Americas; **Dr. Paul Gillard** from Wayne State University; **Dr. Amanda Hoffman** from the University of Minnesota; **Dr. Saira Khan** from Rawalpindi Medical College; **Dr. Rajani Lohani** from Mymensigh Medical College; **Dr. Sashank Pokhrel** from BP Koirala Institute of Health Sciences; **Dr. Kushagra Pundir** from the University College of Medical Sciences and **Dr. Byron Torres** from the University of Santo Tomas. We also added **Dr. Jason Littleton** from Michigan State University to our program as a PG2 Resident in 2008.

**Program Coordinators from the MSU Department of Family Medicine Residency Network programs gathered during the September 2008 Network retreat in Grand Rapids. Present were (from front left) Jean Rollins, Kalamazoo; Alicia Crispin, Grand Rapids. Left to right top: Stephanie Luschuk, Flint McLaren; Susan, Upper Peninsula; Jodi Wilcome, Grand Rapids.**
Transitions and Achievements

After receiving the Michigan Care Improvement Registry’s “Site of Excellence Award” in 2007, Kalamazoo Family Medicine was thrilled to once again be recognized for excellence in immunizing our pediatric patient population by receiving the AAFP/Foundation Wyeth Immunization’s “Best Practices Award” for 2008.

Jane Hanneken, MD, and residents Shannon Kusiak, MD, and Smitha Suravaram, MD, began working with Integrated Health Partners Chronic Care Model Diabetes Collaborative with the goal of implementing the model into our practice.

Michael Clarke, MD, joined our faculty on July 1, 2008, bringing with him a wealth of knowledge obtained by completing a fellowship in Obstetrics at the Jackson Memorial Hospital in Miami, Florida. He will work on continuing to upgrade and expand our obstetrics and women’s health curricula. Our residents are fortunate to have his expertise full time to consult with their more complex obstetrical patients. Dr. Clarke will be precepting, taking OB call, and lecturing to both the Family Medicine residents and MSU clerkship students.

Scholarly Activities

Robert Baker, MD, PhD, FACSM, Review of ACSM’s Primary Care Sports Medicine, second edition.

Robert Baker, MD, PhD, presented at the Pinky Newell Lecture GLATA, Toledo Ohio, MRSA in Athletes: Treatment.


Jane Hanneken, MD, and Residents Shannon Kusiak MD, Smitha Suravaram MD, IHP Chronic Care Model Diabetes Collaborative.


Jane Hanneken, MD, submitted a chapter on Thyroid Nodule Diagnosis for John Wiley & Sons book “Essential Evidence Plus.”

Jane Hanneken, MD, and resident, Megan Bayrd, DO, analyzed data from our MSU/KCMS Family Medicine high-risk obstetric patients. Dr Bayrd presented the research with a poster titled “An Examination of the Pregnancy Risk Factors and Outcomes in a Family Medicine Population” at the KCMS Research Day and then again at the ACOFP National Conference in Denver, Colorado. She won best Family Medicine Poster at the KCMS Research Day and Best Poster Presentation Award at the ACOFP Conference.

Pete Ziemkowski, MD, submitted a chapter on Actinic Keratosis for John Wiley & Sons book “Essential Evidence Plus”

Pete Ziemkowski, MD, submitted a chapter on Tinea Capitis for John Wiley & Sons book “Essential Evidence Plus”

Pete Ziemkowski, MD, presented “Gynecology and Infectious Disease” at a National Family Medicine Board Review Course, July 2008.


Pete Ziemkowski, MD. Sub-Investigator in a Phase 3 clinical trial sponsored by Novartis.
New and Graduating Residents

On June 13, 2008, KCMS celebrated the end of residency with a wonderful recognition and awards ceremony at Miller Auditorium. **Patvin Adams, MD,** is practicing Family Medicine in Louisiana. **Megan Bayrd, DO,** joined the practice of Red Cedar Medical Center in Menomonie, Wisconsin. **Madiha Farhat, MD,** is practicing at the Otsego Medical Center in Otsego, Michigan. **Jonathan Martinek, MD,** is a staff physician at ProMed Family Practice in Portage, Michigan. **Joong Eun Shin, MD,** is a staff physician at Pioneer Memorial Hospital in Viborg, South Dakota. Chief **JD Wideman, DO,** joined the practice of Mountain View Family Medicine in Fort Collins, Colorado. The residents selected **Jennifer Johnson, MD** (full-time faculty), and **Mary Ellen Benzik, MD** (part-time faculty), as the recipients of the Annual “Outstanding Teaching Award” presented at graduation.

In July we welcomed our new residents. **Amy Curry, DO,** from MSU/College of Osteopathic Medicine in East Lansing, Michigan; **Prashanti Franklin, MD,** from Saint George’s University in Grenada; **Shannon Kusiak, MD,** from the University of Sint Eustatius in the Netherlands Antilles; **Zinabu Maxwell, MD,** also from the University of Sint Eustatius in the Netherlands Antilles; **Roy Mears, MD,** from Western University of Health Sciences College of Osteopathic Medicine of the Pacific; and **Smitha Suravarum, MD,** Gandhi Medical College in Hyderabad, India.
The program hosted a Centering Pregnancy training workshop for the residents, faculty, and staff involved with obstetric patients. This model of group prenatal care has been researched and found to reduce preterm birth rates and produce heavier low birth weight infants, as well as higher breastfeeding rates. In an academic setting, this model brings an opportunity for residents and faculty to develop skills in facilitative leadership. More information is available at www.mgh.org/family/CenteringPregnancy.html

All 32 providers at our clinic, Family Care Doctors, along with nurses and aides, medical records staff, clerks, and their patients were reorganized into three teams. Each team has two residents from each class and the resident advisors are faculty members of the team. This top-to-bottom reorganization has enhanced continuity for residents and their patients, developed better physician-nurse teamwork, and helped residents feel more at home in their Medical Home.

Transitions & Achievements

Dr. Bill Short received the Robert J. Lachance award from the MSU Family Medicine Residency Network. This award was presented to him at the Fall Network Retreat in Grand Rapids.

Dr. Michelle Storms presented research on Breastfeeding and Maternal Mood at the North American Primary Care Research Group (NAPCRG) in Puerto Rico in November. Dr. Van Howe, Pediatric preceptor, presented research on Infant Reflux and Maternal Mood at NAPCRG at the same conference.

Dr. Brian Waite joined the faculty of the residency program in February 2008 as an Assistant Director. He is a former Marquette resident, having graduated in 1999. In the interim, he practiced in a small family medicine group on Whidbey Island, in the Puget Sound in Washington State. His special interests include EMR/EHR, chronic disease management, billing and coding, and implementing the concepts of TransforMed and the Future of Family Medicine, which focus on the quality of the delivery of health care.

Susan Tincknell, Residency Coordinator, served as a member of the Association of Family Medicine Administrators Task Force to develop a Family Medicine Administrators certification examination through TAGME, the National Board of Certification-Training Administrators of Graduate Medical Education. The mission of TAGME is to establish standards for the profession, to acknowledge the expertise needed to successfully manage GME programs and to recognize those training program administrators who have achieved competence in all fields related to their profession. Susan has successfully completed the requirements for certification with added qualifications in Family Medicine.

New and Graduating Residents

This year’s incoming residents include: Shruthi Edu-nuri, MD, Mamata Medical College; Bo Rowan, DO, Nova Southeastern University College of Osteopathic Medicine; Sadaf Saleem, MD, Rawalpindi Medical College; Geeta Savla, MD, Mahatma Gandhi Mission’s Medical College; Pawneet Pal Singh, Ravindra Nath Tagore Medical College; and Tony Tanious, MD, Saba University.

Academic and Clinical Highlights

The 2007-2008 year began with Residency Review Committee approval of our new Family Medicine Center and a groundbreaking ceremony in September 2007. Construction proceeded well once the ground thawed in the spring 2008, and the building was framed in and ready for a “beam signing” ceremony in the spring. We were able to occupy the building late in 2008.

We are pleased to announce the addition to our McLaren Family Medicine family of Kenny Luong, MD’s son, Andrew, born September 16, 2008. He was recently preceded by into the McLaren family by Dr. Ronald Hunt’s son, Harry, born November 19, 2006, and Erin Foster’s daughter, Jaden, born October 18, 2007.

One setback for the program was that work on implementation of the electronic medical record had to again be delayed for a year due to cost constraints. The EMR will be budgeted into FY 2010 in order to be implemented shortly after the opening of the new Family Medical Center.

A major success this academic year has been the implementation of our new geriatric curriculum. Residents now have an active role in providing clinical care at a combined ECF and subacute rehabilitation facility in the area and make daily rounds under the supervision of our superb geriatrician Barbara Mercer, MD. The addition of a pool of geriatric patients from this practice has also led to the desired increase in the volume of our Family Medicine Inpatient service.

Transitions & Achievements

At the end of the academic year, we sadly accepted the resignation of Mohammed Khader, MD, a clinical faculty member who left to accept a position in United Arab Emirates. We have found a replacement in our current chief resident, Hossam Hafez, MD, who will complete the program in June 2009.

New and Graduating Residents

Again this year family medicine residency program graduates were in great demand. Dr. Shakir was recruited to join an outpatient practice with Halifax Regional, Inc., in Roanoke Rapids, North Carolina. Dr. Chintalapally took a position at the Family Medical Center of Michigan in Carleton, Michigan. Dr. Otuguor is doing urgent care in the Detroit, Michigan area. Dr. Joseph joined a Kaiser practice in San Francisco, California.

New residents joining the program are Andrew Duda, III, MD, American University of the Caribbean; Mehwish Jawaid, MD, Saint George’s University; Nobin Kottukapally, MD, St. Matthews University; Cheryl Mariano-Panggat, MD, St. Luke’s College of Medicine; and Eugene Tan, MD, De La Salle University.

Publications and Research

The 2007-2008 period was also a banner year for scholarship for McLaren. Dr. Lazar’s work with the Greater Flint Health Coalition Depression task force resulted in a two-year planning grant from the National Institutes of Mental Health for a University-Community Research Collaboration grant for which Dr. Lazar is a co-investigator. Dr. Lazar also continued his work as a reviewer for Family Practice Management and for Family Medicine’s “Innovations in Family Medicine Education” series.

Family Physician faculty and dermatology instructor Scott Plensdorf, MD, prepared a manuscript for the American Family Physician on “Common Pigmentation Disorders” which was accepted for publication and will appear in the January 15, 2009 edition.

Ronald Hunt, MD, with Jodi Eckleberry-Hunt PhD, who had presented a paper “An Exploratory Study of Factors Related to Resident Burnout” at the 2007 Annual Psychological Association meeting in August, continued their excellent research into factors affecting resident physician wellness.

Paul Dake, MD's Flint Area Diabetes project was submitted for a grant from the Greater Flint Health Coalition. It was funded in October 2008. This will allow maintenance of a registry to determine if interventions such as a diabetes group visit are valuable in improving outcomes of diabetes care.

Resident physician scholarship resulted in a number of presentations and posters at MSU-Fame research day including “Respiratory Distress after a Dental Procedure,” by Hossam Hafez, MD; Reena Joseph, MD; and Kenny Luong, MD; Metastatic Porocarcinoma: A Case Report, by Anca Voinov, MD; Visalakshi Kunapuli, MD; David Wiese, MD; and Ronald Hunt, MD; “To Eat or Not to Eat: Examining the Relationship of BMI Level to Eating Habits and Self-Image” by Jared Skillings, PhD, and Anthony Reyes, MD. This poster won the Family Medicine Specialty Award and took Second Place for the Best Poster Study Presentation; “Wellens Syndrome: Importance of Diagnosing Critical LAD Stenosis in the Context of Minor EKG Findings,” Visalakshi Kunapuli, MD, and Richard DeNardo, MD; “Carcinoma of Unknown Primary: Targeted Approach to Evaluation and Treatment,” Visalakshi Kunapuli, MD, Trevor Singh, MD, and David Wiese, MD; “Significance of Timely Renal Biopsy in Determining the Cause of Acute Renal Failuire,” Visalakshi Kunapuli, MD, Sundar Ramanathan, MD, and David Wiese, MD; “Mesentric Venous Thrombosis,” by Ali Eskander MBCHB, Hossam Hafez, MD, and Radhika Kakarala, MD. This won Second Place for the Best Case Poster Presentation.

Goals

Goals for academic year 2008-2009 included finishing construction and occupying our new Family Practice Center. If we can successfully achieve this major transition without disrupting patient care or resident education, we will be ready to gear up for EMR implementation.
Academic and Clinical Highlights

The Midland Family Medicine Residency program has been held in very high esteem and its graduates are sought after for their competence and skill in providing the full spectrum of family practice. The program remains stable with regard to its residents, faculty and director. We will work diligently over this next year to complete an internal review process and will welcome a site visit in May 2009.

In the past year we 1) began implementation of the outpatient electronic medical record; 2) implemented an electronic web based resident evaluation system; 3) eliminated the weekday emergency room call in the second year; and 4) updated the duties and responsibilities to reflect other minor changes in administrative or educational matters.

The Family Practice Center remains the focal point for patient care and resident education. The Center is the Medical Home for 16,696 active patients. Office visits for the past year were 34,468. The Family Medicine Service recorded 9,653 patient visits, the nursing home recorded 1,843 patient visits and when added to the Family Practice Center’s 34,468 visits gave the residency a total of 45,964 visits for the fiscal year.

Transitions & Achievements

Dr. Andrew Bone is now the physician director for our EMR implementation. He continues to provide patient care in the Family Practice Center as well as teach practice management and research during Clinical Seminars.

Dr. Eric Becker will graduate from the residency program in August and join the faculty as its newest full-time member. Dr. Becker graduated from the University of Michigan Medical School in 2005. He served as chief resident during his third year and received the STFM excellence in teaching award.

Goals

Our immediate concern and energies are focused on addressing the previously outlined RRC citations. We have begun the process of responding to and resolving each issue with both faculty and resident involvement.

Our future initiatives will involve successful transition to the EMR, ongoing efforts in resident recruitment, assisting the hospital in establishing a predoctoral campus and ultimately working toward a state of the art updated Family Medicine Center.

New and Graduating Residents

The Midland Family Medicine Residency Program achieved a successful recruitment season and has a class of seven first year residents. Team A: Dr. Grace Amazona, University of Hawaii John A. Burns Medical School; Dr. Miguel Balfour, University of Connecticut School of Medicine. Team B: Dr. Dhanashree Joshi, Grant Medical College, India; Dr. Egle Klugiene, Kaunas University, Lithuania; Dr. Matthew Taylor, University of Hawaii John A. Burns Medical School. Team C: Dr. Richard Freier, IL, American University of Antigua College of Medicine, Antigua and Barbuda; and Dr. Amal Othman, University of Cairo, Egypt.

Graduation ceremonies were held on June 27, 2008 at the Midland Country Club. Dr. Jeffrey Eschbach provided the graduation address.

Our graduates and their destinations are: Dr. Vikram Aleti, Chesapeake Hospitalist Group, Elizabeth City, North Carolina; Dr. Rachel Williams, Saginaw Township Family Physicians, Saginaw, Michigan; Dr. Paul Berg, MidMichigan Physicians Group-Family Practice, Midland, Michigan; Dr. Davey Perrin, Private Practice, Ferris, Texas; Dr. Eric Becker, Midland Family Medicine Residency Program, Midland, Michigan; and Dr. Sejal Patel, Kaiser Permanente Medical Group, San Jose, California.

At the graduation ceremonies, Dr. Paul Berg and Dr. Davey Perrin were recognized as the co-Towsley Award recipients for the most outstanding resident performance over the previous year. Dr. Becker received the STFM Teaching Award. Dr. William Dery received the Bowsher Award for teaching excellence by an attending physician.
Publications and Research


Academic and Clinical Highlights

We have had a change in leadership at the Munson Medical Center Family Practice Residency. Daniel M. Webster, MD, has accepted the position as Community Assistant Dean for the new seventh campus of the College of Human Medicine in Traverse City, Michigan. There was a national search for his replacement and it is with great satisfaction that one of the current faculty was found highly qualified to assume the role of Residency Program Director. This is J. William Rawlin, DO, who is a graduate of the program.

Dr. Rawlin attended Michigan State University College of Osteopathic Medicine, graduating in 1996. He did his residency at Munson Medical Center’s Family Practice Residency from 1996 to 1999. He then spent three years in a rural family practice setting before returning to Munson Medical Center’s Family Practice Residency in 2002 as faculty. In addition to the typical duties as a full-time faculty, he took on additional administrative responsibilities including the Primary Care Ambulatory Clerkship Coordinator and the Osteopathic Internship Director.

Munson Medical Center’s Family Practice Residency continues to have the mission of training residents to practice in rural Northern Michigan. Dr. Rawlin’s goal for our residency program is to continue comprehensive training for physicians, including obstetrics and the full realm of inpatient care, to prepare them for potential practice in a rural setting. He hopes to maintain flexibility to meet specific needs of residents as they may arise.

We are currently implementing our electronic medical record, NextGen practice management and medical record. The implementation is occurring after two years of work on the part of faculty, residents and staff, to perform workflow re-design to prepare for the implementation.

New and Graduating Residents

Graduating Residents:

- Sally Chu, MD, is practicing in Georgia.
- Andy Long, DO, is with a practice in Kalkaska.
- Amy Postma, DO, is practicing in the Upper Peninsula.
- Kari Young, DO, is with an established practice in Traverse City.

New Residents:

- Shannon Billau, DO, Michigan State University College of Osteopathic Medicine.
- Renee Fornes, DO, Michigan State University College of Osteopathic Medicine.
- John Nguyen, MD, St. Matthews University.
- Krissondra Wolf, DO, Des Moines University.
- Thomas Yax, MD, Michigan State University College of Human Medicine.

Scholarly Activities

Dr. Daniel Webster submitted with Mindy Smith, MD, an essay “Using Cultures and Climate to Optimize Care” which will be published in early 2009 in the Family Medicine Journal.
Faculty/Staff Transitions and Achievements

Sudha Yenemula, MD, a 2006 graduate of the York, Pennsylvania Family Medicine Residency Program, completed her MSU Faculty Development Fellowship in May 2008. Dr. Yenemula’s fellowship work included a curriculum development project around Obesity and Weight Management.

The residency program also welcomed Shirin Doshi, DO, as a new faculty member. Dr. Doshi, a 2004 graduate of the Sparrow/MSU Program, has advanced training in obstetrics, and is highly involved in the osteopathic side of the residency program.

Karen Kent, MD, has assumed the role of credentialing chair for the Sparrow Health System.

New and Graduating Residents

In June, the combined program graduated its ninth resident class. David Mello, DO, has a faculty appointment at Boston University. Geetha Chilakamarri, MD, took a geriatrics fellowship at George Washington University. Stanley Forfa, DO, is a staff physician at Olin Health Center, MSU. Aaron Fraser, DO, has an Air Force commitment in Washington State. Keerthy Krishnamanni, MD, will practice in Berlin, New Hampshire. Lisa Ludwig, MD, will practice in Lansing. Jill Miedema, MD, will practice in Minneapolis. Nick Minnaar, MD, will practice in Okemos, Michigan. Mina Tadros, MD will practice in Mississauga, Ontario.

The program enjoyed a successful 2008 match. Joining the program are: Laurie Gulick, DO, MSU-COM; Olivia Kamayangi, MD, Univ. of Bolgna, Italy; Marissa Miller, DO, Midwestern University, Chicago COM; Jibran Naseer, MD, Shifa College of Medicine, Pakistan; Kristina Sturgill, DO, MSU-COM; Ravinder Singh, MD, Gov. Medical College, Amritsar, India; George Varughese, MD, Gulf Medical College, Ajman, UAE; and John Steen, DO, MSU-COM. Jennifer Elizondo, MD, Wake Forest School of Medicine, joins us, in transfer from the Sparrow/MSU OB/GYN Program.

Our associated MSU Sports Medicine Fellowship accepted two fellows for 2008-2009. They are Matt Boyd, MD, 2008 Grand Rapids FMRP graduate, and Anne Garrison, DO, 2008 Medical College of Wisconsin FMRP graduate. Likewise, the MSU Geriatric Fellowship accepted one fellow, James Mayle, MD, community GI attending, who switched into geriatrics after 20 years of practicing GI medicine in Lansing!

Scholarly Activities

Residents and faculty continue to be active in research and scholarly activity. Drs. Jim Olson, Karen Kent, Karen Blackman, Robert Darios, Amy Odom, Cheryl Doane, and Ken Thompson; and Amy Romain, MSW, made presentations to national audiences at STFM National, Behavioral Medicine Forum, Family in Family Medicine, and AODME National. The program continues its participation in the National Board Review Course. A senior scholarly project continues to be a program requirement for each resident.

Goals

With the able leadership of Shirin Doshi, DO, the program received AOA accreditation in 2008. The blended AOA/ACGME curriculum designed by Drs. Doshi and Robert Darios begin in July 2009.

Implementation of an EMR is still in the planning stages. Sparrow Health System has already chosen a vendor capable of providing an enterprise-wide solution that can provide all of the System’s future electronic record-keeping, billing, and data-tracking needs. Installation of the complete package is scheduled to occur no later than December 31, 2010. It is hoped that the ambulatory EMR component can be rolled out much sooner, with the FM Residency Program taking a lead role in its implementation.

Strategies for implementing features of the Future of Family Medicine Project are ongoing, concentrating primarily on the “basket of services” and how to better provide chronic disease management and access for our patients. A chronic disease management model for obesity patients has been implemented. Other initiatives include improving access to office services, expanding the use of chronic disease registries, implementing e-prescribing, and converting one-on-one nursing to team nursing.

An alumni reunion took place in summer 2008. Over 50 graduates participated, exchanging old memories and “war stories.” An excellent time was had by all!
Academic and Clinical Highlights

Changes in faculty staffing in 2008 provided both challenges and successes. William Morrone, DO, joined the faculty in May 2008 as an assistant director. He brings with him both five years of clinical experience as well as expertise in pain management and substance abuse. His role in the department is also in Hospice and Palliative care, where he serves as the medical director for Hospice of Michigan, Saginaw.

Maria Klahre, MD, also began her tenure as faculty on July 1, 2008. She comes to medical education after 12 years in clinical practice. She is an assistant director and is very interested in women’s health and obstetrics. She has taken the ALSO instructor course and is eager to continue teaching obstetrics to the residents.

Finally, Wendy Yang, MD, assistant director left the residency in August 2008 to return home to California. She joined the Davis Medical Group seeing patients in private practice, after four years as faculty. She will be greatly missed.

In addition, Dr. Deborah Bonitz, Director of Behavioral Sciences, continued to expand her observation and critique of the residents in the doctor patient interactions to include Synergy Medical Education Alliances departments of Obstetrics and Internal Medicine, as well as continued work with the Family Medicine residents. Under her observations and evaluations, patient satisfaction scores with regard to the patient-physician interaction have improved steadily with the department exceeding the national average for the database to which our corporation is compared. She as added video review as well as comparing real time observation to the precepting and charting that occurs on each patient observed. In this manner, she has been able to coach residents on communication skills, as well as have faculty have a much better assessment of clinical skill, examination techniques and overall medical knowledge.

Dr. Edward Jackson, was promoted to full Professor of Family Medicine, being recognized at the annual network retreat in Grand Rapids. He was then appointed to the Promotions and Tenure Committee for the Department of Family Medicine for the next 3 years. In October, Dr. Jackson was among the first group of physicians to take the CAQ exam in Hospice and Palliative Care. In February 2009, he was notified that he successfully passed the exam and was awarded the CAQ in Hospice and Palliative care. There are 1255 certified physicians with this CAQ.

Statistics: Patient Visits: Total: 11,630 (9,878 Residents/ 1,752 Faculty Procedures: 435)

New and Graduating Residents

Graduating seniors and their destinations: Gwen Brandt, MD, Geriatrics Fellowship, MSU; Natalia DiPaola, MD, Locum Tenens work; Sreram Gongalagadda, MD, Synergy Medical Education Alliance, Family Medicine faculty; Sameer Huraibi, MD, Private Practice, Detroit; and Sheeja Mathai, MD, Private Practice, Boston.

Match day showed us a 100 percent fill rate with our top rated candidates. New residents are Marvin Alviso, MD, University of Santo Thomas, Philippines; Adnan (Tony) Malik, MD, Rawalpindi Med College, Pakistan; Shraddha (Sara) Patel, MD, M.S. Univ of Baroda Med College, India; Anupender Sidhu, MD, Indira Gandhi Med College, Nagpur, India; Gregory Spagnuolo, MD, AUC, Netherlands, Antilles.

Publications and Scholarly Activities

Edward Jackson, MD, continues as a senior editor for the Procedures section for PEPID and has edited several sections on wart treatment as well as carpal tunnel injections.

Edward Jackson has written the chapter on Carpal Tunnel Injections for Atlas of Primary Care Procedures, 2nd ed, EJ Mayeaux MD, editor, (in print).

Edward Jackson has served as a reviewer for the Journal of Family Practice.

Presentations:

Deborah Bonitz. Discussing termination and transfer of care issues in primary care residency, Family Medicine Forum for Behavioral Sciences Chicago, IL

William Morrone. Laws and Controlled Substances, Palliative Care Conference, Dearborn, Michigan.

William Morrone. Chronic Pain: Opiate Use and Guidelines, MOA Fall CME Update.
Edward Jackson:

Chronic Pain: PAEP Midwinter CME, Bedford, PA, March 2008
Cardiology, GI, Derm, Rheumatology and Allergy and Asthma, MSU Board Review Course (6 hours), Baltimore, MD, May 2008, Dallas TX, May 2008, Las Vegas June 2008
Skin Diseases: Advanced Skin Surgery, Diabetic Foot Care, Pearls in Acne Care, Tattoos and Piercings, Diabetic Skin Manifestations, Alopecia, Infestations and bites, Inclusion Cyst Removal Techniques, AAFP Skin Diseases Course Lake Las Vegas, NV, June 2008
Nail Procedures Workshop, AAFP National Resident and Student Meeting, Kansas City MO, July 2008
Basic and Advanced Skin Surgery (4 hours each), AAFP Annual Scientific Assembly, San Diego, CA, September 2008
Insomnia (Doctors Dialog Session) AAFP Annual Scientific Assembly, San Diego, CA, September 2008.
Affiliated Programs

Family Care Research Program
http://www.healthteam.msu.edu/fcrp

The Family Care Research Program (FCRP) is a collaborative, interdisciplinary effort by faculty from the MSU colleges of Nursing and Human Medicine, the Department of Family Medicine, and the Institute for Health Care Studies. The primary foci of the FCRP projects are 1) to gain increased knowledge about how patients and families face the burden of providing care in a transforming health care system, 2) to better understand how families learn to care, and 3) to disseminate this knowledge and influence health care reform and policy. Contact the staff at B427 West Fee Hall, MSU, East Lansing, MI 48824. Office: 517-353-0306.

Family Physicians Inquiries Network/PEPID
www.fpin.org

The Department of Family Medicine is a member of the Family Physicians Inquiries Network (FPIN) a national, not-for-profit consortium of academic family physicians, family medicine residency programs and departments, medical librarians, informaticians, computer scientists, and other primary care providers and consultants dedicated to using information technology to improve healthcare. FPIN represents an outstanding resource for family medicine education programs by helping programs fulfill the ACGME competency requirements, by creating opportunities for residents and faculty to participate in scholarly activity through writing and reviewing of Clinical Inquiries for the Journal of Family Practice and the American Family Physician. Leading family medicine clinician teachers from FPIN member departments (including MSU Department of Family Medicine) and residency programs serve as senior editors for FPIN. For information, contact Vince WinklerPrins, MD, at vince.winklerprins@hc.msu.edu.

Geriatric Education Center
http://gecm.msu.edu/

Established in 1987, the Geriatric Education Center of Michigan (GECM) has been a federally funded, statewide consortium administratively located at Michigan State University (MSU) that includes: MSU College of Human Medicine and College of Osteopathic Medicine, Wayne State University Institute of Gerontology, Central Michigan University, Alma College, and the Michigan Primary Care Association. The GECM works collaboratively with other organizations and agencies within the state. Contact Geriatric Education Center of Michigan, B-215 West Fee Hall, MSU, East Lansing, Michigan 48824-1316. Office: 517-353-7828, jan.yonker@hc.msu.edu.

Great Lakes Research Into Practice Network
http://sitemaker.umich.edu/grin

GRIN is a statewide primary care research network of office practices in family medicine, internal medicine, pediatrics, obstetrics and gynecology, and independent-practice nursing. Its goal is to assist primary care researchers to conduct studies in primary care settings. This, in turn, will help practitioners apply research findings that are reflective of the complexities of primary care practice. GRIN is overseen by a board representing community physicians, academic departments, and patients. The co-directors of GRIN are Lee
Japanese Scholars Program
http://chmfamilymedicine.msu.edu/department/japanesescholars.htm

The Department of Family Medicine created the Methods in Family Medicine Education Training Program to support development of primary care and family medicine in Japan. The program accepts 1-2 trainees at a time. Trainees spend from three to 12 months in the program. This is a program of self-study, with participant observation and guided assistance by the faculty coordinator and staff. The program provides opportunities to meet department faculty on an individual basis and learn of their involvement in the medical school curriculum. Trainees also observe the primary care medical curriculum on both the undergraduate and the residency level.

Dr. Fumio Shaku was the scholar in the Methods of Family Medicine Education Training Program from April 2008 to March 2009, with an appointment as Visiting Assistant Professor in the Department of Family Medicine. Dr. Shaku received his medical degree from Asahikawa Medical College in 1991 and graduated from Tokyo Medical and Dental Graduate School with a PhD in 2005. He trained in psychosomatic and general internal medicine. He visited and observed the post-traumatic stress disorder program in the San Francisco Veterans Administration Medical Center in 2006 for three months. Dr. Shaku recently served as an attending physician at the Department of General Medicine at Nagoya University Hospital.

He is particularly interested in learning effective research methods in family medicine. Dr. Shaku would like to study the quality of life, life stresses and stress coping mechanisms among nurses in Japan and Japanese people who live in United States. He learned how family medicine is practiced in the United States, including aspects of stress and terminal care.

Dr. Chisato Tamaki joined the Department of Family Medicine with an appointment of Visiting Assistant Professor from October 2007 to March 2008 as a scholar in the Methods in Family Medicine Training Program. Dr. Tamaki received his medical degree from Shiga University of Medical Science in 2001 and served as an attending physician at the Kyoto Kyoritu Hospital. He is trained in internal medicine.

Dr. Tamaki is particularly interested in learning effective methods to train residents in family medicine. He has an interest in clinical research in family medicine. He explored how family medicine is practiced in the United States, including aspects of geriatric care and home visits. He learned about the ethics courses offered to medical students.

For information about the program, contact Rebecca Malouin, PhD, at rebecca.malouin@hc.msu.edu.

National Family Medicine Board Review Course
http://ccme.org

The National Family Medicine Board Review course is a four-day, 39-hour total immersion "boot-camp" in the factual database of family medicine. At the conclusion, participants, through repetition, have learned the key information needed to pass family medicine certification and recertification examinations. Faculty are regularly provided from the MSU Family Medicine Residency Network. For course information, contact The Center for Medical Education, Inc., P.O. Box 600, Creamery, PA 19430; support@ccme.org; or (800) 458-4779.
The Preventive Medicine and Public Health Division (PMPHD) was initiated in 2008 and will undertake efforts to create new linkages among local health department medical directors, Michigan State University, and the Michigan Department of Community Health to improve the delivery of public health services. The PMPHD will seek to work collaboratively with other public health and preventive medicine programs in Michigan, including those at the University of Michigan and Wayne State University, to complement current efforts and support medical direction for local public health departments. The PMPHD will also work closely with MSU community teaching sites and other MSU community resources to identify opportunities for program and research collaboration that will strengthen public health medical direction in Michigan’s communities.

**First Year Achievements**

1) Through March 6, 2009, in-person visits have been made with 15 Medical Directors, covering 21 local health departments. The purpose of these visits has been to hold discussions with Medical Directors, Health Officers, and other department staff to identify opportunities to partner with MSU and to plan public health education opportunities for health professional students.

2) Through March 6, 2009, seven of the 23 Medical Directors without a current clinical faculty appointment with MSU have completed their application for appointment.

3) PMPHD staff has assumed responsibility for the MAPPP listserv and is working with a MAPPP member to redesign the group’s website.

4) Participation among Medical Directors, both during monthly conference calls and through the listserv, has increased. Medical Directors are using both tools to share information about important public health concerns and to solve problems. Issues discussed since October include: managing a pertussis outbreak (including the costs of vaccinations); development of a pandemic flu triage plan; school-based influenza immunization clinics; role of the local health department in school closures for outbreaks; and policies around vaccination of new mothers while still in the hospital.

**2009 Objectives**

1) Support enhanced networking of local health department medical directors through regular meetings and sharing of resources, promoting learning and problem solving.

2) Link local health department medical directors with the MSU community campuses and teaching hospitals of the Colleges of Human Medicine, Osteopathic Medicine, and Nursing.

3) Provide opportunities for professional development, training, and continuing education for Michigan physicians working in public health.

4) Promote learning experiences and scholarly projects in public health for health professionals in training.

5) Identify and secure additional financial support for the division

For more information about the Division, contact Molly Polverento, MS, PMPHD Coordinator at molly.polverento@hc.msu.edu or at 517-884-0434.
The Michigan State University Geriatric Collaborative

The Geriatric Collaborative at Michigan State University supports and builds upon a statewide university-community partnership through three important existing programs

The Geriatric Education Center of Michigan

This is a consortium of the Veterans Administration, the Michigan Public Health Institute (the research and evaluation arm of the Michigan Department of Community Health), the University of Michigan School of Dentistry, Wayne State University Institute of Aging, and Grand Valley University working together with the MSU Colleges of Human and Osteopathic Medicine, College of Social Science, and the College Communication Arts. This center delivers geriatric education programs to undergraduate, graduate medical, nursing, and social work students and to health and service professionals working in communities across Michigan. This is one of the longest standing Geriatric Education Centers in the nation. A more complete description of the Geriatric Education Center may be found on their website, http://gecm.msu.edu.

A Network Based Geriatric Fellowship Program

During the past year the Department of Family Medicine was awarded a multi-year grant to establish geriatric fellowship training in community based Family Medicine Residency programs affiliated with the Michigan State Department of Family Medicine. When fully implemented this program will train 15 geriatric fellows per year who will have ties to these communities and who can serve the needs of the older populations in Michigan. This program is unique in that recruitment, training and service are at the community level but guided by clinical and research curricula that emanate from diverse and rich educational and research resources at Michigan State. Each of the positions for which we are recruiting will be fully engaged in the development and implementation of this program. For faculty interested in education and clinical geriatric care this program offers significant opportunities for testing models of training and clinical care. Research faculty will benefit from access to large diverse elderly populations and clinical professionals who can collaborate in multi-disciplinary programs of research.

Training in Reduction of Medication Errors

Most recently the Department of Family Medicine has received a grant to train undergraduate and graduate physicians in detecting and preventing medication errors. Considering the prevalence of poly-pharmacy among the elderly, this program will serve as a foundation for geriatric education and training programs in each community.

The vision of the geriatric collaborative is to deliver high quality geriatric education and world class research within a framework that services the citizens of Michigan. To support this vision the educational and research programs have for their work an established network of community based education programs. The established links between Michigan State Family Medicine, the larger university and these community programs offer new faculty opportunities to bring skills in education and research to extending science and to the serve communities. Training in the reduction of medication errors will be a key feature of this work.

The Geriatric Collaborative and Geriatric and Gerontology Research at Michigan State University

Michigan State and the Geriatric Collaborative encourage and support multi-disciplinary research that engages basic, clinical, and behavioral scientists that collaborate on addressing a variety of important research questions. New additions to the basic science and nursing faculty are seeking to understand the genetic basis for accelerated declines in cognitive and physical function among patients with Alzheimer’s disease. Clinical and behavioral scientists are working with selected Veteran’s Affairs hospitals to improve aspects of transition and outpatient care for older veterans. Clinicians, behavioral scientists and medical students participate in summer research experiences focusing on palliative and end of life care. Currently, faculty in the College of Communication Arts are implementing research testing the introduction of novel Tele-health technologies to better monitor and manage elderly patients in their home and to link information with their primary care practices. Funding from the National Cancer Institute has allowed researchers from the College
of Nursing and Family Medicine to conduct trials of symptom management interventions for older cancer patients undergoing chemotherapy. Geriatric fellows engage in applied research as part of their training. As part of the expansion of the College of Human Medicine to Grand Rapids a new state-of-the-art geriatric simulation center is under development. This center will serve both education and research.

Faculty from the colleges of Nursing and Medicine work with faculty in the college of Engineering to implement distance technologies, robotics and to develop new materials to address a broad range of topics in the areas of geriatrics and long term care. Other faculty in engineering are working with faculty from radiology to conduct magnetic resonance imaging to identify and assess new treatments for muscle injury and atrophy. Currently the university is engaged in a search for a nationally recognized faculty member to lead the newly created Institute for Engineering and Health.

Faculty in the department of Neurology and Ophthalmology in the College of Osteopathic Medicine are conducting longitudinal studies of neurovisual disorders, and the efficacy of novel treatments for optic nerve lesions. In addition, faculty are engaged in Parkinson’s and Alzheimer’s Disease research and in industry and NIH sponsored phase II and III drug trials for Parkinson’s disease and neurodegenerative disorders.

Faculty from the College of Human Ecology are conducting studies of elder abuse in nursing homes and the use of the internet by elders.

Finally, through the Institute for Health Care Studies http://www.ihcs.msu.edu/ the Geriatric Collaborative has access to the Statewide Medicaid Data Warehouse. Currently demographers, health economists, sociologists and geriatricians are collaborating on studies focusing on the patterns of care and use of services for the medically indigent elderly population of Michigan.

Michigan State, though its Geriatric Collaborative, and community campuses of the medical schools are developing and implementing training programs and research themes that emphasize collaboration and transformative research extending from the laboratory to the beside and clinic and into communities and homes. This training and research is focused on defining and solving problems related to our aging society.
Conferences and Events

Family Medicine Research Day XXXI
The Genoa Woods Conference Center, Brighton, Michigan
Thursday May 22, 2008

Keynote Presentation

This year’s keynote presentation was Joseph J. Gallo, MD, MPH, Associate Professor, Department of Family & Community Medicine, the University of Pennsylvania. The title of the plenary is “Many Ways to Answer Questions—Mixed Methods Approach.” Dr. Gallo, a family physician who began in rural practice, is a distinguished scholar who has studied depression and common problems in the elderly. He has used multiple methodologies to pursue his research. Finally, he has a particular love for mentoring young researchers.

Winning Presentations

Student Award: Linda Murray, BS, MSU, CHM, East Lansing, MI, “Choosing Hormone Replacement Therapy: Factors Influencing Women’s Decisions”

Resident Award Category 1 – Health Services/Educational Focus: James Lim, MD, UofM Family Medicine Residency, Ann Arbor, MI, “Factor Analysis of the Evaluation Form of Medical Students at the University of Michigan”

Resident Award Category 2 – Clinical Focus: Stanley A. Forfa, DO, Sparrow/MSU Family Medicine Residency, East Lansing, MI, “Depression, Anxiety and Health Behaviors: What is the Real Scope of the Problem in Primary Care?”

Resident Award Category 3 – Non-Clinical, General: Susan Bettcher, MD, UofM, Family Medicine Residency, Ann Arbor, MI, “The Impact of Clinical Prompts on Prenatal Care”

Resident Award Category 4 – Clinical, Chart Review/Intervention: George Maristela, MD, St. John Family Medicine Residency, Detroit, MI, “Assessment of Severity of Sports Related Grade-1 Concussion Injuries and its Impact on Return to Play”

Faculty Award: John H. Porcerelli, PhD, Wayne State University, Detroit, MI, “Adult and Childhood Victimization of Low-Income Urban Women: Prevalence, Incidence, and Psychopathology”

Practitioner Award: Laurie Fitzpatrick, BS, MSU COM, Department of Family Medicine, East Lansing, MI, “Smoking and Depression: Assisting Primary Care Patients Using a Mood Management Approach to Quitting Smoking—A Pilot Study”

Poster Award – Case Report: Raza Haque MD, MSU, CHM, Department of Family Medicine, MI, “Beta-Blockers and their Role in Non-Healing Pressure Ulcers seen in Long Term Care Facilities”

Poster Award – Case Report: Dora Djuric, PhD, University of Michigan, Ann Arbor MI, “Formulation of Implementation Interventions for Improving Fruit and Vegetable Intakes”

Abstracts for the winning presentations can be found at chmfamilymedicine.msu.edu/research/research-day2008.htm. For additional information, contact: Deb Richardson, Conference Assistant at (517) 884-0400, or deb.richardson@hc.msu.edu.
About the Foglio Conference

The Foglio Conference on Spirituality and Medicine was established in honor of Father John P. Foglio, DMin, a faculty member in the Department of Family Medicine since 1986. The Rev. Dr. Foglio has woven into his career with the MSU Department of Family Medicine a commitment to social justice, a compassionate and intense concern for the personal and spiritual well-being of students and colleagues, and a scholarly background in both theology and communication sciences. In 1993 he developed “Spirituality and Medicine,” a required Humanities-Block Course for Year II medical students in the MSU College of Human Medicine. This conference institutionalizes the educational initiatives begun by Father Foglio. The conferences are sponsored by the Michigan State University Department of Family Medicine and the Center for Ethics and Humanities.

This year’s conference on October 8, 2008, featured video-recorded interview with child psychiatrist, Pulitzer-prize winning author, and Harvard professor Robert Coles, MD. He is author of more than 50 books, including The Spiritual Life of Children, The Moral Life of Children, and the Children of Crisis series.

Robert Coles, MD, is a child psychiatrist and professor emeritus of psychiatry and medical humanities at Harvard University. He was the James Agee Professor of Social Ethics at the Graduate School of Education until his retirement in 2002, and was the winner of the Pulitzer Prize for his five-volume “Children of Crisis” series. Author of over 80 books, Coles is perhaps best known for his life’s work on the political, moral, and spiritual life of children, as well as his books on the moral dimensions of teaching, service, documentary work, and medical education and practice. He is recipient of a MacArthur Foundation Fellowship and the Medal of Freedom, the nation’s highest civilian honor.

While Dr. Coles was not able to accept our invitation to appear in person as our keynote speaker for this year’s Foglio Conference on Spirituality and Medicine, he graciously agreed to appear via a pre-recorded live interview in which he discusses his life’s work and the moral significance of appreciating the experience and inner lives of children.

The Foglio Conference also featured:

- a presentation on Spiritual and Religious Coping in Children with Chronic Illness by Sara Pendleton, MD, Primary Care Pediatrician, Researcher, and Assistant Professor of Pediatrics, at Wayne State University School of Medicine and Children’s Hospital of Michigan
- an interdisciplinary panel: Caring for the Emotional/Spiritual Needs of Children and their Families During Illness. Panelists: Jed Magen, DO, MS; Jeanne Lewandowski, MD; Gwen Kapcia, MSW; Julie Nielsen-Schmidt, MA, DMin; Conda Kitley, RN
- Break-out Sessions:
  - Assessing the Spiritual Lives of Pediatric Patients and their Families – Ryan S. Swieringa MDiv, BCC & Julie A. Nielsen MA, DMin
  - Healing Through Poetry – David Kozishek, MA, BCC & Karen Ogle, MD
  - What About Me? Well Children Need Support Too. – Megan Spedoske, LMSW
  - Caregiver Grief: A Spiritual, Emotional and Physical Challenge – Susan K. Zimmerman, MS, President, INTEGRA
  - What Kids Really Want to Know – Judith E. Brady, PhD
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George F. Smith, MD, Sparrow/MSU Residency Director, ex-officio member
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Jodi Holtrop, PhD, CHES, Elected Faculty Representative
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Charles W. Given, PhD
Dorothy Pathak, PhD

**Tenure Stream Positions**
Jodi Holtrop, PhD, CHES

**Annual Renewable Positions**
Carlos Rios-Bedoya, ScD, MPH

**HHP Positions**
Vince WinklerPrins, MD

**Affiliated Faculty Residency Position**
George F. Smith, MD, Sparrow/MSU Family Medicine
John E. vanSchagen, MD, Grand Rapids Family Medicine
Kenneth E. Yokosawa, MD, Genesys Family Practice

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East Lansing Campus Faculty

Cathy Abbott, MD, assistant professor
Elizabeth Alexander, MD, MS, professor
Hend Azhary, MD, assistant professor
Henry C. Barry, MD, MS, associate professor, associate chair for research
Karen Blackman, MD, assistant professor
Robin DeMuth, MD, assistant professor
Roy J. Gerard, MD, founding chair & professor
Charles W. Given, PhD, professor
Raza Haque, MD, assistant professor
Jodi Summers Holtrop, PhD, CHES, associate professor, director of MSU Affiliated Family Medicine Residency Program Network
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* Members of Network Executive Committee, 2007-08

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David Walsworth, MD (2nd term May 1, 2007)

Committee on Research
Henry Barry, MD, MS (August 16, 2007)

Continuing Medical Education Committee
Mohan Reddy, MD (August 16, 2007)

Graduate Studies Committee
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Charles W. Given, PhD (August 16, 2007)

University Appeals Board
Charles W. Given, PhD

University Hearing Board
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