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Digest of the Philadelphia College of Osteopathic Medicine (Winter 1987)

Philadelphia College of Osteopathic Medicine

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New patterns of practice in rural medicine
In one of
Robert Frost's poems,
two hired hands converse
while boeing:
"... and as they
looked up, the Doctor
With one foot
on the dashboard
of his buggy
Was still in sight
like someone
to depend on."
Frost's rural physician,
who gave time to talk
with the family
after making
a house call, will never
be eclipsed by urbanization
so long as people
still choose
to live on the land.
This issue of Digest
salutes those physicians
who serve the heartland,
and also celebrates
the commitment
of this college
to enduring excellence
in rural medicine.
There will be
"someone to depend on,"
indeed.
The Digest of Philadelphia College of Osteopathic Medicine

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In the tiny Pennsylvania town of Laporte, 50 miles due east of Scranton and 44 miles south of the New York State border is a medical facility unique among osteopathic teaching institutions. It is the most remote of OMCP’s four health care centers.

PCOM students who are training in family practice are rotated here for 8 to 12 weeks in their fourth year. Since 1970, when the facility was opened in what was once a local inn (it is now housed in a modern brick structure specially designed for its dual purposes of treating and teaching), more than 1,000 students have made the trip to what is officially the Sullivan County Medical Center, known more familiarly to PCOM seniors and graduates as “Laporte.”

Until they get to their rotation at Laporte, most of the hands-on work of students has been done under the continuous direction and supervision of attending physicians. At Laporte many get their first chance to act with supervision upon their own medical decisions. Training wheels, although not removed entirely, are loosened. The effect has been to speed the learning process.

That phenomenon—the acceleration of learning by a student when he or she is given decision-making responsibility—is mentioned often by students and alumni who have shared the Laporte experience. Fourth year student Tom Dagney, who was rotated north earlier this year, says he gained some new insights and assurance by covering the Laporte emergency room in the clinic’s off-hours without an attending physician in the building—and then having to transmit impressions over the phone.

Dagney relates his feelings about being faced with the victim of a car crash. “He had some serious lacerations,” Dagney recalls, “but none I couldn’t deal with. The attending physician arrived within minutes and we worked together. It felt good to be carrying more responsibility. I learn so much faster at those times than when I am simply listening to someone explain why they are doing what they are doing. He continues, “At Laporte we get to visit the homes of people who can’t get to the clinic. I traveled several times a week to give injections to a woman with multiple sclerosis. Providing our services in a patient’s home isn’t often done in our system of medical care. It is unusual in any event, and almost never experienced by a student in training.”

From 25 to 40 patients visit the Center during a typical day, supplying its six to eight resident students with ample opportunity to practice the skills they have acquired during their years at PCOM and on previous rotations. The routine at Laporte requires that most patients are seen first by a student, then by the physician to whom the student reports. The practice of giving a student the first look at a patient before he is seen by one of the three staff physicians is followed continuously during a student’s stay there, whether inside the Center or on a visit to one of several nursing homes or domiciliary care centers in the area.

Every week two students accompany staff physician Deborah Spatz, DO, on a house call or to a nursing care facility. Across the street from the Center and about 500 yards down the road is the United Methodist Nursing Home. Farther north, in Wyoming County, is the state’s Darway Nursing Home. Visits to these, and to various domiciliary care facilities in the neighborhood supply students with a rich variety of medical encounters.
See one, do one, teach one. Above, Top: Student Dave Lezinsky watches Debbie Spatz, DO, attending physician at Laporte, destroy a wart with liquid nitrogen. Center: Lezinsky tries his hand, as does Ken Veit, DO, HCC administrator.
Every student gets a lesson in suturing the skin of a pig's knuckle. Above, Street tells Molasky that holding a scissors in the manner learned from her mother won't do, that different fingers must be used. "Put the long finger next to the ring finger," he explains. "That, with the thumb, gives you power. The index finger placed near the tip of the instrument provides dexterity."

Spatz serves as both chauffeur and lecturer on her weekly trips. Today she is accompanied by students Janis Fegley and Robin Molasky, who listen to Spatz talk about techniques for identifying heart sounds.

The 20-mile ride from LaPorte to Estella takes the team through part of the Wyoming County recreation area, which contains some of Pennsylvania’s prettiest countryside. Traversing the narrow two-lane road through the pine forest affords occasional glimpses of falling streams and the river that cuts through the Allegheny Mountains. The area is lightly populated and there is little industrial development. More important to the economy of the region is its use for recreation. Hunting and fishing are popular here. The nearby resort town of Eaglesmere was founded by visitors fleeing the summertime discomforts of Philadelphia and New York.

When Spatz and her students arrive at the nursing home they follow a familiar routine: First, a briefing by Spatz. Then an examination of the patient by the student, who reports back to Spatz. Last, a discussion of the findings, the diagnosis and agreement on the proposed treatment.

Of her visits to the Darway Home, Fegley says: "Everything I heard when listening to hearts there, I had heard before. But there was a difference. Patients in nursing homes often have severe heart problems and their heart sounds and murmurs are more pronounced. I learn a lot in nursing homes. I have heard heart sounds there that I rarely hear in hospitals or offices."

Fegley has also learned about the need to take control of a situation and establish her authority. "When someone comes into the emergency room at 3 a.m., even when help is on the way, you're 'it,'" she says. "You can't stand back and let someone else take over, which is what happens in hospitals. We students get to do work in hospitals, but we don't make the decisions to do them. That's one of the great things about our situation in Laporte—we get to stand on our own two feet and we learn quickly."

But the learning at Laporte isn't always in one direction. Attending osteopathic physicians Spatz, Henry Street and
The Sullivan County Medical Center, at Laporte, with its staff and students during January 1987.
Tom Eslinger lecture regularly and have to remain prepared to respond to probing questions from their inquisitive audiences—giving credence to the adage that to learn, one should teach. Each acknowledges that Laporte's remote location keeps them out of the mainstream of continuing education, and credits students with bringing in new information from sub-specialists with whom they have served prior rotations. "It's not unusual," says Spatz, to have a student suggest a new drug he has seen used with good results elsewhere. And when we have a case in which it is appropriate to do so, we will use it and observe the results together."

By the time the winter workday at Laporte is over, it's dark and it stays that way. Unless there is a clear sky and a bit of moonlight, you have to find your way carefully across the unlighted road that separates the Center from Blasi's cafe. No street lights are there to guide you. Only the lighted windows of the Medical Center and a dimly burning neon sign in Blasi's window provide reference points.

Blasi's cafe has been in business since 1933. Permeated by an odor of spilled beer and ancient sawdust, it is the nearest source of relaxation for PCOM students. Blasi's principal attractions, besides its nearness, are mugs of beer and games of shuffleboard, where coordination of eye and hand can be tested and skills at evaluating tactical judgments refined.

Since the Medical Center opened in 1979, over 2,000 PCOM students and visitors have crossed the narrow road that divides Blasi's from the Medical Center. Most of the students have written their names on sheets of paper, one for each class, that are tacked to Blasi's wall. Some are already yellowing with age, but the signatures of most of the nascent DOs who have passed that way remain recognizable. One of the names is that of Ted Shively, DO, PCOM '78, who, after his experience at Laporte, decided to remain in rural Pennsylvania and now has a practice located in a village with only one fifth of Laporte's population of 259. His story begins on page 8. ☠
The Village of Cassville, in central Pennsylvania’s Huntingdon County, nestles between two appendages of the northern Allegheny mountains. It is a community of 80 persons, three churches, one community center, one automobile agency, one food market, and one physician. He is Ted Shively, DO, PCOM ’78, and the founder of Cassville’s Trough Creek Family Practice.

Even a casual observation of Shively and his clinic at work is enough to dispel any notion that his practice, because it is in a remote rural area, may in any way linger behind the state of the art of family medicine.

Shively opened his clinic in March, 1982, on 1½ acres of land purchased from his neighbor for $5,000. The building cost $120,000 and required a year and a half to construct. It contains equipment valued at $40,000, some of it supplied by local community organizations.

Shively is a native of Harrisburg, Pa. He interned at Detroit Osteopathic Hospital, and there is nothing in his background to orient him toward a preference for a bucolic existence. Nor is there anything in the experience of his wife, Joanne, to predispose her toward making a home among Pennsylvania’s mountains. Shively came to a decision to try his hand at building a rural practice through his exposure to the area as a staff member of the Broadtop Medical Center, at Orbisonia, Pennsylvania.

Shively had received financial assistance from the National Health Service Corps during his final two years at PCOM and was required to serve there for two years. By the time he left Broadtop he had made his decision to stay. First he shared office space with an older physician,
longer established and widely respected, in Saltillo, about 10 miles from Cassville, while his new offices were being built. He opened his office 18 months later in March, 1982.

On a typical day Shively reports for 6 a.m. rounds at the J.C. Blair Memorial Hospital, in Huntingdon, about 20 miles distant, where he has been a staff member since 1981. He finishes there in time to drive back to his office for its 8 a.m. opening.

In operating his clinic Shively makes few departures from what would be standard practice in any city. One room serves as an ER, with oversize doors opening upon a driveway that can accommodate an ambulance or pickup truck. And because the nearest pharmacy is 20 miles away in Huntingdon, he keeps on hand an expanded supply of antibiotics, antihistamines and medicines for treating routine complaints.

Shively finds his work days fairly predictable except during the few weeks in which Pennsylvania permits deer to be hunted. Then his appointment schedule carries no names of middle-aged males.

Shively employs a full-time staff of two—an office manager and a nurse—who are aided by a part-time office worker reporting three days a week. On a typical day Shively sees from 20 to 40 patients at a basic $17 fee that is scaled to the local economy.

During the average day, Shively's 30 patients challenge his skills in almost every area from pediatrics to geriatrics. The mother of a tearful infant is reassured that the source of the child's discomfort is nothing more than a pair of erupting teeth. An eight-year-old is diagnosed as diabetic and plans are made to monitor her treatment for an indefinite period.

The source of an 11-year-old boy's mandibular pain is...
identified as dental. He gets a prescription for a complimentary ice cream cone, to be filled at the local market where Shively has an account. A teenage boy applying for a driver's license needs a physical examination. The next patient is a woman of 52 with a sinus infection. Shively's oldest patient of the day, a local matriarch of 86, is there to have her eyesight checked.

Shively's techniques for building his practice include demonstrating to his patients, whenever it is practicable, that they have received value. A mother who has brought in a child complaining of an earache, for example, will be invited to have a look through the otoscope to see for herself the redness of the infected eardrum. Returning with the child after treatment she is asked to look once again, this time at the healthy eardrum. The result, says Shively, is confidence in his skills and reassurance that he has been effective.

Shively readily admits that building a career this far off the beaten track has its downside. In spite of the usual attractions of rural life—clean air and the absence of urban stress—Shively misses the intellectual companionship ordinarily provided by association with other professionals sharing similar cultural interests. The effort required to build his practice has left him with less time for his family than he would like to have and its happiness requires. And the absence of peer companionship for his wife, an RN, as well as himself has put strains upon his marriage that would not ordinarily have occurred had they remained in the traditional urban social settings in which each had matured and trained.

Shively believes that when he finds an appropriate partner many of the pressures of time and duty will be relieved, and that he will be able to achieve a better balance between the pleasures of work and those of a more conventional family life. Until that is possible, Cassville's sole DO will enable the residents of rural Cassville and its environs to continue to enjoy the benefits of modern family medicine applied in the distinctive osteopathic tradition.
A Practice Route Less Traveled

PCOM Makes a Difference in Rural Pennsylvania Medicine

The odds are ten to one against rural and small town people in Pennsylvania when the young physician chooses a place to practice today.

The statistics show their disadvantage. During the years 1965-1983, the period of greatest growth in the supply of American doctors, fully ten chose to practice in a metropolitan county of Pennsylvania for every one who located in a demographically rural county. This historical imbalance has probably increased in the last three years.

PCOM is unique in many ways. In an age of increasing specialization, for example, the college is distinctive in explicitly stating that its primary mission is the training of physicians in family practice. That is exactly the person the bypassed rural folks are crying for—the country doctor in the classic sense.

“Our mission and curriculum both offer strong support for rural practitioners,” says Kenneth Veit, DO, the administrator of PCOM’s rural and urban health care centers. “It begins with admissions, where we look for a cross section of students from around the state.”

There is overwhelming evidence that this school is a prime source of doctors for smaller communities in Pennsylvania. The last alumni survey, done in 1979 and soon to be updated, revealed that 24 percent of our graduates practiced in communities of 20,000 or less, and six percent were located in a population area of less than 5,000.

Today, there are more than 2,200 alumni practicing in Pennsylvania.

“Our LaPorte medical center gives students on rotation an excellent experience of rural medicine,” says Dr. Veit. “Many are surprised by the real rewards of rural medicine—the lifestyle, high prestige, close relationships, and the challenge to be a well-rounded physician—resulting in a choice to go that career route.”

The LaPorte rotation slots are limited, therefore PCOM alumni also provide rural practice experience. James Witt, DO, ’69, in Fulton County, James Marakowski, DO, ’76 in Perry County, and Alfred D’Angelo, DO, ’79, in York County among others, are vital to the college’s training program in rural medicine.

This college is making an impact on rural medicine in Pennsylvania precisely because of its abiding commitment to excellence in family practice. As Dr. Veit says, “The training of small town general practitioners, using osteopathic modalities, is a niche we cherish and want to expand.”

The rural people who benefit from this commitment will show it by their respect for and loyalty to the doctor who chooses, of all places, to practice in their local community. That choice is not prevalent in medicine today, and reminds one of those haunting lines by Robert Frost:

"Two roads diverged in a wood, and I
I took the one less traveled by
And that has made all the difference."
First Component of Osteopathic's Musculoskeletal Institute is Operational

Treating more than the symptoms.

Photos and story by Harry R. Gehlen

e don't worry too much about eliminating symptoms,” says Silvia Ferretti, DO, chairman, Physical Medicine and Rehabilitation, and director of Osteopathic's newly installed Bone and Joint Center. “We emphasize exercise and performance. Whether trauma to the musculoskeletal system results from surgery, from work or from play, we have found that in a well planned rehabilitation program symptoms diminish as treatment progresses. Our programs are designed to make our patients active again. And their active participation is required.”

In its continuing effort to provide an ever-widening range of services that exploit osteopathic expertise in the management of illnesses related to the musculoskeletal system, Osteopathic opened its Bone and Joint Diagnostic Center in November. It is the first component of the larger Musculoskeletal Institute, now being organized to promote musculoskeletal wellness through diagnosis, treatment, rehabilitation and prevention of musculoskeletal disease and injury. Continuing health education and self-help programs, such as those designed to teach patients how to avoid back injury, are important elements of the Center's approach.

The Center provides an entry point into Osteopathic for cases of musculoskeletal trauma for which the current treatment may be easing symptoms but not achieving rehabilitation. In such cases, physicians, employers or insurers can refer a patient to Osteopathic’s musculoskeletal consultation service, which employs medical expertise to achieve appropriate diagnoses and the optimum degree of rehabilitation. On the Center's staff are DOs Ferretti, J. Brendan Wynne, chairman, Department of Orthopedics; Alexander Nicholas, associate professor, Osteopathic Principals and Practice, and David Bevan, chairman, Department of Rheumatology.

An early success for the Center involved a 37 year old woman, a long distance bus driver, who had been out of work for six months before visiting the Center. She had experienced disabling back pain, but had not been documented as having serious disc or back pathology. Her inactivity had produced an ungainly weight increase. Treatment to that point had been essentially passive, including the application of palliative hydrocollator packs and ultrasound.

At the Center she was started on a program designed to increase her overall physical fitness. Her exercise program included workouts on an exercise bike and a treadmill, and a series of flexibility exercises for the legs and back. She was instructed in the workings of body mechanics, in the use of leg strengthening exercises, and made aware of the importance of correct posture. Six months after arriving at the Center to begin her custom-designed program, she was able to return to her job of cross-country bus-driving. In achieving her rehabilitation she had to visit only one location—Osteopathic's Rowland Hall. The comparatively modest cost of about $1,000 was covered by workman's compensation.

The use of sophisticated technology for measuring the extent of injury and progress in rehabilitation is a feature of the new Center. It's physicians and therapists can select from hi-tech electro-mechanical equipment worth over $140,000. One device is shown at left. It is a B-200 Isostation. Computer-assisted, it can measure a range of motion and torque-producing capabilities of the spine in three dimensions simultaneously. Its integral computer produces summary tables and graphic displays of what is taking place.

Correctly interpreted, these displays can be used to document the effectiveness, or ineffectiveness, of a rehabilitation program. They can help determine if a back problem is related to a muscular imbalance or weakness. They can also help to detect a malingerer. With the equipment's ability to compare the potential of a patient to resume work to what they can accomplish now, a program of work hardening can be readily devised. In contrast to a program in which a patient has received regular treatments with hot packs, ultrasound and electric stimulation, and for the most part has remained passive, the Center's work hardening programs require active participation and the investment of effort by the patient.
Robert Berger, DO

PCOM's new assistant dean hits the road for clinical education

By Lexi Lawson

“When we undertake to train a student,” declares Robert Berger, DO, assistant dean of clinical education, “it is our duty to assure that an osteopathic internship is available to complete that training.” Berger’s resolve to help recent PCOM graduates through their clinical requirements is justified. In 1986, there was a national shortfall of 250 intern positions for graduates of osteopathic medical colleges.

Berger serves as a liaison between affiliated hospital administrations and PCOM to help assure that each program meets AOA internship requirements. Since assuming his new job, four additional hospitals have agreed to accept PCOM internships. The targets are medium sized hospitals, those with 150 to 250 beds and a full range of services, and they are much in demand. Many hospitals look at training interns as a way to
advance their growth.

"Primary care is the life-blood of a general hospital," Berger maintains, "and Osteopathic internships provide our affiliated hospitals with dedicated house staff who are well-trained, eager and geared toward primary care. Hospitals hope, of course, that the interns will continue to be primary care providers at that hospital."

Berger is also a roving ambassador for the students of PCOM. His quest is to find excellent and well-planned clinical rotations for the more than 400 third and fourth year students.

"Sometimes it is difficult to get adequate training positions," Berger says. "Psychiatry is an example. Originally this training was done in state psychiatric hospitals, which are phasing out. Training programs also are being reduced because the state maintains that student training takes away from direct care services."

But Berger is not deterred. "In this position, you must be willing to accept alternative ways," he observes. "Part of my job is to be creative in making the rotations flexible yet comprehensive."

He usually deals with the hospital's director of medical education. In a program that Berger is initiating, PCOM department chairmen will be consulted along with the chairmen of the host hospitals in deciding what a rotation should involve, in order to determine minimal goals and objectives for each rotation.

"There definitely needs to be consistency in similar rotations at any of our 20 different teaching hospitals. Wherever we send our students we want to make sure that they are going to get specific knowledge and skills out of that rotation," Berger says.

Another important part of the assistant dean's job is working with Dean Dieterle and the assistant dean of basic sciences, Tage Kvist, PhD. Dean Dieterle wants a closer association between the basic sciences and clinical training. This strengthened association will improve the educational process, he insists. Doctors Berger and Kvist are beginning to work with clinicians to discuss the importance of the basic sciences, and to demonstrate how each fits into the clinical area. In the past, many clinicians were accused of saying, "the basic sciences are fine, but now I'm going to teach you reality." Basic science people in turn, often looked at clinicians as "non-scientists." "In reality, you have to understand both aspects," Berger says.

He enjoys his new post, its administrative work and challenges, but has had to cut back on his pediatric practice. His nine years on the Post-Doctoral Training Committee helped prepare Bob Berger for his new position, taught him internship development and gave him the opportunity to work with the Office of Education of the AOA. He presently chairs the task force on Osteopathic Pediatric Education and is past president of the American College of Osteopathic Pediatricians.

Preparing young people for greater things comes naturally for Bob and Hannah Berger. They have three teenagers, Eric, Audrey and Daniel. And it also seems natural that PCOM students' clinical first steps are taken under the guidance of a developmental pediatrician whose own clinical interest spans the breadth and depth of young lives.
Faculty in Focus

More ribbon was cut as the new Osteopathic SurgiCenter was opened by SPU Associates President Leonard M. Finkelstein, DO, and Walter Brand, Hospital Administrator amid ceremonies in January. The center offers same-day procedures, pre/post operative care, endoscopies, and urodynamics. Call extension 6690 to reach the SurgiCenter and its director, Regina Skowronski. Located on the hospital's ground floor, it has 11 patient units and three treatment rooms, all well appointed thanks to Tim Pierson, director of engineering, and his crew.

Before your phone rings, you can send your gift to the Office of Resource Development, marked “Student Loan Fund.”

OMCP strategic planning was the purpose of an early February meeting at Eagle Lodge involving 26 representatives of all six entities in the new corporate structure. President J. Peter Tilley, DO, discussed the capital and credit requirements of projects that will augment OMCP's share of an increasingly competitive health care market and keep the medical school classes filled to capacity. Increased revenue generation will be an important priority. Ed Boeggeman, vice-president of financial affairs, presented projected operating results over the next three fiscal years.

Contributions of $300,000+ have been generously given to the 1986-87 Alumni Fund to date, a sterling performance!

April 20-24, PCOM students will be calling alumni across the nation and asking for gifts to the Student Loan Fund. Mary Beth Bollinger, '89, is heading up this phone-a-thon as chairman of the Student Council Financial Aid Committee. She says, "Medical education costs are an enormous burden for many of us. The average osteopathic student owes $50,000 upon graduation, and the most needy up to $100,000. It's staggering and the Fed is pulling out, so please help us when we call."

A. Scott McNeal, PCOM class of 1988, was recently honored by the Medical Society of Pennsylvania, Southeastern Division, as the most outstanding third year medical student in the area. The society looks for a high grade point average and also community involvement when making the award.

$500,000 is the challenge goal of the 1987-88 Annual Alumni Fund. The announcement was made by Albert F. D’Alonzo, DO, ’56, newly elected as president of the Alumni Association. Louis Wm. Martini, DO, ’58, chairman of the Endowment Committee, announced that the board has committed itself to 100 percent participation in reaching the goal. "I believe our alumni want to respond, and not feel that they have to respond," Dr. Martini said.

Joseph A. Ackil, DO, '67, president of the Alumni Association for 1986, sincerely thanks each one who has contributed, especially the OMCP Board of Trustees who set the pace by opening the campaign with a $80,000 challenge grant. There is time to contribute if PCOM has reached top of your list of "Honorable Things To Do." Gifts received before June 30th will still qualify for 1986 Silver Key, Gold Key, and President’s Club membership.

A. Scott McNeal, PCOM class of 1988, was recently honored by the Medical Society of Pennsylvania, Southeastern Division, as the most outstanding third year medical student in the area. The society looks for a high grade point average and also community involvement when making the award. The Digest congratulates A. Scott McNeal, and the PCOM community shares his pride in being honored for excellence.

David A. Bevan, DO, chairman of the division of rheumatology, has been elected vice-president of the Arthritis Foundation Board of Directors, Eastern Pennsylvania Chapter.

William H. Dickerson, DO, was elected chairman of the subspecialty division of infectious diseases of the American College of Internists.
Joseph A. Dieterle, DO, Dean of PCOM, was recently inducted into the College of Physicians of Philadelphia. His sponsors were William H. Dickerson, DO, and Emanuel Fliegelman, DO.

Ted Eisenberg, DO, clinical assistant professor of surgery, has been elected vice-chairman of the plastic and reconstructive surgery division of the American College of Osteopathic Surgery.

Emanuel Fliegelman, DO, professor of obstetrics and gynecology, recently addressed General Practice Update V in White Sulphur Springs, WV, and also spoke on “Human Sexuality” to the nursing department of Delaware County Community College.

R. Michael Gallagher, DO, clinical associate professor in the department of general practice, recently published an article on “Tension Headache” in Medical Dialogue.

James A. Giuliano has been named executive director of OMCP Clinical Associates. He has more than a decade of experience in the organization and operation of medical school faculty practice plans.

Ronald A. Kirschner, DO, clinical professor in the department of otorhinolaryngology, was recently made a Fellow of the American Academy of Cosmetic Surgeons and the American Osteopathic College of Ophthalmology and Otorhinolaryngology.

New Director of Development Marilyn Lucas has joined the Administrative team at OMCP after successful development positions at Hahnemann University and the University of Pennsylvania. “My first goal is to build our constituencies, and for us to become a known quantity to funding sources in the Philadelphia area,” she said. “Alumni can be helpful in suggesting needs of osteopathic medical education and in providing possible funding contacts for them.”

Richard L. Merhar has been named director of information systems at OMCP. He has a 20-year career in the computer field, most recently as manager of technical planning at Shared Medical Systems, Fraser, PA.

William A. Nickey, DO, chairman of the department of internal medicine, has been named to the medical advisory board of the National Kidney Foundation of the Delaware Valley.

Harris A. Ross, DO, associate professor of rehabilitation medicine, was elected to a four-year term on the board of trustees of the American Osteopathic College of Rehabilitation Medicine.

Robert B. Swain, DO, associate professor in the department of surgery, was a clinical contributor to “Guides to Clinical Aspiration Biopsy” by Tilde S. Klein, MD.

Michael Zal, DO, FACN, clinical professor in the department of psychiatry, has published an article entitled “The Psychiatric Aspects of Myocardial Infarction” in the February issue of Cardiovascular Reviews and Reports. His article on “The Diagnosis and Treatment of Panic Disorders” will appear in the May issue of Family Practice Recertification.

Robert Bressler, CPA, vice-president for corporate finance and treasurer, recently announced his plan to retire sometime after July 1. Since joining OMCP in 1976, he has capably presided over significant fiscal developments. During his tenure the operating budget went from $20 million to $68 million. His greatest pride, however, is reserved for the changes he has introduced in procedures and personnel, making fiscal affairs a very strong unit. The most recent test was presented by the corporate reorganization, which requires preparation of financial statements for five organizations rather than two, and the enormous job was accomplished superbly under his leadership. Mr. Bressler will remain at the helm during the transition.
On Friday, March 13th, if you tuned in WHYY TV 12 in the Philadelphia area, you would have seen the ballet and 65 Osteopathic employees raising money for public television. From 5:30 p.m. to 11:00 p.m. fundraising volunteers from Administration, Professional staff, Dean's Office, Creative Services, Communications, Special and Continuing Education, Fiscal Affairs, Mail Center, Resource Development, Alumni, College Admissions, Credit & Collections, Bone and Joint Center, and Nursing took pledges batched and compiled the results. Volunteers received a promotional shirt, dinner and a chance for their families to see them on public television. Dr. Tilley praised WHYY's programming. WHYY received the best turnout from an organizational fundraising campaign of the season. The event was put together by the Communications and Creative Services staff, Jonathan Kirk, Carol Familetti, and Nancy Hicks seeing that the show went on. Osteopathic . . . you looked marvelous!

PCOM admission policy for alumni children, adopted at the January meeting of the Board of Trustees, encourages their applications and grants them every consideration possible in accordance with their credentials. Each one submitting a completed application and meeting all admission requirements is guaranteed a personal interview by the Faculty Committee on Admissions. The committee considers grades, MCAT scores, letters of recommendation, exposure to the profession, and interview performance in reaching a decision. After the fairest possible hearing, a recommendation is determined by a vote of the entire committee and submitted to the dean for a final decision. Counseling by admissions staff is available to all candidates before and after the interview. Alumni may obtain a copy of the written policy from the admissions office.

Daniel L. Wisely, DO, chairman and professor of surgery and director of medical education, was back on the warpath when he learned that the Digest had incorrectly stated that Dr. Wisely's residents had given him an Indian headdress as "the Chief." His braves, all hospital interns, corrected the editor with much whooping and tomahawk waving, threatening to remove what remains of his scalp if they were not properly credited with the feathery haberdashery. The Digest sincerely regrets the error.
More than 50 sun-seeking physicians and their guests commandeered a Caribbean charter January 24, invaded the Bolongo Bay Beach and Tennis Club on St. Thomas, and none of them answered a beeper all week.

The 40 CME Category One AOA credits each physician earned came the hard way—in classes barricaded against the warm breezes, persistent sunshine and sparkling water that laps against Bolongo's sandy shores. Time for photographs came in the evening, when dinner and festive occasions brought the group together. One of the pictures that made it back to Philadelphia is shown here. The really good ones got away, and can only be captured by you on next year's invasion, which is already half filled. To reserve your space and photo opportunity, call or write to Hale Peffall, PCOM Executive Director, Alumni Affairs.
1928
Conrad Maulfair, Allentown, PA, is still practicing at age 83 in the same office he has occupied for 55 years. He may taper off for two reasons—specialization ("Now there are hand surgeons, and soon there'll be left-hand and right-hand surgeons") and the cost of liability insurance ("I paid $36 when I started and now they want $4,000 even though I've never been sued").

1938
Richard S. Koch, Olympia, WA, presented a paper on "Painful Shoulder Syndrome and Sclerotherapy" at the 91st AOA Convention. He also lectures on underwater physiology, archeology, sports diving, and water safety.

1948
Nathaniel W. Boyd, III, Loganville, PA, presented a paper on "Sclerotherapy of Hemias and Hemorrhoids" at the 91st AIA Convention. He is also author of the book, How to Stay Out of the Hospital.

1952
Morton H. Rothstein, Seaford, NY, has recently been elected to Fellowship in the American College of Gastroenterology.

1953
Irving Tenenbaum, a life-long resident of Cape May, NJ, was recently honored as the citizen exemplifying the "Highest Leadership and Community Involvement." As a doctor-historian, he played a key leadership role in the preservation of Cape May's unique architectural legacy and its revitalization as a popular shore resort.

1955
Norman H. Ilowite, Saddle Brook, NJ, presented a paper on "An Osteopathic Dermatologist's 30-year View of Atopic Dermatitis" at the 91st AOA Convention.

1956
J. Harris Joseph, Bala Cynwyd, PA, has been chosen as the president-elect of the American Cancer Society, Philadelphia division. He is also serving his second term as chairman of the Pennsylvania State Cancer Coordinating Committee.

1957
Donald F. Stanton, East Lansing, MI, presented on "Chronic Pain—Is It Really Real?" at the 91st AOA Convention.

Daniel H. Belsky, Cherry Hill, NJ, has been appointed chairman of the AOA's Committee on Post-doctoral Training, and was also named to the organization's Bureau of Professional Education and Bureau of Research.

1958
R. Dale McCormick, York, PA, was granted the Degree of Fellow in the American College of Osteopathic Surgeons at its recent meeting in Las Vegas.

1960
Seymour Kessler, Philadelphia, PA, has opened a second office in partnership with Carlo DiMarco, '78.

1962
Lawrence U. Nessman, Wayne, NJ, had been appointed chairman of the National Defense Committee, Jewish War Veterans of the USA, Department of New Jersey.

1964
Joel L. Samitt, Lancaster, PA, has received board certification in family practice. He is the past president of the medical staff at Community Hospital and serves on the board of the American Lung Association.
1965

Bernard Kazdan, Woodsburg, NY, serves as a medical consultant for three TV shows—Guiding Light, As The World Turns, and the Kate and Allie show. His job is maintaining dramatic realism, but he also does walk-on parts as an extra. He says, "Being a TV doctor is easier."

Ralph C. Lanciano, Jr., Haddonfield, NJ, has been appointed chief of ophthalmology at the University of Medicine and Dentistry, New Jersey School of Osteopathic Medicine, Camden.

1966

Merrill Jay Mirman, Springfield, PA, presented a paper on "The Use of Sclerotherapy in Treating Varicose Veins" at the 91st AOA Convention.

1967

Roy A. DeBeer, Far Rockaway, NY, is associate director of medicine at Peninsula General Hospital in Queens, and head of the gastroenterology division at the New York College of Osteopathic Medicine.

1969

Steven L. Edell, Wilmington, DE, recently lectured on "Upper Urinary Tract Sonography" at the 31st Annual Convention of the American Institute of Ultrasound in Medicine.

1973

John M. Ferretti, Erie, PA, has been appointed director of marketing at Millcreek Community Hospital where he had served as the hospital's medical director and director of medical education.

1974

Jack Abarbanel, Indiana, PA, has been named medical director of the Indiana Regional Cancer Treatment Center.

1975

Robert Gordon, Pine Hill, NJ, has been appointed an associate professor of clinical medicine at the University of Medicine and Dentistry of New Jersey, School of Osteopathic Medicine.

1976


Jeffrey S. Weisman, Philadelphia, PA, Director of Oxford Hospital's Special Care Unit and Chairman of the Department of Medicine, has been elected to Fellowship in the American College of Cardiology.

1977

Zenia Chernyk, Schwenksville, PA, spent two weeks visiting major health care facilities in China discussing research and practical techniques in nephrology, sponsored by the People to People Exchange for Peace.

Raymond D. Dragann, Lancaster, PA, has been certified by the American Osteopathic Board of Orthopedic Surgery and is a member of the Community Hospital medical staff.

Michael P. Naharian, Johnstown, PA, is now a Diplomate of the American Board of Surgery. He is the director of trauma services and medical director of Lifeflight at Conemaugh Valley Memorial Hospital.

John H. Nicholson, Palmerton, PA, has been elected secretary-treasurer of the medical staff of Palmerton Hospital and is in private family practice.

1978

David A. Baron, Los Angeles, CA, presented a paper on "Premenstrual Syndrome" at the 91st AOA Convention.

Joseph A. Cable, Pottsville, PA, a pulmonologist, has announced the opening of his practice office.

Carlo J. DiMarco, Philadelphia, PA has opened a second office in partnership with Seymour Kessler, ’60.
Michael G. Eyer, McSherrystown, PA, has announced the opening of his new practice of endodermology.

1979
Warren S. Goff, Des Moines, IA, was recently appointed an assistant professor of internal medicine at the Des Moines College of Osteopathic Medicine.

Keith P. Henderson, New Freedom, PA, has been selected as one of the Outstanding Young Men of America for 1986. Dr. Henderson is the director of emergency medicine at Hanover General Hospital.


Barry L. Smith, Westfield, MA, was recently certified by the American Osteopathic Board of Internal Medicine and has begun practice with Medical West Health Plan, an HMO.

1980
John G. Brady, Laurel, MD, a senior resident at Bethesda Naval Hospital, presented a paper entitled "Cutaneous Manifestations of Viral Diseases" at the 91st AOA Convention.

William W. Clendenen, Salisbury, MD, was elected to Fellowship in the American Academy of Pediatrics.

Stuart Kremer, Bala Cynwyd, PA, was appointed vice-president of the Norristown unit of the American Cancer Society.

James A. Russell, Athens, PA, was recently certified in the medical specialty of neurology by the American Osteopathic Board of Psychiatry and Neurology.

1981
Joseph J. Calabro, San Francisco, CA, has recently taken over as chief of the emergency medicine service at Letterman Army Medical Center, Presidio.

Francis J. Kane, Mahanoy City, PA, has joined the Family Practice Associates in Frackville, PA.

Dennis J. Kondash, Clark's Summit, PA, has been elected secretary-treasurer of the medical staff of Community Medical Center, Scranton.

David M. Roda, Lancaster, PA, is on the active staff at St. Joseph Hospital and Health Care Center, and has been awarded certification by the American Osteopathic Board of Anesthesiology.

Richard L. Weinberger, Scranton, PA, is in private practice and has been awarded certification by the American Osteopathic Board of Internal Medicine.

1982
Bernard C. Adukaitis, Fountain Springs, PA, recently opened his office for the practice of pediatrics and adolescent medicine in Shenandoah, PA.

Alan P. Muto, Allentown, PA, was appointed to staff at Warren Hospital and has joined the Warren Medical Associates with offices in Phillipsburg and Forks Township.

David J. Simons, Lancaster, PA, stays in shape and took 12th place in a field of 47 in the 4th Annual Lancaster YMCA Triathlon.

R. Scott Smith, Cherry Hill, NJ, was chosen the number one surgical resident in the United States by the American College of Osteopathic Surgeons. He is chief surgery resident at the Kennedy Memorial Hospitals - University Medical Center, Stratford, NJ.

Wayne J. Stuart, Gatlinburg, TN, has a private general practice in Seymour, TN. His favorite patient is Susie Wells of Frog Alley, who recently turned age 101 and received

Louis Pearlestein

James Rossi

Walter Snyder
her first-ever-bouquet of roses, sent by her doctor.

1983

Beth A. Loss, York, PA, has joined the attending general practice staff at Memorial Hospital, and also joined a family practice which includes Kenneth R. Higgins, ’83.

Robert S. Muscalus, ’83, and John E. Muscalus, ’82, have opened a brotherly joint family medical practice in Hummelstown, PA. Both physicians are on the staff of Community General Osteopathic Hospital in Harrisburg.

Donald J. Sweeney, Elkland, PA, received board certification as a Diplomate of the American Board of Family Practice.

1984

Suzette T. Avetian, Newtown Square, PA, has joined the general practice of Dr. Theodore P. D’Orazio in Glenolden, PA.

Charles C. Eaves, Jr., Ft. Bliss, TX, is serving as chief of emergency medical services at the William Beaumont Army Medical Center. He jointly manages trauma at the Army’s only major trauma unit in the military.

Robert E. Lee-Powell, Wyncote, PA, has opened her practice in the Germantown Family Health Center, located at the Germantown Hospital and Medical Center.

Christine M. Zabel, has joined a family practice in Newtown Square, PA and is a staff member of Metropolitan Hospital, Springfield Division.

1985

Timothy S. Brooks, Clarion, PA, has begun providing full-time physician coverage at the Knox Family Medical Center.

Salvatore A. Moscatello, Jr., Hackensack, NJ, was named Outstanding Intern of the Year 1985-86 by Hackensack Medical Center, and was chosen as chief resident in the department of internal medicine for 1988-89.

John H. Nipple, ’71 has been elected president of the medical staff at Community General Osteopathic Hospital in Harrisburg. Other PCOM graduates or affiliated faculty elected were: William P. Brown, ’74, vice-president; Howard C. Doughty, secretary; and William M. Bird, ’80, treasurer. Robert R. Kaneda, ’74, John E. Muscalus, Jr., ’82, and Scott G. Barnes, ’76, were elected members at large. William A. Wewer, ’79, is the immediate past president.

Three PCOM graduates were recently elected to the Board of Directors of the Delaware Valley Medical Center. Louis Pearlstein, ’78, is chairman of the DVCM neurology division of the internal medicine department. James Rossi, ’67, is vice-president of the medical staff. Walter Snyder, ’69, is chairman of the DVCM pulmonary division of the internal medicine department.

Medical Staff Appointments

PCOM is glad to announce the following medical staff appointments received by our graduates.

Burton Marks, ’62, was appointed radiologist by Good Samaritan Hospital in Lebanon, PA.

Henry K. Sagel, ’70, was appointed to the staff of York (PA) Hospital. John C. Prestosh, ’76, was named director of emergency and outpatient services at Allen-town (PA) Osteopathic Medical Center. Gary Oberholtzer, ’77, joined the staff of Warminster (PA) General Hospital. Bruce R. Tilton, ’79, joined the pediatric staff at Brandywine (PA) Hospital.

Jeffery A. Keyser, ’80, was appointed to the staff of Community Hospital in Lancaster, PA. Ray J. Perez, ’80, was appointed to the staff of Pottstown (PA) Memorial Medical Center. John K. Taus, ’80, has joined the medical staff of Good Shepherd Rehabilitation Hospital in Bethlehem, PA.

David L. Beaton, ’81, has joined the medical staff of Metro Health Center in Erie, PA. Robert M. Cherrey, ’82, was appointed to staff by the Mercer Medical Center in Trenton, NJ.

Richard A. Benoit, ’83, has joined the medical staff of the Monroe-Noxen (PA) Health Center. Steven M. Evans, ’83, was appointed to the medical staff of Pottstown (PA) Memorial Medical Center. Kenneth R. Higgins, ’83, has won appointment to the staff of Memorial Hospital in York, PA.

David A. Klees, ’85, has joined the staff of the department of family practice at Metro Health Center in Erie, PA. Bruce E. Maniet, ’85, was recently appointed to the attending medical staff of Memorial Hospital in York, PA.

Ronald R. Ganelli, DO has been elected chief of staff at Metropolitan Hospital, Central Division, where he is director of trauma services. He has also been elected to a third term as chairman of the Camden County Council of the Health System Agency in Southern New Jersey.
Mortimer J. Sullivan, '21, Sea Girt, NJ, died in February. He had a long and distinguished career as a practicing physician and radiologist in Montclair, NJ. Dr. Sullivan served as president of the West Essex General Hospital medical staff, and also as president of both the Essex County Society and the New Jersey Association of Osteopathic Physicians and Surgeons. The state association chose him as Physician of the Year at its 68th Annual Convention. Elected to the PCOM Board of Trustees in 1966, he served as chairman of the Nominating and School of Nursing Committees. The gratitude of the board for his many years of faithful service to the college was expressed in its election of Dr. Sullivan as Emeritus Trustee in 1984.

J. Walter Larkin, '25, Phoenix, AZ, died on January 6 at the Phoenix General Hospital, which he had helped found. He was president of both the Maricopa County and Arizona Osteopathic Medical Associations, and a fellow of the American Osteopathic College of Ophthalmology and Otorhinolaryngology, which he served as president in 1959. A native of Norristown, PA, Dr. Larkin had practiced as an osteopathic physician and surgeon in Phoenix since 1940.

William A. Ketner, '27, Clarion, PA, died on January 10 in Clarion Osteopathic Community Hospital. He was one of the five founders of the hospital and had served the Clarion community for 58 years, for which he received its Man of the Year award. Dr. Ketner was an honorary life member of the American Osteopathic Association and also a member of the American Medical Association. He is survived by his wife, one son, Gerald M. Ketner, DO, '61, of Clarion, and two daughters. Another son, Donald W. Ketner, DO, '56, preceded him in death. One of his 14 grandchildren, John M. Ketner, DO, practices general surgery in Detroit, MI.

Ronald E. Ambler, '30, Norristown, PA, died at age 79 in Suburban General Hospital in East Norriton Township, an institution he helped found and formerly named Riverview Osteopathic Hospital. Dr. Ambler served as chairman of the hospital's professional staff and was elected Suburban General's Doctor of the Year in 1976. He practiced medicine for 56 years and had also taught at PCOM.

Hubert M. Stavrand, '58, Harrington Park, NJ, died on November 20. He was on the staff of Passaic Valley Hospital in Westwood. Dr. Stavrand had served as president of the Bergen County Osteopathic Medical Society and the Harrington Park Board of Health. A life member of the Sons of Norway and long dedicated to community emergency services, he was named Citizen of the Month by the Police Honor Legion of New Jersey.

Richard E. Colarusso, '66, Yatesville, PA, died on December 27. Upon graduation from Philadelphia College of Pharmacy and Science and PCOM, he entered general practice in Pittston, PA. Dr. Colarusso served as president of the Pennsylvania Osteopathic Medical Association, and was a member of its Board of Examiners as well as vice-chief of Medical Staff at Geisinger-Wyoming Valley Medical Center. He was also president of the Pittston Hospital Medical Staff and a member of the American College of Utilization Review of Physicians.

Marianne C. Filipczyk, '89, died suddenly and unexpectedly October 21 at PCOM. Prior to entering PCOM as a student, she had served as head nurse in the Hospital's neo-natal intensive care unit, and continued as a pool nurse even after matriculation. Her nursing degree, from Misericordia College in 1976, preceded graduate work in healthcare administration at St. Joseph’s University in 1982, and pre-medical work at Villanova University and Spring Garden College. At PCOM, she was educational co-chair of the Gene Banker Society, Vice President of the Pediatric Society and active in a number of student affairs. She was the 1986 recipient of the William Goldman Scholarship.

Philip J. Pante, '71, clinical assistant professor of internal medicine at PCOM, died March 11 following a heart attack at his home in Broomall, PA. He was 58. Dr. Pante had served as instructor and assistant professor since 1975, after completing internship and residency. His medical interest began in 1946 when he served in the U.S. Army Medical Corps. A pharmacy graduate of Temple University in 1953, he was named Outstanding Senior that year, and winner of the Pfizer Award. As a pharmacist and physician detailer for Pfizer, he was able to compare practices of both allopathic and osteopathic physicians. In 1967 he chose to become an osteopathic physician, and was accepted at PCOM. Dr. Pante returned to Temple University Medical Center in 1985 to study diabetes. He shared offices with Drs. Galen S. Young, junior and senior, in Bala Cynwyd, and helped OMCP establish new healthcare center offices in West Philadelphia last year.
## Calendar

### Coming Events

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<tr>
<th>Date</th>
<th>Event Description</th>
<th>Location</th>
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<td>April 20-23</td>
<td>Third Annual Phone-A-Thon</td>
<td>PCOM</td>
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<tr>
<td>April 26</td>
<td>Osteopathic 10K Bridge Run</td>
<td>Camden - Philadelphia</td>
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<td>April CME's</td>
<td>25 - Rheumatology</td>
<td>PCOM</td>
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<td>29 - General Practice</td>
<td>PCOM</td>
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<td>May 2</td>
<td>Annual Office Cardiology</td>
<td>PCOM</td>
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<td>May 13-17</td>
<td>POMA Convention</td>
<td>Valley Forge Sheraton</td>
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<td>May 15</td>
<td>PCOM Sports Banquet</td>
<td>Dunney’s Hotel Bala Cynwyd</td>
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<td>May 22-24</td>
<td>Applied Laser Surgery Course</td>
<td>PCOM</td>
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<td>May 30</td>
<td>Alumni Association Board Meeting</td>
<td>PCOM</td>
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<td>Commencement Dinner Dance</td>
<td>Adams Mark Hotel - Phila.</td>
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<td>May 31</td>
<td>PCOM Commencement</td>
<td>Academy of Music - Phila.</td>
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<td>June 6</td>
<td>Human Sexuality</td>
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<tr>
<td>June 6-7</td>
<td>Applied Laser Surgery Course</td>
<td>PCOM</td>
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<tr>
<td>June 10</td>
<td>Third Annual R &amp; R Day</td>
<td>Eagle Lodge Conshohocken</td>
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<tr>
<td>August 7-9</td>
<td>Applied Laser Surgery Course</td>
<td>PCOM</td>
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<tr>
<td>September 13-19</td>
<td>National Osteopathic Medicine Week</td>
<td>PCOM</td>
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<tr>
<td>October 4-8</td>
<td>National AOA Convention</td>
<td>Orlando</td>
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