Digest of the Philadelphia College of Osteopathic Medicine (Summer 2009)

Philadelphia College of Osteopathic Medicine

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CRISIS IN THE ER
REPAIRING THE NATION’S
HEALTH CARE SAFETY NET
CON TENT S

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2009 N o. 2

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GO GREEN.
Does PCOM have your current e-mail information?
Send any e-mail updates to alumni@pcom.edu and the College will reduce the number of paper mailings sent to you. PCOM strives to produce environmentally-responsible publications and targeted mailings.
Dear Alumni and Friends,

Across the country, the emergency medical system is stretched to capacity. Due in part to the current economic crisis, there has been a significant rise in the number of American families who are uninsured or underinsured. *Digest’s* cover story, “Crisis in the ER: Repairing the Nation’s Health Care Safety Net,” addresses this challenge and offers some important solutions from PCOM alumni—osteopathic physicians and physician assistants who daily serve in the trenches.

In tribute to our institution’s heritage, this issue marks as well the College’s DO Commencement celebrations—including a milestone for our Georgia Campus, which graduated 78 new osteopathic physicians in May. The Georgia Campus Class of 2009 was the first osteopathic medical class to graduate from the College’s branch campus. Georgia Campus also awarded its first Mason W. Pressly Memorial Award to student leader Trupi Patel, DO ’09.

Continuing to celebrate Commencement season and the accomplishments of our students, an article about the inspiration behind the Simmy Ginsburg Humanitarian Award reminds each of us involved in the health care profession that we must serve with a sense of compassion. By embracing and practicing this ultimate empathy, we can make a difference in the lives of others.

Finally, this issue includes a Reunion Years Roundtable—a gathering of alumni voices and images that attests to the marked changes at PCOM over the past six decades.

I thank you for your continued interest in and support of the College.

With warmest regards,

Matthew Schure, PhD
President and Chief Executive Office
With the hooding of 78 new physicians on Sunday, May 17, PCOM history was made. The GA–PCOM class of 2009 was the first osteopathic medical class to graduate from the College’s branch campus.

“Every graduation is a joy,” proclaimed President Matthew Schure, PhD. “This one is especially so due to the Herculean efforts of the PCOM community to reach this special day. To save a single life is the equivalent of saving the entire world. Our Georgia campus osteopathic medical graduates will save the world many times as they apply the osteopathic medical education they have received. We rejoice with our graduates and know that they join us in thanking the faculty, staff and administrators of the College in making that education possible.”

Campus Executive Director John Fleischmann, EdD, MBA, MPA, proudly stated, “I have watched as our pioneer class of 2009 has evolved from eager, over-achieving medical students to professional, caring, thoughtful and highly-educated student physicians, and I couldn’t be more proud of them.”

Delivering the commencement address was former Surgeon General of the U.S. Army Lt. Gen. Ronald Blanck, DO ’67, who told the graduates to take full advantage of the current and emerging technology but “do not let it come between you and your patient.” He also encouraged students to “volunteer for everything you can responsibly handle. This will give you satisfaction, visibility and awareness of unknown opportunities.”

Also at the ceremony, 12 graduate students were awarded a master’s of science in biomedical science degree.

William G. Anderson, DO, vice president for academic affairs and osteopathic medical education at Detroit Medical Center and associate dean for the Michigan region at Kirksville College of Osteopathic Medicine, presented the keynote address at PCOM’s 2009 DO commencement. Dr. Anderson is known for his significant contributions to the Civil Rights Movement and the osteopathic profession. In 1961 he founded and served as the first director of the Albany Movement, a desegregation coalition in Albany, Georgia. Dr. Anderson is also a former director of the Southern Christian Leadership Conference and worked closely with Dr. Martin Luther King, Jr., Ralph Abernathy and other civil rights pioneers.

Dr. Anderson was also a pioneering African American osteopathic physician and surgeon, becoming the first black surgical resident in Detroit, Michigan, and conducting a successful group surgical practice until 1984.

Civil Rights Icon Addresses Class of 2009


Carl Hoegerl, DO ’01, was hooded by Fred Goldstein, PhD, professor, neuroscience, physiology and pharmacology. Dr. Hoegerl was the first attending DO to earn a clinical master’s of science degree through the program at PCOM.
Board Welcomes New Members

The PCOM Board of Trustees has added two Georgians to the Board. Terry Coleman, JD, deputy commissioner of the Georgia Department of Agriculture, is Speaker Emeritus of the Georgia House of Representatives where he spent 34 years as a member and 12 years as the chair of the House Appropriations Committee.

Wayne Sikes served for 10 years as the chair of the board of directors of Gwinnett Health System based in Lawrenceville, Georgia. He continues to serve on the board of its strategic long-range planning efforts.

“Mr. Coleman and Mr. Sikes bring tremendous expertise and experience to PCOM’s Board of Trustees,” says Paul McGloin, Chair of the Board. “We warmly welcome them to the Board and look forward to working with them for the betterment of the College and its Georgia campus.”

A Tradition Continues

The 2009 Follies upheld long-standing tradition with send-ups of some of PCOM’s most beloved professors while raising money for a good cause. Donations from this year’s Follies went to Heart to Heart International for their Ready Relief Box. The Box provides physicians with medicines, instruments and supplies that are commonly used on medical missions.

This year’s Follies paid special tribute to Robert Fogel, DO, former professor and chair, pathology, microbiology and immunology, who is now professor and chair of pathology at the University of Medicine and Health Sciences in St. Kitts. Dr. Fogel was at this year’s Follies in spirit.

Medical Center Receives Funding

Sullivan County Medical Center has received two grants from the Blue Ribbon Foundation of Blue Cross of Northeastern Pennsylvania. A $12,500 grant will help pay for commonly needed pharmaceuticals, vaccines and medical supplies to serve an additional 350 uninsured and underinsured patients in 2009.

The Center also received a $10,000 grant to offer age-appropriate education on topics such as bullying, anger management, domestic violence, Internet safety and sexual assault to students in grades K-12 in the Sullivan County School District.

School Psychology Receives National Approval

PCOM has received full approval from the National Association of School Psychology (NASP) for its graduate programs in school psychology. Rosemary Mennuti, EdD, director of PCOM’s school psychology programs, explains the importance of the approval. “This national recognition is a distinction that attests to the outstanding quality of our relatively young programs. The NASP reports were very complimentary and noted, among other things, that the programs have excellent faculty that maintain high visibility in the profession through a variety of teaching research and service activities.”

All graduates of PCOM’s EdS, MS and PsyD school programs are eligible to apply for national certification. The programs will maintain NASP approval through 2013.

Kudos

Bonnie Buxton, PhD, professor, microbiology and immunology, GA–PCOM, and Randal Gregg, PhD, assistant professor, microbiology and immunology, GA–PCOM, coauthored the board-reviewed book Lipincott’s Review of Medical Microbiology and Immunology to be published September 2009.

Stacey Cahn, PhD, assistant professor, psychology, Virginia Salzar, PhD, associate professor and director, clinical research, psychology, and Roger McFillin (PsyD) coauthored the poster “Social Information-Process and Coping in Adolescent Girls with an Eating Disorder” presented at the 2009 Academy for Eating Disorders International Conference in Cancun, Mexico.


Robert DiTomasso, PhD, professor and chair, psychology, Arthur Freeman, EdD, clinical professor, psychology, Bruce Zahn, EdD, professor and director of training, school psychology, and Raymond Carvajal (PsyD) coauthored the
OMM Fellows Named

Third-year medical students (from left) Yekaterina Belousov, Gregory Cannon and Ryan Schreiter have been accepted into PCOM’s OMM fellowship program.

SNMA Recognizes PCOM Leaders

Kristen Berry, DO ’00, clinical instructor and family practice physician, PCOM Healthcare Center – Lancaster Avenue Division (left), and Ruth Thornton, PhD, professor and chair, biochemistry/molecular biology, were honored at the Student National Medical Association’s 21st Annual Recognition Reception. Dr. Berry received the Meta Christy Award for her exemplary practice of osteopathic medicine, service to the community and inspiration to future DOs. Dr. Thornton was named Mentor of the Year.

Books Bound for Africa

Over the years, PCOM students have had the opportunity to build their medical libraries with free, slightly out-of-date textbooks that have been withdrawn from circulation from the PCOM library. While David Rand (DO ’10), admits that he loved referencing his growing set of medical texts, he came to realize the injustice of the situation. “As PCOM students we were able to build our own medical libraries while we also had easy access to the most current electronic and paper texts through the PCOM library. Yet in resource-scarce nations, many students and medical professionals don’t have access to any medical textbooks.”

So, with support from PCOM Library Director Etheldra Templeton, Mr. Rand applied for funding to ship the medical textbooks to Africa. Millicent Tiwaah (DO ’10), who emigrated from Ghana when she was 16, joined the team. She connected the project with the hospital in her hometown and determined the best way to ship the books overseas. Sharon Stoll (DO ’11), former SGA 1st vice president, promoted the program and solicited funds and books.

With help from many PCOM individuals, administrative departments, student groups and two area hospital libraries, 700 textbooks were shipped in March to the Komfo Anokye Hospital in Ghana and to the non-profit organization Books for Africa, which will distribute them throughout Uganda.

OMM Fellows Named

Third-year medical students (from left) Yekaterina Belousov, Gregory Cannon and Ryan Schreiter have been accepted into PCOM’s OMM fellowship program.

Kudos


John Fleischmann, EdD, MBA, campus executive officer, GA–PCOM, was quoted in the article “More graduate education, training holds key to Georgia’s health care success,” which was published in Atlanta Hospital News.

Katherine Galluzzi, DO, professor, chair and director, geriatrics, presented the lecture “It’s About Time: Smoking Cessation” at the ACOFP Annual Convention in Washington, DC. At the same convention she moderated “New Horizons in the Management of Type 2 Diabetes: Expanding the Treatment Paradigm for Glycemic Control and Risk Reduction.” Dr. Galluzzi and Larry Finkelstein, DO ’87, associate professor, family medicine, coauthored the chapter “Malnutrition and Depression in Older Adults” published in Medical Nutrition and Disease: A Case-Based Approach (4th ed.).

James Hale, PhD, associate professor and associate director of clinical training, school psychology, coauthored the article “Differential Ability Scales–Second Edition (Neuro) Psychological Predictors of Math Performance for Typical Children and Children with Math Disabilities” published in Psychology in the Schools. He also coauthored the chapter “The Enigmatic Population of Specific Learning Disabilities: Comorbidity of Psychopathology in Cognitive and Academic Subtypes” published in Emotional Disorders: A Neuropsychological, Psychopharmacological, and Educational Perspective. He also presented three posters at the International Neuropsychological Society in Atlanta and several

With books bound for Africa are (from back to front) Sharon Stoll (DO ’11); Millicent Tiwaah (DO ’10); and David Rand (DO ’10).

Drs. Berry and Thornton are recognized by SNMA.
DOs Take to the Hill

According to the AOA, this year’s DO Day on the Hill was the largest ever with nearly 1,600 osteopathic physicians and students visiting Washington, DC. PCOM students were out in force with 120 students from Philadelphia and 55 students from Georgia.

DO Day on the Hill is the preeminent opportunity for DOs and students to come to Washington, DC, educate legislators about osteopathic medicine and lobby members of Congress and their staff face-to-face. This year’s event focused on The Physician Workforce and Graduate Medical Education Enhancement Act (H.R. 914). The bill aims to establish a loan program for eligible hospitals to create residency training programs that will expand the nation’s graduate medical education capacity.

School of Pharmacy Awaiting Approval

The Board of Trustees of PCOM has authorized the College to apply to the American Council of Pharmacy Education (ACPE) for approval to begin a four-year School of Pharmacy at the College’s Georgia campus.

Mark P. Okamoto, PharmD, has been named dean and chief academic officer for the proposed school. Dr. Okamoto was formerly professor and chair at the College of Pharmacy Practice at the University of Hawaii at Hilo.

Dr. Okamoto received his doctor of pharmacy degree from the University of Southern California, Los Angeles. He has completed post-doctoral fellowships in pharmacokinetics and pharmacoeconomics at University of Southern California.

Dr. Okamoto served in a number of academic and leadership positions at Western University in Pomona, California. His experience at Western University, home of the College of Osteopathic Medicine of the Pacific, gives Dr. Okamoto a unique perspective on integrating a school of pharmacy within an osteopathic college campus.

Should pre-candidate status be received from the ACPE, and initial approvals received from the Middle States Commission on Higher Education, the Pennsylvania Department of Education and the Georgia Nonpublic Postsecondary Education Commission, recruiting of students will commence. The first class of 75 students could begin study in August 2010.

“As with our Georgia-based school of osteopathic medicine and biomedical sciences graduate programs, we will recruit from Georgia and from southern states and establish clinical training sites in the south,” says Dr. Okamoto. “Our hope is to retain our graduates for the practice of pharmacy in Georgia and in the south.”

Saul Jeck, DO, Receives Lindback Award

Saul Jeck, DO, professor and chair, obstetrics and gynecology, has received the Christian R. and Mary F. Lindback Award for Distinguished Teaching for the second time in his career at PCOM. The Lindback Award recognizes academic excellence and outstanding teaching and is one of the most prestigious awards conferred to an instructor in higher education. Dr. Jeck, the recipient of many professional awards, joined PCOM in 1990.

Kudos

posters, a paper and a workshop at the National Association of School Psychologists meeting in Boston.

Michael Kuchera, DO, professor and director, OMM research, was inducted as an inaugural fellow and chair in the National Academy of Osteopathic Medical Educators.

George McCloskey, PhD, associate professor and director, school psychology research, coauthored the book Assessment and Intervention for Executive Function Difficulties.

Rosemary Mennuti, EdD, professor and director, school psychology programs, George McCloskey, PhD, associate professor and director, school psychology research, and Tita Baldino, PsyD ’08, presented the poster, “Mindfulness: Extending Treatment for Early Onset Obsessive Compulsive Disorder/ Tourette’s Syndrome” at the July 2009 First World Congress on Positive Psychology. Dr. Mennuti and Ray Christner, PsyD, clinical assistant professor, psychology, coedited the book School Based Mental Health: A Practitioner’s Guide to Comparative Practices.

Dianzheng Zhang, PhD, assistant professor, biochemistry/molecular biology, coauthored the poster “Activity of GMP Grade Adenovirus GM-CAIX: A Novel Molecular Targeted Vaccine Therapy for Kidney Cancer” that was presented at the 2009 American Urology Association Annual Meeting in Chicago. Dr. Zhang was also interviewed by journalist Maryann Hammers. His comments and suggestions for resveratrol consumption were cited in an article published in the March issue of the online magazine Delicious Living.
Good estate planning with a will and keeping other important documents up to date ensures that your funds, property and personal effects will be distributed according to your wishes after your death. Why leave the state to decide who will benefit from your life-savings?

Time seems to pass quickly, and personal situations change just as fast. Some recent modifications in federal and state tax laws may directly affect your estate, executor and benefactors. A good estate plan can save tens or even hundreds of thousands of dollars in taxes and gives you the certainty of knowing how your estate will be distributed.

For more information on wills, estate planning and planned giving opportunities, contact Scott Righter, special gifts officer, at 215-871-6120 or scottr@pcom.edu.
Through SOMA, Dr. Patel also became involved in AOA, serving as a student member of the Committee of Governance and Organizational Structure where she reviewed policy for proposed development of new AOA departments and divisions. She also served as an alternate delegate to the AOA House of Delegates. Since then, many AOA national board of trustees members have come from GA–PCOM.

“My classmates and I established a tradition of national involvement in the professional development of osteopathic medicine, and I encourage GA–PCOM students to continue to get involved,” she emphasizes. “It will help them realize that the responsibility of a physician isn’t just taking care of patients. It also includes being involved in issues such as health care reform and community service.”

Community service is another arena where Dr. Patel has shown leadership. She volunteered for the national Unity Project where she developed and led workshops for women and children living in domestic violence shelters. She promoted men’s health issues as a medical volunteer with Community Health and Men’s Promotional Summit (CHAMPS), and she served as a translator for Indian subcontinent languages at a local hospital emergency department.

During a medical mission trip to the Dominican Republic, Dr. Patel experienced the rewards of providing care to people who live in poverty and have no access to health care. This solidified her choice to specialize in emergency medicine. “I discovered that I’m interested in improving health care for people in all walks of life,” she remarks. “I will have the opportunity to do that in emergency medicine.”

As she begins her residency at Botsford Hospital near Detroit, Michigan, Dr. Patel says, “I hope that my efforts have left a positive impression that will benefit students and the College now and in the future.”
A motorcycle accident victim patient must be transferred from a community hospital ER to a trauma center 70 miles away because no on-call specialists are available to provide the needed care.

An entire family arrives at a hospital ER seeking care for fevers and coughs because their primary care physician doesn’t have any appointments available.

An unemployed carpenter suffers at home for three weeks with a kidney stone before finally seeking care at the ER because he lost his health insurance when he lost his job.

**THESE ARE TRUE STORIES.**

Thousands more like them play out daily in hospital emergency departments nationwide, reflecting the many challenges our country faces in maintaining access to emergency medical services in today’s health care environment.
Emergency Medical Treatment and Labor Act (EMTALA). This unfunded government mandate ensures that every emergency department patient will be examined and stabilized, regardless of insurance status or ability to pay.

In 2006, the Institute of Medicine (IOM) issued a landmark report, “The Future of Emergency Care in the United States Health System,” outlining key challenges to be addressed. The IOM reported that ED crowding is an all-too-common problem; patients are often boarded, or held in the ED until an inpatient bed becomes available, sometimes for 48 hours or more; and ambulances are frequently diverted from overcrowded EDs to other hospitals that may be further away and may not have optimal services.

In addition, critical specialists, such as neurosurgeons, orthopedic surgeons, plastic surgeons and ear, nose and throat specialists, are often unavailable to provide emergency and trauma care. In the IOM survey, 75 percent of hospitals reported difficulty finding specialists to take emergency and trauma calls, largely because these specialists often treat emergency patients without compensation and face higher medical liability exposure when they provide on-call coverage.

Often called the nation’s health care safety net, emergency departments are becoming frayed around the edges as they serve the needs of a patient population that has increased dramatically in recent years with no signs of slowing down. The current economic crisis has triggered a significant rise in the number of people who are uninsured or underinsured. In addition, the population is aging, and older patients are more likely to visit the emergency department. At the same time, primary care physicians are stretched to the maximum as they try to maintain access to care for their patients. Sometimes they simply cannot, and patients must turn to the ER for care.

Over the past decade, the number of patients coming to emergency departments annually has increased 32 percent, from 90.3 million to 119.2 million, according to the American College of Emergency Physicians (ACEP) National Report Card on the State of Emergency Medicine, 2009 edition. At the same time, nearly 7 percent of the nation’s hospital emergency departments have closed, reducing the total number from 4,108 to 3,833, due in part to low reimbursement rates from public and private insurers, and high proportions of uncompensated care as a result of the federal

In recommendations issued as part of its 2009 National Report Card, the ACEP called for national health care reform and legislative action to strengthen emergency departments and improve access to care. [See complete recommendations in sidebar on page 11.] Among the recommendations is passage of the Access to Emergency Medical Services Act of 2009. Introduced to Congress in February 2009, this legislation calls for the creation of a national bipartisan commission to study factors affecting the delivery of emergency care. The companion House and Senate bills also call for additional payment through Medicare to all physicians who provide EMTALA-related care, including on-call specialists. In addition, the legislation calls for the Centers for Medicare & Medicaid Services to develop standards, guidelines and measures to address hospital boarding and ambulance diversion.

While Congress and President Obama consider national health care reform alternatives, hospital emergency departments are working on process changes and other solutions to improve access to emergency care in the communities they serve.
Physician Assistants Ease Burden

Emergency medicine physician assistants see nearly 9 percent of emergency department patients nationwide, according to the National Hospital Ambulatory Medical Care Survey completed in 2006 by the Centers for Disease Control and Prevention.

At Underwood Memorial Hospital in Woodbury, New Jersey, physician assistants take a large burden off the acute care portion of the ED, according to Gregory Wanner, MS/PA-C ’05. “We often work in the fast track area which represents roughly 35 percent of the patients who come to the ED,” he says. “We also assist in the evaluation and treatment of patients in the acute care area.”

Over the past three years, the number of physician assistants in Underwood’s emergency department has more than doubled, from two to five. Mr. Wanner anticipates that similar growth will continue nationwide. “Physicians are very enthusiastic about physician assistants because we help to improve efficiency and allow them to see patients faster.”

FINDING ANSWERS

“The problem of overcrowded emergency departments is complex,” says Douglas McGee, DO ’87, medical director of Albert Einstein Medical Center’s department of emergency medicine in Philadelphia, and a past president of the ACEP’s Pennsylvania Chapter. “We are not dealing with one single problem that can be fixed with one single solution. Each institution has its own unique set of issues to address.”

Many hospitals have expanded their emergency department facilities and staffs in recent years, some doubling in size. While this helps to reduce wait times and enable patients to be seen faster, it is only one part of the ED throughput equation. When ED patients need to be admitted and no open beds are available in the hospital, a bottleneck occurs that can lead to boarding in the ED for hours, sometimes days.

Einstein takes a hospital-wide approach to the problem of ED overcrowding. “We operate from the paradigm that a patient who comes to the emergency department is the hospital’s patient, not the emergency department’s patient, and we need to find a way to care for them in the most efficient manner,” emphasizes Dr. McGee, who directs one of the busiest EDs in Philadelphia, a Level I trauma center with 40 emergency medicine physicians, 48 residents and 12 physician assistants, who see 87,000 patients annually.

Physician assistants play a key role in the emergency department at Einstein, seeing patients with moderate acuity under the supervision of an attending physician. Last fall, Einstein initiated an 18-month physician assistant emergency medicine residency program, a concept studied and endorsed by the ACEP. It is the only such program in Pennsylvania, and one of only five nationwide. “The focus of our residency program is to get PAs up to speed in emergency medicine faster than we could with on-the-job training only. Ultimately, this will improve throughput,” says Dr. McGee, who also serves as chief academic officer for Albert Einstein Health System.

To speed patient throughput, Einstein has also implemented a passive electronic patient tracking system in the ED. All patients and staff wear badges so patient movements can be tracked through the emergency department via sensors in the ceiling. “This system provides data that allows us to analyze various parts of the encounter, identify the bottlenecks and try to solve them,” says Dr. McGee. “For example, we’ve instituted bedside triage and registration to save time. We send 200 patients home from the ED each day, so if we shave off 10 minutes from..."
At the hospital level, a multidisciplinary committee dedicated to improving patient flow instituted a computerized bed tracking system that facilitates a coordinated effort between the nursing staff, housekeeping staff and admissions office so that patients waiting in the ED can be assigned to beds as soon as they become available.

“Our hospital has done a great job at reducing hospital length of stay, which essentially makes your hospital bigger by providing more open beds,” relates Dr. McGee. “We’ve been successful because our hospital administration has made ED throughput a priority.”

Three years ago, Einstein expanded its emergency department facilities to accommodate 54 patients. “We expected to grow to our new capacity within five years of the expansion, but we reached it within 18 months,” Dr. McGee notes. “We’ve never been busier.”

A few miles down Broad Street, Temple University Hospital’s emergency department handles more than 90,000 patients annually and expects to see even more patients with the recent closure of nearby Northeastern Hospital this year, according to David Wald, DO ’92, an attending physician and director of undergraduate medical education in Temple’s department of emergency medicine. To reduce overcrowding, Temple’s ED has doubled the hours of the non-urgent care walk-in center from eight to 16 hours daily, and established an aggressive hospitalist program with internal medicine specialists staffing a 25-bed inpatient unit. “We admit lower risk, mild to moderately ill patients on the hospitalist service,” says Dr. Wald. “Since they represent 20 to 25 percent of ER admissions, this has accelerated throughout.”

Bedside triage and registration has helped reduce the walk-out rate by 50 percent in combination with standing orders that the nursing staff can implement immediately after calling an attending physician. The use of bedside ultrasound has helped to reduce the time and staff needed for diagnosis and treatment of some conditions.

To help prevent major bottlenecks, Temple has also established an escalation grid for staffing. “If we have more than 11 admitted patients in the ED, and/or more than four patients admitted to the intensive care unit, we escalate calls to the hospital administrator on call who adjusts staffing patterns to open up more units and move the admitted patients out of the ED,” explains Dr. Wald.

“If we get seven or eight critically ill patients in the space of a few hours, we may request ambulance diversion, but this is only a request,” he emphasizes. “If no other nearby hospital has the capacity to take them either, we cannot turn them away. This is true for any ED.”

To help smaller community hospitals who have limited subspecialty surgical support for trauma patients, Temple’s department of emergency medicine initiated a hospital-based critical care transport service to provide emergency transfers. Using this service, patients are brought to Temple’s ED by ambulance or medical helicopter two or three times daily.

In South Carolina, smaller hospitals such as Waccamaw Community Hospital and Georgetown Memorial Hospital, benefit from similar transport services, according to Scott Coradi, DO ’01, who serves as director of the emergency department for Georgetown, one of the two facilities in the Georgetown Hospital System. Located 20 miles south of Myrtle Beach, a busy tourist resort area, neither hospital has the specialists required for trauma center designation, so they must transport trauma patients 70 miles south to the nearest Level I trauma center in Charleston, South Carolina.

Dr. Coradi notes that the hospital system is considering the pursuit of trauma management at the hospital itself for trauma patients from Myrtle Beach and surrounding areas, and that they are considering the potential for telemedicine or video consultation with trauma specialists at Level I trauma centers in other states.
Primary Care Physicians Are Key

The impact of primary care physicians on emergency care cannot be overemphasized, according to Dr. McGee. “One in five patients comes to the emergency department for relatively minor problems because they have to wait so long to see their primary care physician, sometimes as long as four to six weeks,” he says. “It’s clear that we need to find a way to provide better access to primary care.

“In addition, emergency departments have become acute diagnostic centers,” he continues. “Primary care physicians send patients to us when they feel immediate testing is essential. The problem is that they don’t have the assets to take care of patients the way we do.”

“Many who work in the trenches advocate for some form of universal health insurance,” notes Dr. Wald. “But even if the president infused billions of dollars into the system so everyone has health insurance, we still don’t have enough primary care physicians. That’s why patients who need follow-up care after an ER visit sometimes wait for months to see a doctor and often fall through the cracks.”

center designation and is actively working to get the required specialists in place while constructing a new hospital in response to rapid growth in the community. “The hospital system has initiated a call pay system in which trauma specialists are now being paid to be on call, and this has helped us to recruit some of the specialists we need,” says Dr. Coradi.

In recent months, Waccamaw and Georgetown have seen their ED patient volume increase by as much as 20 percent due to the economic downturn. “More people are using the ER because they’ve lost their jobs and health insurance,” observes Dr. Coradi. “Sometimes whole families come in for care. We added a fast track area that has definitely helped to decrease the number of patients who leave without treatment. We’ve also increased the use of point-of-care testing such as cardiac markers and handheld analyzers to save time.” A hospitalist system established in 2007 also helps to ease the burden.

Further up the Eastern seaboard in Atlantic City, New Jersey, AtlantiCare Regional Medical Center’s Emergency Department faces the challenge of serving the resident population of this tourist city as well as more than 35 million tourists who visit annually. “As the region’s only designated trauma center (Level II), we have to be prepared for major catastrophes such as a tourist bus crash as well as more run of the mill emergent care issues,” says Thomas Brabson, DO ’89, medical director of AtlantiCare’s Emergency Department which sees 99,000 patients annually at two facilities.

Dr. Brabson credits a team approach between the ED and hospital administration with their success in handling overcrowding issues. “Our hospital administration understands that an open bed equals a physical bed plus a nurse to staff it,” emphasizes Dr. Brabson, who currently serves as president of the American College of Osteopathic Emergency Physicians. “They have responded accordingly with appropriate staffing. When necessary, we use hallway beds to enable patients to move more quickly from the ED to the appropriate floor for the care they need.”

Dr. Brabson worries about ER patients who don’t get follow-up care because they lack a primary care physician. This is of particular concern for patients who are homeless. Three years ago, AtlantiCare opened a unique rescue mission in Atlantic City called “HealthCare for the Homeless,” with partial funding through a government grant. At this innovative shelter, an osteopathic physician and nurse practitioner from AtlantiCare pro-
Dr. McGee believes that PCOM alumni will help find solutions. “PCOM has been very successful at training leaders in emergency medicine, especially in the areas of political advocacy and governance,” he emphasizes. “Many PCOM alumni serve in important leadership roles in various state chapters and on boards of directors of emergency medicine organizations. John Becher, DO ’70, founded the Albert Einstein Medical Center emergency residency program, which is nationally recognized and has produced many leaders.* When you combine that with PCOM’s expertise in training primary care physicians, solutions are bound to emerge.”

In the small state of Delaware, emergency departments face the challenge of an exploding population coupled with a limited number of emergency medicine physicians and trauma specialists, according to Kelly Abbrescia, DO ’94, a board certified emergency medicine physician at Kent General Hospital in Dover, one of two hospitals in the Bayhealth Medical Center health system. “We’ve been inundated with an influx of military personnel, retirees and others moving into the area,” she says. “Many people don’t have a primary care physician and some don’t have insurance. As a result, those with serious conditions such as diabetes or high blood pressure often suffer complications that bring them to the ER.”

Although many urgent care centers have sprung up in the area, they haven’t reduced the overwhelming demand on the ED, which sees nearly 50,000 patients annually. “Sometimes patients wait as long as six hours to be seen,” says Dr. Abbrescia. “We feel terrible when that happens.”

To improve throughput, the hospital has begun construction of a brand new ED facility to be completed by late 2011 with 40 beds plus a 23-hour observation unit for patients who don’t necessarily need to be admitted but require further observation before discharge. In the meantime, the ED has expanded into the same day surgery area, and a discharge area has been opened where patients can wait for someone to take them home. Technology has also come into play with two huge electronic LCD boards that track patients’ progress through the ED and flash continuously when a patient is ready for discharge to speed the process.

Expanding staff is proving to be more of a challenge. “It’s difficult to attract board certified emergency physicians to Dover. We find that most would rather live in a metropolitan area near a big city,” explains Dr. Abbrescia. “It’s also a challenge to find trauma specialists who are willing to be on call.”

Physician assistants have helped to ease the burden. Their shifts have been expanded and they run the ED’s fast track area. Under supervision, they also assist in triage by pre-ordering tests and treatments for the physicians.

* All PCOM alumni featured in this article completed residencies in Einstein’s program.
Reunions celebrate a vital connection and promote a continuity among the past, the present and the future.

The Reunion Roundtable that follows attests to marked changes that have occurred during this century in the various areas of the College. At the same time, these alumni voices affirm an unaffected mission guided by the osteopathic medical tradition, concept and practice.

Who were among the most respected mentors of the time?

**Dr. Steingard:** “Angus Gordon Cathie, DO ’31. I recall the first day of anatomy class when Dr. Cathie came into the classroom and in full color—with both hands—sketched the structure of the shoulder. I thought I’d never make it through medical school. Other respected faculty included David Heilig, DO ’44 [osteopathic principles and techniques]; Lester Eisenburg, DO ’38 [obstetrics and gynecology]; Andrew DeMasi, DO ’47 [obstetrics and gynecology]; William Baldwin, Jr., DO ’40 [physiology and pharmacology]; Spencer Bradford, DO ’42 [physiology and pharmacology]; and George Guest, DO ’36 [psychiatry].

**Dr. Greenspun:** “Drs. Angus Cathie and Baldwin were among the pioneers in anatomy and physiology. I also remember Edgar Holden, DO ’22 [dean], and how he would treat every illness with osteopathic manipulation (pneumonia, diabetes, etc.).”

**Dr. Rex:** “Ruth Waddel Cathie, DO ’38, first chair of the basic science department, was a great mentor for female medical students. Widowed at the time, she balanced a professional career with raising a family. Eleanor Masterson, DO ’57, director of the clinics, was also of great support during our first clinical experiences.”

**Dr. Edelstein:** “Earl Trievel, DO ’68, our instructor for gross anatomy and neuroanatomy. An excellent and proficient lecturer, he was moreover a true artist, doing with colored chalk on the blackboard what Michelangelo did to the ceiling of the Sistine Chapel. As successor to the late Dr. Cathie, he had a very tough act to follow (or so we were told by the upperclassmen).”

**Dr. Debb:** “William Dickerson, DO ’54, was the embodiment of Harrison’s Principles of Internal Medicine—a god of internal medicine for students and clinicians. And Daniel Wisely, DO [surgery] (“Don’t ever let the sun
go down on an abscess’) and Emanuel Fliegelman, DO ’42 [obstetrics and gynecology], were great mentors who influenced a generation of osteopathic physicians. Dr. Fliegelman was the reason I went into OB/GYN and influenced how I mentor young physicians today.”

**DR. GOLD:** “Domenic DeBias, PhD [physiology], and John Simelaro, DO ’71 [internal medicine], had the greatest impact on me. They were very supportive and easily approachable in addition to being superior teachers.”

**DR. LOVITZ:** “I believe that our class had caught the end of a golden era at PCOM, although I am sure that each class believes this of its own year. The Class of 2004 was fortunate to experience the anatomy teaching of Robert Niewenhuis, PhD, and the zany classroom performances of beloved radiology professor, the late Robert Meals, DO ’56. For me personally, Richard Kriebel, PhD [neuroscience, physiology and pharmacology], was a great mentor, and I will always be grateful to Peter Adler-Michaelson, DO ’81, for his comprehensive OMT instruction. David Addley, DO ’96, who supervised me in cardiology during my clinical clerkship and internship, provided an example of the compassionate manner with which we should all practice medicine.”

### Describe your campus life experience.

**DR. STEINGARD:** “The Class of 1954 was very cohesive. There was a balance between academics and activities that promoted individual as well as group achievement. Some of my fondest memories include games of hearts/cards during down times in the clinic and at lunchtime. I also recall the thrill of living in Philadelphia. Lots of the guys would work at the ballpark after lecture hours. I still chuckle when I think about the day classmate Abe Price was there, selling
Anakwe, DO ’98, PhD [family medicine], who made me feel at home during my early days at the College. I was a member of the Phi Sigma fraternity, the Student National Medical Association and the Pathology Club.”

DR. LOVITZ: “My family and friends were jealous of how I ran on the Activities Center treadmills in between Dikembe Mutombo and Allen Iverson while Larry Brown handed me an extra bottle of water. My PCOM classmates and I enjoyed our campus encounters with Maurice Cheeks, Pat Croce and other members of the Philadelphia 76ers team.”

What were your initial clinical training experiences like as a student?

DR. GREENSPUN: “During the 1950s, the majority of the College’s curriculum was didactic in nature—and competitive with other Philadelphia medical schools. However, there was a deficiency in our clinical experience. We had very little formal patient contact even in our third and fourth years. Many of my classmates and I used to secretly work in allopathic clinics for experience; I can recall spending many hours in a well-baby clinic.”

DR. PODOLSKY: “Our first clinical encounters as third- and fourth-year students were as ‘booth doctors’ or as patients called us, ‘boof doctors,’ at the 48th Street Clinic. This experience moved our education from the instructive into the real. We also had clinical rotations at North Center hot dogs. He was approached by a patient from the clinic: ‘Doctor, what are you doing here?’”

DR. EDELSTEIN: “The Class of 1974 was one of the last classes to spend its didactic time at the 48th Street campus, including its anatomy lab, which was quite primitive by today’s standards. The strict classroom dress code—shirts and ties, short white coats—was considered somewhat extreme compared with the other medical schools in the city. But the note-taking system and the overall feeling of class camaraderie was unique to PCOM. Regarding extracurricular campus life, I enjoyed the ‘fraternity experience’ as a member of LOG at the old campus. I rented an apartment all of three to four doors down from the LOG house at 46th & Locust. I can recall many of our ‘mixers,’ as they were called then, going late into the night at the old frat house, allowing us to blow off steam after the long days in the classroom.”

DR. DAVIDSON: “I was a proud member of PCOM’s 1976 championship basketball team (Division III caliber team). President Rowland loved the game and liked to recruit solid ‘doctor athletes.’ Our team could boast a roster that included Kevin Furey, DO ’78; James Oxley, DO ’78; and John McPhilemy, DO ’78 (the current team physician and orthopedic surgeon to the Philadelphia 76ers).”

DR. OPARA: “PCOM’s campus fraternities and organizations provided me with access to good mentors like Sunny Ekwunife, DO ’97 [family practice], and Onyema Anakwe, DO ’98, PhD [family medicine], who made me feel at home during my early days at the College. I was a member of the Phi Sigma fraternity, the Student National Medical Association and the Pathology Club.”

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Hospital (Susquehanna Avenue and 20th Street), Harbor Light Clinic (8th and Vine Streets), and Embreeville State Mental Institute.”

DR. EDELSTEIN: “I felt truly transformed into a competent, confident physician during clinical and away rotations. In particular, my rotation in rural Laporte was an ultimate learning experience. Although I was a newlywed at the time and the nation was in the midst of the first of many gasoline shortages, the guidance James Witt, DO ’69, provided helped to shape my lifelong approach to patient care. In addition, I recall that the accommodations in Laporte weren’t too hard to take; as students we virtually had a whole hotel to ourselves, staffed with a chef whose culinary art specialized in old-fashioned country recipes.”

DR. DAVIDSON: “I discovered through my clerkship experiences—and later my residency—that my skills were on par with my MD counterparts when it came to patient care. I had rotated through a number of smaller community hospitals that encouraged hands-on learning. I recall scrubbing—early on in my training—a case with a fellow who had completed his urology training at Mass General.”

DR. DEBBS: “I spent a lot of time at Lancaster Avenue Healthcare Center and loved it. For the first time, my classmates and I felt like we were real doctors, making our own decisions about patient care (of course, we had supervision). The experience provided us with exceptional hands-on experience and skills in a challenging urban environment.”

DR. OPARA: “Prior to clinical experiences, the College’s standardized patient program gave me an opportunity to learn and to be evaluated in a simulated and ‘safe’ environment. By presenting case histories, conducting physical exams, and working through emotional situations, I learned to look at patients as full human beings—not just a series of organs or diseases. The program was the basis for the good relationships I enjoy with my real patients today.”

DR. WILNER: “I completed my pre-doctoral practicum at the Center for Brief Therapy at PCOM and my internship at an urban PCOM Healthcare Center. The experience validated the model of a team approach among psychologists, physicians and patients. It also exposed me to a patient base that faces socio-economic challenges.”

What were the challenges of training to become an osteopathic physician? Did your class struggle for parity with allopathic physicians? Do you encounter these obstacles today?

DR. STEINGARD: “I have found that when health care practitioners are familiar with the similarities and differences between their treatment approaches, they are not prejudiced. However, this is not always the case with the public. I have found the greatest obstacle to being an osteopathic physician is patient education. Once patients have an
How would you compare your knowledge/training/skills to other medical school graduates?

DR. DANSHAW: “The challenging aspect of osteopathic medicine was incorporating all the sub-specialties in order to become a productive and effective primary care physician/general medical officer in the U.S. Army. Since I was in the Health Professions Scholarship Program, several of my medical rotations were at Tripler Army Medical Center, Honolulu, Hawaii, and Walter Reed Army Medical Center, Washington, D.C. There I discovered that I was well prepared for internship and residency with equal training as my allopathic colleagues. At William Beaumont Hospital, El Paso, Texas, I served as chief of anesthesia with several DO and MD anesthesiologists working together in the department.”

DR. DEBBS: “When I started at U. Penn in 1994, it was obvious that PCOM had prepared us with a depth of experience beyond what many allopathic schools provided. I wanted to be a family doctor, and the best preparation for holistic, primary care was at osteopathic schools. When I discovered my calling to become an OB/GYN, and later, a maternal fetal medicine specialist, my PCOM experiences and training provided me with great opportunity.”
DR. LOVITZ: “My PCOM training prepared me for my residency in neurology. Many of the physicians with whom I have worked during internship and residency have commented on the great bedside manner, clinical professionalism, and workmanship of their osteopathic—and PCOM, in particular—trainees.”

Who/what influenced your application and admission to PCOM?

DR. GOLD: “My cousin Richard Cohen, DO ’76, and Saul Jeck, DO [professor of obstetrics/gynecology, PCOM], influenced my decision to attend PCOM. I interviewed at various medical schools, but I found the students at PCOM to be happy, friendly, and mutually cooperative. There seemed to be a great sense of community at PCOM—a very different environment compared to the other medical institutions I considered. As an alumnus, I still discover this camaraderie, this sense of brotherhood, whenever I meet a fellow PCOM graduate.”

DR. LOVITZ: “Prior to medical school, I worked as a research assistant in the Epilepsy Center at Thomas Jefferson University Hospital, where two of the fellows were osteopathic physicians. One of the fellows, Kelly Geary, DO ’94, completed her medical training at PCOM. She impressed me as a neurologist. Dr. Geary introduced me to osteopathic medicine, the osteopathic medical approach, and her alma mater—now, my alma mater.”

DR. WILNER: “Already a licensed psychologist, I aspired to obtain my doctorate. I had a vast interest in the body-mind-spirit connection and psychotherapy. When I talked with Art Freeman, EdD [clinical professor], and Robert DiTomasso, PhD [professor and chair], about my ambitions, PCOM’s Clinical Psychology program felt like a good fit for me. I was impressed by the accessible faculty, and the philosophy of the approach to learning—the blend of interaction and independence, of psychology and medicine.”

Is there one word that best describes your PCOM experience?

DR. PODOLSKY: “Two words: enjoyable and difficult. I enjoyed my four years at PCO. The College prepared me for practice.”

DR. DEBBS: “Unparalleled.”

DR. DANSHAW: “One word to best describe my PCOM experience is perseverance. PCOM required strong resolve and vigilance in the practice of medicine. Such a philosophy remains an essential part of my current interventional pain practice.”
Sometimes a person inspires others to do their best, not just while that person is living but long after he or she is gone from this world. Such is the case with the late Simmy Ginsburg, the much beloved wife of the late Harry Ginsburg, DO ’42. Mrs. Ginsburg was an exceptionally loving soul and an extraordinarily intuitive woman who sensed when people needed support and encouragement, and gave willingly of her time, energy and love to fill that need. She was kind and compassionate to everyone she met, and her family, friends and acquaintances were the beneficiaries of her deeply caring heart.

“My mother was a very humble person. She did things very quietly but she made a real difference in the lives of others,” says psychologist Susan Ginsburg Apollon, the Ginsburgs’ daughter. “When people spoke to my mother, she listened with her whole heart. She was a role model without even realizing it, and she deeply influenced the way my father practiced medicine. He came to appreciate more than ever the importance of healing the soul as well as the body, looking beyond the physical symptoms to see what is truly hurting in a person's soul.”

Dr. Ginsburg was known and loved by generations of his patients as an old-fashioned family physician who really listened and cared. In practice for more than 50 years at his Broad and Olney office in Philadelphia, Dr. Ginsburg’s compassion for others was also reflected in his exceptional philanthropy to many educational, religious and medical institutions, including PCOM which has been the recipient of many generous gifts.

After his wife passed away, Dr. Ginsburg sought a way to honor her humanitarian efforts by acknowledging those whose lives reflect her generous and caring nature. In 1998, he and his family established The Simmy Ginsburg Humanitarian Award to be presented each year to “a graduating student who has shown himself or herself to be not only a strong and conscientious osteopathic medical student but also one who has demonstrated integrity, kindness, compassion, empathy, a love of life and who has had a positive impact on the lives of his or her fellow students, medical colleagues and patients.”

“The essence of this award is how powerful the energy of love and compassion really are,” notes Mrs. Apollon. “When you choose to live with love, you can make a huge difference in the lives of others. This is the art of medicine. You must heal the soul as well as the body. The students who win this award are fully aware of this, they live it, and they are great teachers for us all.”
2009 Award Recipient: Amanda McKenna Lee, DO ’09

Amanda McKenna Lee, DO ’09, this year’s award recipient, is the true essence of Simmy Ginsburg, according to Mrs. Apollon. “It is in every cell of Amanda’s being to be compassionate and kind,” she observes. “Our award selection committee was impressed with the fact that this young woman grew up serving humanity and continues to do so.”

As a young child, Dr. Lee worked with her parents helping the poor in the urban slums of Venezuela. After returning to the U.S., she served for two years in a Washington, D.C., homeless shelter. While at PCOM, she taught young mothers in North Philadelphia how to better care for their children as part of the Community Women’s Education Project, and she volunteered at summer camps for disabled children, among many other humanitarian activities.

“Amanda’s intentions are to help empower those who need empowerment. In some cases, she helps people survive, in others she helps heal, and she does it all with the greatest compassion and love, as well as expertise,” relates Mrs. Apollon. “She lives what she feels, and she always puts others before herself. She is truly humble and selfless—an exemplary humanitarian who encourages those around her to be the best they can be.”

As Dr. Lee begins a residency in pediatrics, she reflects, “My experiences opened my eyes to the harsh reality of health care for the urban poor. The many people I worked with are sustaining reminders of why I am meant to be a doctor: to provide the indigent and critically underserved populations with the medical care they deserve. My role as a pediatrician will be one of a healer, a teacher and an advocate.”

Enduring Inspiration

The Simmy Ginsburg Humanitarian Award continues to inspire those who have been honored by it. “I still have the award hanging in my office,” states Aaron Weiss, DO ’99, a pediatric oncologist at The Cancer Institute of New Jersey at Robert Wood Johnson Hospital in New Brunswick, New Jersey. “I try to live up to its principles every day.” In addition to caring for and about his young patients, Dr. Weiss is conducting research that he hopes will translate into improvements in childhood cancer survival.

“This award opened my eyes to the fact that the human spirit is sometimes stronger than the best medical knowledge,” says Joseph Roglieri, DO ’01, a nephrologist in the Troy-Albany, New York region. “Perhaps those little gestures of compassion and kindness may go further than one could imagine.”
Class of 1950
Grace H. Kaiser, DO, Phoenix, AZ, was recognized by the Lancaster Osteopathic Health Foundation with a scholarship named in her honor. Dr. Kaiser’s lifelong work and service will be commemorated annually, as the scholarship will be awarded to future osteopathic physicians.

Class of 1954
Class Agent: William G. McDowell, DO
Sidney Russak, DO, Altadena, CA, is professor emeritus of the Department of Psychiatry and Behavioral Sciences at the University of Southern California, Keck School of Medicine.

Class of 1957
Class Agents: Richard D. Hockstein, DO, and Marvin L. Rosner, DO
Lawrence E. Miller, DO, Chester, NJ, and his wife, Diane, celebrated their 50th wedding anniversary on August 3, 2008.

Class of 1962
Class Agents: James H. Black, DO, and Robert S. Maurer, DO
Alan J. Miller, DO, Elkins Park, PA, was appointed to the Bucks County Board of Health and to the board of directors of the Transportation Management Association.

Class of 1967
Class Agents: John F. Callahan, DO, and Allan N. Fields, DO
Roy A. DeBeer, DO, Far Rockaway, NY, was the recipient of the Doctor of the Year Award presented by St. John’s Episcopal Hospital. Dr. DeBeer is an attending physician in the internal medicine department at St. John’s.

Class of 1971
Class Agents: Carol A. Fox, MM (honorary class member); Pat A. Lannutti, DO; and John P. Simelaro, DO

Class of 1973
Class Agent: Herbert J. Rogove, DO
Joseph Vitale, DO, Wilmington, DE, was named one of the “Top Doctors in Pediatrics” in the October 2008 issue of Delaware Today.
Class of 1974
Class Agent: Marc Mintz, DO
Richard G. Tucker, DO, Mount Laurel, NJ, maintains a private practice in obstetrics and gynecology in Mount Laurel and Manahawkin. He is a clinical associate professor of obstetrics and gynecology at PCOM. He was also named to the American Osteopathic Association’s Mentor Hall of Fame.

Class of 1975
Class Agent: Jon J. O’Brien, SJ, DO
James F. Quigley, DO, Carlsbad, CA, was named one of the “Top Doctors in Pediatrics” in the October 2008 issue of the San Diego Magazine.

John A. Saia, DO, Mays Landing, NJ, was installed as president of the medical staff at AtlantiCare Regional Medical Center. Dr. Saia is a cardiologist with Associated Cardiovascular Consultants of Hammonton.

Class of 1977
Class Agent: H. Sprague Taveau, IV, DO
Warren M. Cohen, DO, Millsboro, DE, was appointed medical director of radiology at Nanticoke Health Services in Seaford.

Class of 1978
Class Agent: Lorraine M. DiSipio, DO
Cynthia A. Gabrielli, DO, Hockessin, DE, was named one of the “Top Doctors in Pediatrics” in the October 2008 issue of Delaware Today.

John J. McPhilemy, DO, Plymouth Meeting, PA, was profiled in an article titled “For 76ers, There’s Always a Doctor in the House,” which appeared in the February 25, 2009 issue of the Philadelphia Inquirer. Dr. McPhilemy has been the Philadelphia 76ers team doctor for 21 years. He is the coordinator of the team’s 11-person medical staff and a partner in the Philadelphia Orthopedic Group.

Class of 1980
Class Agent: Steven J. Fagan, DO
Nicholas Biasotto, DO, Elkton, MD, was elected president of the Medical Society of Delaware. Dr. Biasotto was named one of the “Top Doctors in Family Medicine” in the October 2008 issue of Delaware Today.

Ronda Karp, DO, Dresher, PA, joined the department of family medicine at Doylestown Hospital.

Class of 1981
Class Agent: Gerald E. Dworkin, DO
James C. Ferraro, DO, Phoenix, AZ, was appointed to the department of medicine and became vice-chairman of the medical education committee at Banner Estrella Medical Center in Phoenix.

Julia M. Pillsbury, DO, Dover, DE, was named one of the “Top Doctors in Pediatrics” in the October 2008 issue of Delaware Today.

Class of 1982
Class Agent: Anthony J. Silvagni, DO
Barry L. Bakst, DO, Centreville, DE, was appointed to the Health Care Advisory Panel by Governor Ruth Ann Minner of Delaware.

Katherine K. Feinstein, DO, San Diego, CA, was named one of the “Top Doctors in Pediatrics” in the October 2008 issue of San Diego Magazine.


Kevin A. Zacour, DO, Clarion, PA, had his article, “Tis the Season for Influenza,” published in the October 29, 2008 issue of The Gazette.

Class of 1983
Class Agents: Mary Ann DiBiagio, DO, and Darlene Ann Dunay, DO
Alfred Sassler, DO, Foster, KY, joined the medical staff at Our Lady of Bellefonte Hospital in Ashland. Dr. Sassler served as a medical officer in the United States Navy.

William E. Shiels, II, DO, Dublin, OH, was featured in the Chicago Tribune for leading a team of researchers who may have discovered a new form of self-mutilating behavior among teenagers.

Dr. Shiels is the chief of radiology at Nationwide Children’s Hospital in Columbus.

Timothy Speciale, DO, Williamsville, NY, was highlighted in an article titled “A Speciale Treatment Offered” in the January 2009 issue of the Lancaster Bee.

Class of 1984
Class Agent: Paul V. Suhey, DO
Elaine G. Pendrak, DO, Eagleville, PA, joined the Mercy Suburban Health Care System as a clinical preceptor in the Mercy Suburban Family Practice Residency Program in Norristown.

Class of 1985
Class Agent: Michael P. Meyer, DO
Jeffrey M. Bishop, DO, Royal Palm Beach, FL, was named Cambridge Who’s Who Executive of the Year in Medical Administration and Education. Dr. Bishop is chief medical officer and director of medical education at Wellington Regional Medical Center.

Stephen L. Zelenkofskie, DO, Center Valley, PA, was appointed senior vice president, clinical and medical affairs and chief medical officer of Regado Biosciences, Inc.

Class of 1986
Class Agent: John C. Sefer, DO
Philip Orons, DO, Wexford, PA, was the recipient of the Michael P. Federle Mentorship Award presented by the 2008 graduates of the University of Pittsburgh Medical Center’s Diagnostic Radiology Residency Program.

Nicholas J. Pennings, DO, Goshen, NY, was recertified by the American College of Osteopathic Family Practitioners.

Class of 1987
Class Agents: Elliott Bilofsky, DO, and Katherine C. Erlichman, DO
Sheila E. Mazda Davis, DO, Philadelphia, PA, is proud to announce that her clinic, the St. Catherine Laboure Medical Clinic, is the recipient of the GlaxoSmithKline 12th Annual Impact Award. Her clinic provides services to the uninsured and underinsured.

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Nancy D. Frezza, DO, Tyrone, PA, joined the emergency room staff at Tyrone Hospital. Dr. Frezza is board certified in both family medicine and pediatrics.

Mark A. Haggenjos, DO, Portland, IN, was named chief of staff at Jay County Hospital.

John F. Perri, DO, Chula Vista, CA, is currently a captain in the Navy Medical Corps and the program director for the Pulmonary/Critical Care Medicine Fellowship at the Naval Medical Center in San Diego. He was elected governor of the Navy chapter of the American College of Chest Physicians.

Alan D. Warrington, DO, Hockessin, DE, was named one of the “Top Doctors in Family Medicine” in the 2008 issue of Delaware Today.

Class of 1988
Class Agent: Eric M. Lipnack, DO
Stephen J. Kushner, DO, Newark, DE, was elected vice president of the Medical Society of Delaware.

Class of 1989
Class Agent: Judith R. Pryblick, DO
J. Steven Blake, DO, Philadelphia, PA, was highlighted in an article titled “New Mt. Airy Medical Facility Replaced Community Eyesore” which appeared in the Chestnut Hill Local.

Catherine C. N. Dowling, DO, Winchester, VA, was elected president of the medical staff at Winchester Medical Center. Dr. Dowling is the first DO and first woman to achieve this position in Winchester Medical’s 105-year history.

Class of 1990
Bruce I. Kilstein, DO, St. Charles, IL, had his first horror novel titled Destroying Angel published by Durban House Press.

Bernard King, DO, Thornton, PA, was named one of the “Top Doctors in Family Medicine” in the October 2008 issue of Delaware Today.

Class of 1991
Melissa Neumann Schwartz, DO, Elkins Park, PA, was interviewed in the Class of 1992
Class Agent: Gene M. Battistella, DO
Tasos Aslanidis, DO, Drexel Hill, PA, a board certified physician on staff with Kennedy Memorial Hospitals-University Medical Center, has been named medical director of the Balance Center at Kennedy in Stratford, New Jersey. Dr. Aslanidis oversees the coordination of medical care, quality and performance initiatives, as well as regulatory oversight.

“Getting Players Back in the Game”

Michael Weinik, DO ’85

The love of osteopathic medicine was instilled in Michael Weinik, DO ’85, when he was a college lacrosse player. Sidelined by a neck injury, he recalls “I couldn’t get relief from my pain from our MD, so my father suggested I see an osteopathic general practitioner. I did, and he got me back onto the playing field.” Well, as they say, what goes around comes around. As a team physician for the World Series Champions Philadelphia Phillies, Dr. Weinik now helps gets baseball players back on the diamond.

Dr. Weinik has played a role in the health care of most of Philadelphia’s professional sports teams including the Flyers, Eagles, Phantoms and Kixx, as well as the U.S. Rowing Team. It all started when an executive of the Philadelphia Flyers came to see him for back pain. The executive was scheduled for a spinal fusion when a physician friend suggested he see Dr. Weinik. “With an osteopathic approach and conservative treatment measures we were able to get him pain free without surgery,” recalls Dr. Weinik. Later that season the grateful executive asked him to see a member of the Flyers whose pain was not relieved by “conventional” medicine. Again, Dr. Weinik was able to resolve the player’s complaints. After that, he was recruited by orthopedic surgeons from the other teams.

Dr. Weinik believes that osteopathic medicine is ideal for treating sports injuries. “Pain can be difficult to diagnose,” he explains. “My osteopathic training allows me to diagnose injuries by a more thorough structural and functional examination unique to our profession. I treat the whole patient, not just what I see on the X-ray or the MRI, although they are certainly valuable. I teach my medical students and residents that there is still no substitute for a thorough physical examination.

“My goal as an osteopathic physiatrist is to make the patient as independent as possible. I don’t want them to be dependent on me for continuous treatment, I want them in control of their own condition over time. I identify and address their strength and mobility deficits and then they take charge of their care. OMT is a great adjunctive treatment to a healthy active lifestyle, but it is not a substitute for the patient’s own involvement in a daily wellness and exercise program.”

“Getting Players Back in the Game” section of the February 4, 2009 issue of Montgomery Newspapers, describing a new treatment, balloon sinusplasty for patients with sinusitis.

Christopher D. Still, DO, Winfield, PA, was the recipient of the Sanofi-aventis Fighting the Metabolic Syndrome Award presented by the American Osteopathic Foundation. Dr. Still was named director of Geisinger Health System’s new Obesity Institute.
Gregory M. Christiansen, DO, Chesterfield, VA, was elected secretary to the Board of Directors of the American College of Osteopathic Emergency Physicians.

Richard T. Jermyn, DO, Philadelphia, PA, was the recipient of the Purdue Partners Against Pain Award presented by the American Osteopathic Foundation.

Donna J. Loughlin, DO, Hammonton, NJ, was named assistant medical director at AtlantiCare’s Mission HealthCare in Atlantic City.

**Class of 1993**
Class Agents: Larissa F. Dominy, DO, and Clara Marie Higgins, DO

Elizabeth M. Reinoehl, DO, Belle Haven, VA, joined the medical staff at OB/GYN Associates in Nassawadox.

**Class of 1994**
Class Agent: Judith A. Gardner, DO

Teresa M. Joy, DO, Fairfield, PA, joined the medical staff at Mont Alto Family Practice.

Robb R. Whinney, DO, Janesville, WI, was appointed director of trauma services, surgical critical care and emergency surgical services at Mercy Hospital in Janesville.

**Class of 1995**
Susan E. Schaffer, DO, Richmond, VA, joined the medical staff at Bon Secours Medical Group Oncology Associates.

**Class of 1996**
Class Agent: Joanne Elena Hullings, DO

Nicole M. Alu, DO, Dallas, PA, was granted associate staff membership with clinical privileges in Ambulatory Primary Care at Peninsula Regional Medical Group’s Laurel Family Medicine practice.

Joshua E. Goldberg, DO, Phoenixville, PA, is a member of the medical staff at Pottstown Memorial Medical Center, department of surgery. Dr. Goldberg is performing a new procedure, Balloon Sinuplasty, a minimally invasive endoscopic technique for treating chronic sinus inflammation.

Johnny S. Gomes, DO ’96, Glen Alpine, NC, joined the medical staff at Frye Regional Medical Center.

Douglas D. Stern, DO, Roaring Spring, PA, joined the emergency room medical staff at Elk Regional Health System.

**Class of 1997**


Michael M. Langer, DO, Avon Lake, OH, was highlighted in an article which appeared in the September 21, 2008 issue of The Plain Dealer titled “Cardiologists Mend Hearts While Saving Lives.”

**Class of 1998**
Class Agent: James V. Lieb, DO

Daniel M. Golden, DO, Atlantic City, NJ, joined the medical staff at Shore Memorial Hospital. Dr. Golden will practice onsite at Shore Memorial’s Outpatient Diagnostic Testing Center in Egg Harbor Township.

**Class of 1999**
Class Agent: Tabatha L. Jeffers, DO

Vincent J. Carsillo, II, DO, Slingerlands, NY, was elected president of Capital District Renal Physicians in Albany.

John R. Spitalieri, DO, Fayetteville, NC, has joined the medical staff at Cape Fear Valley Neurosurgery.

**Class of 2000**
Class Agents: Kristen M. Lehmann, PA-C, and Christiana M. Petrillo, PA-C

Alessandro Bianchi, DO, Hockessin, DE, was named one of the “Top Doctors in Family Medicine” in the October 2008 issue of Delaware Today.

Christopher A. Davis, DO, Springfield, PA, was interviewed on the HealthCheck segment of WPVI’s Action News on February 2, 2009. Dr. Davis gave his professional opinion on special sneakers speeding up weight loss.

**Class of 2001**
Class Agents: Kenneth M. Andrejko, DO; Constance E. Gasda Andrejko, DO; Melissa H. Guarino, PA-C; and Nicole Miller, PA-C

Ian M. Baxter, DO, Seafood, DE, joined Nanticoke Memorial Hospital’s Women’s Health Center. Dr. Baxter specializes in obstetrics and gynecology.

Heidi R. Hodder, DO, Gillett, PA, joined the medical staff at Guthrie Medical Center in Pine City and Elmira, New York.

Louis M. Kareha, DO, Clarkes Green, PA, was a guest speaker at the 2009 NASCAR Security and Track Services Summit held in January 2009, in Concord, North Carolina. Dr. Kareha spoke on “Musculoskeletal Strain/ Sprain and the Role of Osteopathic Manipulative Treatment” and demonstrated OMT techniques. Dr. Kareha is the track physician at Watkins Glen (NY) International Raceway.


David C. Raab, DO, Paoli, PA, joined the medical staff at RSZ Orthopedics in Paoli. Dr. Raab has medical privileges at Phoenixville Hospital.

**Class of 2002**
Class Agents: Edward John Armbruster, DO; Heather C. Beraducci, PA-C; Steven Robert Blasi, DO; and Erin G. Wolf, PA-C

Brett B. Bender, DO, Orchard Lake, MI, joined the medical staff at Botsford...
Hobart J. Carr, DO, Sugar Grove, PA joined the medical staff at Family Medicine of Warrington.

Joshua S. Coren, DO, Hatboro, PA, was a recipient of the Emerging Leader Award presented by the American Osteopathic Foundation. Dr. Coren co-authored an article published in the January 2009 issue of the Journal of the American Osteopathic Association titled “Opioid-induced Endocrinopathy.”

Mark P. Diehl, DO, Dillsburg, PA, joined WellSpan Rheumatology’s Gettysburg practice.

Brandon S. Poterjoy, DO, Philadelphia, PA, completed his fellowship training in neonatal-perinatal medicine at St. Christopher’s Hospital for Children in Philadelphia.

Christie Quietmeyer, DO, Bethesda, MD, passed both the qualifying and certifying general surgery examinations and is now a board certified general surgeon. In May 2009, she was deployed to the Persian Gulf for a seven-month tour.

Class of 2003
Class Agents: Joshua M. Baron, DO; Mark B. Abraham, JD, DO; Daniel J. Morrissy, III, DO; Jacob Mathew, PA-C; and Joseph D. Norris, PA-C

Mark B. Abraham, DO, Lafayette Hill, PA, opened a new private practice, East Falls Family Medicine. Dr. Abraham is a member of the medical staff at Roxborough Memorial Hospital.

Class of 2004
Class Agents: Michael Anthony Caromano, PA-C, and Patrick Henry D’Arco, PA-C

Justin T. Binstead, DO, Salisbury, MD, was recognized as one of the Heroes of Emergency Medicine by the American College of Emergency Physicians.

Matthew H. Bruntel, DO, Frederick, MD, opened a dermatology practice, Frederick Skin Care.

Valerie A. Lemmon, PsyD, Harrisburg, PA, joined the medical staff at Psychological Health Affiliates in Hershey and Manheim.

Refky Nicola, DO, Jersey City, NJ, accepted a musculoskeletal radiology fellowship at Hospital of Special Surgery in New York.

Patrick Soto, DO, Spokane, WA, joined the psychiatry staff at Northwest Medical Rehabilitation.

Alton A. Trott, DO, Dover, DE, joined the department of obstetrics and gynecology at Bayhealth Medical Center.

Jack H. Truschel, II, EdD, PsyD, Mountain Top, PA, was appointed to the board of trustees of Lackawanna College.

Class of 2005
the Treatment of Diabetes Mellitus 2: A Pilot Study.”

Margaret Moore, DO, Perkasie, PA, joined the medical staff at Woodlands Healing Research Center in Quakertown.

Chau H. M. Nguyen, DO, Wethersfield, CT, joined St. Francis Hospital and Medical Center as a member of East Hartford Community Healthcare Inc.

Class of 2006
Class Agents: Caroline E. Ahlquist, PA-C, and Mary C. Wilhelm, PA-C

Andrew T. Darlington, DO, Jacksonville, FL, has been appointed chief medical resident in internal medicine at the Shands Hospital, University of Florida, in Jacksonville.

Melissa J. Darlington, DO, Jacksonville, FL, is a physician in the United States Navy.

Charlene E. Talley, DO, Woodbury, NJ, completed her Family Medicine Residency Program at UMDNJ-SOM in June 2009. She intends to join the United States Air Force.

Class of 2008
Jay D. Bhatt, DO, MPH, Orland Park, IL, was awarded a Zuckerman Fellowship. The Zuckerman Fellowship will provide full funding for Dr. Bhatt to pursue a public service degree at the Kennedy School of Government.

2009 Alumni Association Certificates of Honor
Congratulations to J. Steven Blake, DO ’89, and Arthur J. Sesso, DO ’81, who were awarded Certificates of Honor during Reunion Weekend.

Dr. Blake, president/CEO of Blake Gastroenterology Associates, LLC, and president/CEO and medical director of the Mt. Airy Ambulatory Endoscopy Surgery Center, was recognized for his service and philanthropy to the College. At PCOM, he is a member of the Board of Trustees and the Leadership Gifts Committee, an assistant clinical professor in the Department of Medicine and a lecturer in gastroenterology.

Dr. Sesso, professor and chair, department of surgery, and program director, general surgery residency, was recognized for his superior teaching. Dr. Sesso has served as a member of the PCOM Department of Surgery since 1981. He was awarded the first chair of the Galen S. Young, DO ’35, Chair in Surgery, and the Christian R. and Mary F. Lindback Award for Distinguished Teaching.

2009 Affiliated Teacher of the Year Award
For Dennis M. Guest, DO ’79, the role of the physician is synonymous with the role of the teacher. He has influenced and inspired many medical students who have completed their clerkships under his guidance at Northeastern Hospital, Temple University Health System. Dr. Guest serves as a staff physician and the director of the Department of Emergency Medicine as well as clinical coordinator, undergraduate education, at Northeastern. He is a clinical adjunct faculty member in the Department of Emergency Medicine at PCOM.

Certificates of Merit
Thomas A. Brabson, DO ’89, Media, PA, was inducted as President of the American College of Osteopathic Emergency Physicians.

A. Alvin Greber, DO ’58, Aventura, FL, was the recipient of the 2009 Living Tribute Award presented by Nova Southeastern University College of Osteopathic Medicine.

Robert P. Oristaglio, Jr., DO ’76, Center Valley, PA, was inducted as a fellow of the American College of Osteopathic Internists.

In Memoriam


John E. Duffy, Jr., DO ’64, Conyngham, PA, March 29, 2009.

Charles P. Pasano, DO ’72, Mifflinburg, PA, March 28, 2009.

Gary Forsberg, DO ’72, Carlsbad, CA, August 15, 2008.


Joseph J. Godorov, DO ’58, Coral Gables, FL, May 24, 2009

Lillian Kramer, RN, Wyncote, PA, October 1, 2008.


John M. Lewis, DO ’06, Yardley, PA, March 28, 2009.


Robert Magrill, DO ’47, Huntington Beach, CA, October 20, 2008.


Curtis B. Strausbaugh, DO ’54, York, PA, December 2, 2008.


James R. Tyler, DO ’55, Texarkana, TX, December 18, 2009.


Dear Mom,

It is July again. Your birthday is but another reminder of how much I miss you. This year, I wanted to put in the form of a note of tribute how your three-year journey with Bulbar ALS gave me the strength to help you and our family, and now my patients and their families. I have learned that long disease processes are gifts in a way—an itinerary to help us plan our trip and destination. You taught me that a chin lift at age 68 makes sense. You taught me how to grow old and how to depend on others for the most basic of human needs in a beautiful, graceful, and elegant way. Even during your final days, you wanted to sit with Brock in your Jag and have him buy you Grey Goose vodka. It was an occasion to feel normal: driving, getting lost, listening to Bach, and giving direction with your right pointer finger, your one last remaining neuromuscular function.

I discovered after your passing that you had very different relationships with all of your children. The Mom I loved liked to sew, shop, and cook at home. When I was talking with my sister, she noted that her Mom loved to go to movies and had a weekly lunch date at the local seafood bar. Different stories—and very differing viewpoints about how to care for you. As your caregiver, I am still working to write that book you suggested: *You Can't Cure Fifty Years of Family Dysfunction with One Terminal Illness*.

Mom, I promise to continue to help all of my patients understand palliative care as a tool to help them live their lives with symptom relief despite disease progression. I pledge to tend to their family members and help them to understand the changes that they are all going through as a result of chronic diseases like ALS and cancer and age. I know I was perceived as a “know it all physician” with a sick Mom—and I was not always appreciated by the medical community. I felt firsthand the effects of being placated, put off, and ignored. You could not communicate, and most medical caregivers were not aware of Bulbar ALS and the implications for care. Every time we had a new caregiver, I had to give a level appropriate review of ALS, to be an educator, to be your advocate, and I knew that it hurt every time I had to go through it again and again.

Mom, I vow to remember daily when we were on the receiving end of the care triad. I promise to employ the same respect and care that Dr. Levene showed to us—the kindness manifested in his words on your last day at home on hospice: “I am here and I will make sure that all is OK.” Ultimately, you trusted me to find a doctor to care for both you and for me (for me as your daughter, not another medical professional). This is a caution I will remember when I care for patients and families that are part of medical community. I know now that they are suffering a different incremental kind of pain—the pain of knowing what is going to happen next.

Please give kisses to all of our loved ones up there and make sure Daddy especially knows how much he is loved. I went to medical school after I watched you and him deal with his diagnosis of prostate cancer, 10 years of illness, uncertainty, and pain. I found the book *Final Exit* in the sewing cabinet and the stuff you and Dad bought in Mexico. I am grateful that they stayed in the cabinet. From your choices, I learned that it is not our place to decide our moment of death. That knowledge solidified my beliefs and my practice of medicine—honoring life and all that we can learn until the end of our days.

Why does our culture have a hard time teaching us how to honor the transition of caring for our parents? Is it because parents have died away from home in the hospitals and nursing homes? Is it that we never want to admit that we get old? Come on Mom, in heaven, don’t you know all the answers now? You did when you were here on earth.

With other grieving and overwhelmed children, I underscore that the most important gift a parent can give to a child is to acknowledge that the child can give comfort and care.

Love and kisses,

Meeps
FROM WHITE COATS TO BLUE BLAZERS
A proud new tradition is taking hold at PCOM. Supportive alumni and friends are making larger gifts to help secure the College’s future and to guarantee their position in the 1899 Society. This prestigious donor club, named to honor the year the College was founded, recognizes PCOM’s top philanthropists who have made cumulative gifts of $50,000 or more.

OUR THANKS
We acknowledge 1899 Society benefactors for their wonderful support. These generous donors will be acknowledged with the 1899 Society blue blazer—distinctively traditional yet smart looking—aptly reflecting PCOM’s appreciation for loyalty and generosity.

ASPIRE TO BE AMONG OUR CELEBRATED LEADERS
Contact the Office of Alumni Relations & Development to discuss how you may plan your gift support to PCOM.
☎ 215-871-6120  |  1-800-739-3939
alumni@pcom.edu

Each 1899 Society blazer comes with the College seal embossed on the breast buttons and the 1899 Society logo on the smaller sleeve buttons. An embroidered acknowledgment is sewn inside the coat.

“It’s nice to be recognized for my contributions to PCOM. I give what I am able to give because of the opportunity PCOM afforded me to become a physician. I am appreciative of those who gave when I was a student. I believe we must all give back to our school and profession to stay strong.”

– Joseph J. Kuchinski, DO ’86
“WHERE A MAN FEELS PAIN HE LAYS HIS HAND”
— DUTCH PROVERB

CALENDAR OF EVENTS

SEPTEMBER 14
14th Annual PCOM Golf Classic
Aronimink Golf Club, Newtown Square, PA

OCTOBER 1
President’s Recognition Reception
PCOM Campus, Philadelphia, PA

OCTOBER 10
4th Annual Penn State Tailgate (Eastern Illinois University vs. PSU)
University Park, PA

OCTOBER 15
American College of Osteopathic Internists Annual Convention — Alumni Reception
J.W. Marriott Starr Pass Resort & Spa, Tucson, AZ

NOVEMBER 2
2009 AOA Luncheon
Hilton New Orleans Riverside, New Orleans, LA
2009 AOA Alumni Reception
New Orleans, LA