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Digest of the Philadelphia College of Osteopathic Medicine (Fall 2011)

Philadelphia College of Osteopathic Medicine

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INTERNATIONAL PRACTICE RIGHTS FOR OSTEOPATHIC PHYSICIANS

ROOM FOR GLOBAL GROWTH
ON THE COVER:
Technology and political trends may have shrunk the world for a matured osteopathic medical profession. Yet there is considerable room for global growth.

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Dear Alumni and Friends,

A New Year brings an opportunity to look to the year past while simultaneously looking to the future. At Philadelphia College of Osteopathic Medicine, our vision for the New Year is clear. Our Mission is unambiguous. Our work lies before us as we continue to shape our destiny with a profound commitment and sense of purpose.

As we enter 2012, osteopathic medicine has a degree of influence it has never had before in its history. Recognized for its humanistic approach, osteopathic medicine continues to gain recognition throughout the world. Currently, osteopathic physicians have unlimited practice rights in 58 countries, with partial practice rights in many more. As the feature article of this issue addresses (see page 11), this expansion to global medicine has a growing appeal for many practitioners—and holds great promise for the profession.

Significant possibilities are also being explored by several alumni and students in PCOM’s psychology programs. They are employing a new cognitive behavior therapy that helps individuals to focus on the present moment. Mindfulness and mindfulness-based stress reduction have shown a lesser amount of medical and psychological symptoms across a range of conditions (see page 7).

Finally, this issue includes the College’s 2011 Report of Donors (see insert). The report is a companion piece to the annual report, “The Heart of Our College.” I encourage you—if you have not already done so—to view this compelling publication that recognizes our whole community in a special way by clicking on its icon on the homepage of the PCOM Web site: www.pcom.edu.

Thank you for your support of PCOM, and know of my best wishes for 2012.

With warmest regards,

Matthew Schure, PhD
President and Chief Executive Officer
GRADUATE PROGRAMS
COMMENCEMENT SNAPSHOT

Ewa Kalicka, MS/Psy ’11, was among the 253 students—in nine programs of study—who were awarded degrees during PCOM’s Graduate Programs Commencement held on July 29 at the Academy of Music in Philadelphia.

When Ms. Kalicka moved to the United States from Poland at the age of 18, she experienced culture shock. “When I left Poland, it was very homogenous,” she explains. “Here I was exposed to different cultures, different religions and different ethnicities.” The opportunity to interact and learn from people of different backgrounds was like a classroom to this budding psychologist.

During her undergraduate studies in psychology Ms. Kalicka was drawn to the connection between mental health and substance abuse, and she chose the addictions and offenders track of the MS in counseling and clinical health psychology at PCOM for her graduate work. “I didn’t apply to any other school,” she admits. “It was the only school in the eastern United States with a program that interested me, and it totally met my expectations. I was also attracted to the dual clinical and research focus of the program. I liked the emphasis on hands-on training with standardized patients. Reviewing our sessions with our teachers was immensely helpful.”

That’s not to say it was easy. “During my last year in the program I worked 16-hour days between my job, classes and practicum,” Ms. Kalicka says. “But I did a lot of self-care, which they stress at PCOM. You need to take care of yourself and find balance.”

HELPING KEEP SENIORS SAFE

In the dead of night, 82-year-old Helen Sikora of Westmont, New Jersey, got up for a glass of water. She fell, breaking both her ankles. Ms. Sikora lay wedged under her bed for three days before she was found by the man who came to read her electric meter.

A few days later, when Richard M. Pescatore II (DO ’14) heard her story, he was confident his fellow students could help prevent this scenario from being repeated. As president of PCOM’s Emergency Medicine Club and a lieutenant in the Buena Vista Emergency Medical Services, Mr. Pescatore knew something could be done for seniors living alone.

The Emergency Medicine Club purchased 21 medical alert emergency necklaces and is on a mission to find seniors in need. Once a senior citizen is identified, a member of the club will go the senior’s home to set up the alert system, which when activated will automatically call 911 and an individual designated by the senior—all at no cost to the resident.

“Every day, rescuers, medical students, nurses and physicians care for senior citizens who were unable to call for help,” says Mr. Pescatore. “Some of these seniors are trapped for days from a fall or injury, and can’t reach the phone to bring help to their side. Illnesses and injury progress as the hours and days pass, and the suffering and cost of care skyrocket. With the donation of a simple necklace, we take a small step forward in halting this preventable tragedy.”
**SCHOOL PSYCHOLOGIST: A WINNER**

Terri Erbacher, PhD, clinical assistant professor, school psychology, was named Pennsylvania School Psychologist of the Year by the Association of School Psychologists of Pennsylvania.

Dr. Erbacher’s areas of expertise include counseling high school students and students with learning disabilities, early intervention, supervision of school psychology interns and mentoring first-year psychologists and counselors. She is trained in crisis management and is certified by the American Association of Suicidology as a school suicide prevention specialist. Dr. Erbacher is additionally certified as a specialist in grief and traumatic loss.

Dr. Erbacher’s achievement marks the third time over the past several years that a member of PCOM’s School Psychology program faculty has been honored with this distinction.

**BARBARA A. GOLDEN, PSYD, RECEIVES 2011 LINDBACK AWARD**

Dr. Golden, professor and director, clinical services, psychology, is the 2011 recipient of the Christian R. and Mary F. Lindback Award for Distinguished Teaching. The Lindback Award recognizes academic excellence and outstanding teaching and is one of the most prestigious awards conferred on an instructor in higher education.

Dr. Golden teaches behavioral medicine and clinical health psychology. She serves as the director of the College’s Center for Brief Therapy, which provides training for the psychology department as well as low-cost care to the community.

A licensed psychologist, Dr. Golden conducts clinical and scholarly work in nonpharmacological pain management, somatization disorder and psychology in primary care.

**OMM DEPARTMENT EMBRACES ACUPUNCTURE**

Jason Hartman, DO ’06, assistant professor, OMM, was helped by acupuncture as a child and imagined that acupuncture would be his career. He decided on medical school instead and became a DO specializing in OMM.

After graduating from PCOM, he completed the Helms Medical Acupuncture for Physicians course and now utilizes this modality in his practice. In addition, he has initiated an acupuncture track within the OMM residency.

“Osteopathic manipulation and acupuncture are based on the same philosophy, and they enhance one another,” says Dr. Hartman. “Acupuncture can be thought of as the original osteopathy.” Physicians interested in the new track complete the intensive acupuncture training through the Helms Medical Institute and receive clinical training at PCOM. The OMM department has also expanded physically, having moved into a space formerly occupied by internal medicine that provides more and larger practice rooms.

“OMM treatments require a physician for the entire half-hour of treatment,” Dr. Hartman explains. “Acupuncture treatments are an hour long, but don’t require a doctor to be in the room the entire time. I can run three rooms at once—two rooms of acupuncture and one of manipulation. I can be much more productive.”

Dr. Hartman hopes to continue to expand the offerings within the OMM practice. “My goal is to introduce a full range of integrative medicine within the OMM practice,” he says. “This is the future of medicine,” continues Dr. Hartman, “and PCOM can be in the forefront.”
PHARMACY STUDENT RECEIVES SCHOLARSHIP

Ms. Afamefuna, right, and her mentor, Dee Fanning, PharmD, assistant professor, pharmacy practice, PCOM School of Pharmacy – Georgia Campus, participated in workshops and seminars on the art of teaching, service and research at the association’s annual meeting in San Antonio, Texas.

Simone E. Afamefuna, a second-year PharmD student, was named one of only 75 pharmacy students from across the country as an American Association of Colleges of Pharmacy (AACP) Wal-Mart Scholar. The goal of the scholarship program is to strengthen the recipient’s skills and commitment to a career in academic pharmacy through participation at the AACP annual meeting and seminars.

A CELEBRATION OF HEALTH

Scott Holmes (DO ’15) helps a health fair participant during a musculoskeletal screening.

The PCOM Student Osteopathic Medical Association helped the congregation of Transformation Center Church in Philadelphia celebrate their relocation to a newly renovated building with a health fair. Hundreds of attendees received blood pressure screenings and musculoskeletal assessments by PCOM medical and physician assistant studies students and HIV testing courtesy of Action AIDS. The students also shared information about diabetes, heart disease, nutrition, substance abuse and mental health.

ODL EXPANDS TO GA–PCOM

When Bill Clinton, program director, organizational development and leadership (ODL), was asked in 2009 to assess the opportunity to expand the 10-year-old ODL program to GA–PCOM, he and Jeff Branch, EdD, assistant professor and associate program director, ODL, practiced what they teach. They completed a thorough assessment of the needs of Gwinnett County and built relationships by first reaching out to community leaders.

“We said, ‘Let’s approach this the way we teach in our program,’” explains Dr. Branch, “and see if there’s an interest in the community. John Fleischmann [EdD, MBA, campus executive officer] and Andy Jackson [coordinator, marketing and communications] were critical to our success, as they introduced us to community leaders. We put ‘relationship before task’ and spent a lot of time finding out what people in the area need and want. We designed interviews and feedback sessions to validate what we heard. We discovered that Gwinnett County is a diverse, affluent community in which people are doing well individually and in their own diverse ethnic groups, but they had not, at this point, achieved success collaborating with different ethnic groups. We also learned that the area embraced leadership development, evidenced by a host of community leadership development institutes, but that there was not an academic institution granting a master’s degree in organizational development and leadership.”

With all the action research completed, the ODL team was granted the approval to market the program. With 12 external students pursuing their MS in organizational development and leadership and three students from the College’s biomedical sciences program pursuing their MS in biomedical sciences with an ODL track concentration, the program welcomed its inaugural class of 15 adult learners this fall. “Gwinnett County has experienced explosive growth in the past 30 to 40 years, growing the population from 40,000 to its current size of approximately 900,000 people,” says Mr. Clinton. “It’s a vibrant, diverse community, and we are excited that our first class mirrors that diversity.”

ALL GOOD NEWS FROM GA–PCOM

The PCOM Doctor of Pharmacy program was awarded candidate accreditation status during the June 22–26, 2011, meeting of the Accreditation Council for Pharmacy Education Board of Directors. This new status makes all the students enrolled in the program eligible for licensure. The inaugural class of 2010 has moved into its second year with 78 of the original 79 students. The new first-year class numbers 93 students.
WHEN GOLF IS MORE THAN A GAME

Tom Gravina is a man committed. He’s committed to his family, his business, to PCOM and to 43,000 people he has never met. For the past six years, Mr. Gravina has chaired the PCOM Golf Classic, which has raised over $1 million for the PCOM Healthcare Centers and the individuals who benefit from their services.

“When I joined the PCOM board of directors, I was intent on finding a way to make a difference,” Mr. Gravina explains. “I saw that the Healthcare Centers provide primary care for 43,000 people a year. How often do you have the opportunity to make a difference in the lives of tens of thousands of people?”

The most important use of the funds raised by the Golf Classic, says Mr. Gravina, was to create and fund a new full-time position: coordinator of community health resources. “The healthcare system is complicated. This position, currently filled by Ron Allen, helps people in need navigate the system and access the services they need. Ron helps people, face to face, every day.”

Although his chairmanship of the Golf Classic has come to an end, his work on behalf of the College has not. Mr. Gravina is chair of the Board of Trustees audit committee, and he serves on the foundation and finance committees. “It’s been a lot of fun,” he declares. “The Golf Classic is in good shape, and the structure is in place to continue this wonderful cause. The potential of PCOM is boundless.”

WINDOWS ON CITY AVENUE

Family Medicine at PCOM opened its doors to patients on May 16 with a new address and new offices on the first floor of Rowland Hall. Formerly PCOM Healthcare Center – City Avenue Division, Family Medicine at PCOM has windows on City Avenue that give the practice a new visibility.

In addition to a new location and eight dedicated exam rooms, the practice has added on-site mental health services. “Deborah Chiumento [PsyD ’09] is our mental health consultant,” explains Harry Morris, DO ’78, professor and chair, family medicine. “With an office in Family Medicine, it’s much easier for our patients to access the mental health care they need.”

The office is also up and running with its electronic health records (EHR), and it was one of nine area practices, in addition to the PCOM Healthcare Centers and the Department of Geriatrics, to be recognized by the Pennsylvania Regional Extension and Assistance Center for Health Information Technology for leadership in the nationwide transition to EHR.

The practice is also working to become certified as a medical home. Helping Family Medicine reach this goal is Laura Teran, the new office manager. “Laura is an RN, and she has experience working in a medical home model,” says Dr. Morris. “She is helping us reorganize our office for certification.

“We’ve received a lot of positive feedback on our new facilities,” continues Dr. Morris, “and I see a great deal of potential for our practice as we become certified as a medical home.”

BELOW: Physicians and medical students share a conference room overlooking City Avenue, giving the practice visibility within the community.
ON A MEDICAL MISSION, THE LIFE YOU CHANGE MAY BE YOUR OWN

Three groups of PCOM second-year students made the most of their last “free summer” of medical school by participating in medical missions. From Cambodia to Vietnam to Ecuador, students treated hundred of patients at rural clinics and city hospitals, some with no running water and all with the barest of medical supplies, during 10-hour work days.

While patients received treatment for chronic and acute illnesses in remote villages, PCOM students received life lessons thousands of miles away from the comforts of home and predictable college classrooms. The students took an active role as healthcare providers, health educators and public health investigators. They learned health education outreach and became comfortable caring for a diverse population, which will serve them well wherever they choose to practice.

Right: OMM played an integral role in the care the students provided. Before embarking on their journey, students received additional training from Lauren Noto Bell, DO ’06, assistant professor, osteopathic principles and practice. Not only did the treatments help eliminate pain and dysfunction, the students were able to show the residents how to perform basic maneuvers on themselves and others.

Gary Zane (DO ’14) offered OMM treatments to the women in the diabetes club the students organized in Ecuador.

Above: The students’ missions included teaching the importance of basic hygiene and infection control. Here Bonnie Patek (DO ’14), left, and Rachel Henrickson (DO ’14) demonstrate proper hand-washing technique in Cambodia. Teaching the importance of boiling water was also essential in helping to reduce the occurrence of water-borne illness.

COLLEGE LAUNCHES NEW AD CAMPAIGN

The Office of Marketing and Communications has created a new, program-specific ad campaign. The ads, which feature PCOM students, promote the Clinical Psychology, School Psychology, Forensic Medicine and Organizational Development and Leadership programs. The campaign ran from October through November 2011 and was designed to increase attendance at the College’s graduate programs open house.

“Once we get people in the door at our open houses, the school sells itself,” says Terri Blair, associate director, marketing and communications. “Research shows that over half of prospective students who attend our open houses end up submitting applications.

“This ad campaign is different from the College’s previous campaigns,” Ms. Blair explains. “There has been a major shift to online advertising. People are getting more of their information from the Internet, so PCOM ads are running on Philly.com, 6ABC.com and Facebook. One great aspect of online advertising is the fact that marketing staff can track the success of the ads. We can see the number of interactions people have had with the ads if they’ve clicked through to the PCOM Web site, what pages of the Web site they’ve viewed and how much time they spend looking at the site.”

PCOM has not abandoned traditional print advertising, but even that has a new digital component. The ads contain a QR (Quick Response) code—a type of barcode that can be read by a smartphone. When the user scans the QR code, the PCOM Web site pops up.
Multitasking is the bane of the 21st century. So states Rita Baldino, PsyD ’09, a school psychologist, high school teacher and private tutor who observes daily how our supercharged, competitive culture is affecting both youth and adults.

“We are always doing something, and not just one thing,” says Dr. Baldino. “We eat while driving the car, read e-mail while talking on the phone, work on projects while watching TV. Our minds are never quiet. With this constant overload, we are creating mental health problems, such as anxiety and depression, and physical problems for ourselves and our children. In our highly competitive, stress-filled society, we are ripe for learning to slow down, focus and live in the present moment.”

Today a growing number of psychologists are using mindfulness-based therapy to help patients do just that. Mindfulness is a group of stress-reduction strategies borrowed from ancient Buddhist practices that teach individuals to focus only on the present moment through techniques such as conscious breathing, body scan meditation and attentive listening.

Mindfulness techniques are used as the primary intervention strategy in Acceptance and Commitment Therapy, a new wave of cognitive behavior therapy that helps individuals focus on the here and now and how it’s affecting their mood and behaviors. The goal is to help people accept negative situations in life and take action to live with them more effectively.

Mindfulness has been applied successfully in several clinical populations to help individuals live with or accept some of the symptoms of illnesses such as major depression, chronic pain and anxiety.

Mindfulness-based stress reduction (MBSR) has been developed over the course of three decades by Jon Kabat-Zinn, PhD, and Saki Santortelli, EdD, at the University of Massachusetts Center for Mindfulness in Medicine, Health Care and Society. Empirical studies conducted by researchers at the center have shown reductions in medical and psychological symptoms across a wide range of conditions from anxiety to psoriasis as a result of MBSR. [See sidebar, “Research findings show promise.”]
DISCOVERING THE BENEFITS

At PCOM, clinical and school psychology graduates and students have studied the effectiveness of using mindfulness techniques in combination with cognitive behavioral therapies in the treatment of patients.

Mindfulness proved to be a promising form of treatment for a young male patient who was experiencing depression as a direct result of living with obsessive compulsive disorder/Tourette's syndrome (OCD/TS), according to a study by Dr. Baldino, “Mindfulness: Extending Treatment for Early Onset Obsessive Compulsive Disorder/Tourette’s Syndrome” (2008). For eight weeks, the young man practiced three mindfulness techniques: conscious breathing, body scan meditation and listening attentively to classical music. During that time, the young man's depression was significantly reduced. He was better able to concentrate and complete most daily tasks, and he achieved a higher level of acceptance of his OCD/TS.

“Although [he] could not make the leap to a state of mind in which he fully accepted his disability, he did express the thought that he has had many experiences that he has valued as a result of having early onset OCD/TS,” reports Dr. Baldino.

A secondary study finding suggests that mindfulness may help students who struggle with learning disabilities to deal more effectively with some of the stressful moments that arise in their school settings.

The research database for mindfulness as a treatment technique for younger populations is just beginning to develop, according to Dr. Baldino. “If we could teach children to slow down and live in the present moment, they would be better prepared to manage the technology-driven high expectations of the 21st century,” she says. “In addition to being scientifically based, we are finding that mindfulness is easy, portable, innocuous—and it works!”

MANAGING ANGER

Jeffrey R. Kelly, PsyD ’07, examined mindfulness as an approach to anger management in school-aged children, noting that the need for effective strategies to decrease violent and aggressive behavior in the school setting has never been greater. In his study, “Mindfulness-Based and Cognitive-Behavior Therapy for Anger Management: An Integrated Approach” (2007), Dr. Kelly combined mindfulness with cognitive behavioral therapy to help a female high school student who was having difficulty controlling anger, reacting inappropriately to anger-provoking situations and getting angry over things that didn't warrant anger. Following treatment with combined therapy in 10 sessions over six weeks, the student showed significant improvement in most areas of anger management, as measured with the State-Trait Anger Expression Inventory.

In Dr. Kelly’s study, the student began using mindfulness meditation in three-minute periods, which increased to 20-minute periods over the course of the study.

“Mindfulness meditating can help individuals to reduce their stress level and improve their ability to open their minds...”
and think about things differently, as well as control their thoughts,” notes Dr. Kelly, a school psychologist. “This can help people with anger management issues because they typically perceive the world around them negatively. Mindfulness can enhance their ability to change that negative attitude.”

REducing anxiety

During a practicum at the University of Pennsylvania’s Center for Treatment and Study of Anxiety, Christina DiChiara (PsyD ’12) used mindfulness techniques to help a 21-year-old female college student suffering from generalized anxiety disorder. Her anxiety was so severe that she couldn’t interact with her peers, ask questions in class, eat in the cafeteria or go to the library at school, among other limitations.

“She was so nervous about what other people might be thinking about her that she avoided everything,” explains Ms. DiChiara. “These negative thoughts had totally isolated her and devalued her life.”

The use of mindfulness-based acceptance and commitment therapy helped the student overcome many of her anxieties. “We were able to help her start asking questions in class and identify a friend to go to the cafeteria with her,” notes Ms. DiChiara. “These were huge steps forward that she was able to take because of the idea of acceptance. She learned to have compassion and loving-kindness for herself and other people around her. So much of her anxiety was derived from negative signs she thought she was getting from other people, as well as self-criticism. That compassionate piece of mindfulness and acceptance of herself was a motivating factor to allow her to engage in more activities.”

IMPROVING HEALTH AND WELLNESS

For her doctoral dissertation, Ms. DiChiara has been studying the relationship between mindfulness, stress and the likelihood that individuals will engage in negative health habits such as drinking, smoking, physical inactivity and unhealthy eating to cope with stress.

“Preliminarily I can say that having a non-judgmental attitude of acceptance, which is part of mindfulness, seems to allow people to manage their stress better,” she notes. “People who were more accepting tended to be less angry, less depressed and reported fewer physical symptoms such as gastrointestinal and neurological problems, colds and other immunology symptoms.”

Allison Burns-Pentecost (PsyD ’12) has been using mindfulness in practice since 2004 when she participated in an eight-week mindfulness-based stress reduction course based on the work of Drs. Kabat-Zinn and Santortelli: “It changed my thinking about health and wellness and the connection between our thoughts and our physical health,” says Ms. Burns-Pentecost, who since then has taught the course herself. “I became interested in integrating psychology principles with health and well-being, particularly mindfulness.”

RESEARCH FINDINGS SHOW PROMISE

Empirical studies conducted over the past three decades by Jon Kabat-Zinn, PhD, and other researchers at the University of Massachusetts Center for Mindfulness in Medicine, Health Care and Society (CFM) have shown clinically relevant reductions in medical and psychological symptoms across a wide range of conditions as a result of Mindfulness-Based Stress Reduction (MBSR) techniques. Following are a few of their findings.*

• A randomized clinical trial showed that patients with moderate to severe psoriasis undergoing phototherapy or photochemotherapy who listened to guided meditation tapes while receiving ultraviolet light treatments healed at approximately four times the rate of subjects receiving just the light treatments. This suggests indirectly that the mind can affect a healing process all the way down to the level of gene expression and control of the cell replication cycle, which may have implications for oncogenic processes.

• Researchers are currently studying the effects of MBSR training on individuals in a workplace setting on brain activity and on immune response to viral challenge, among other variables.

• In other studies, MBSR practices are being introduced into a bone marrow transplant unit, and an integrated MBSR/mindful dietary intervention is under way for men with prostate cancer.

• For nearly 20 years, CFM researchers have conducted an MBSR program for the multicultural, multiethnic population of an economically impoverished inner city, serving over 2,000 people, with positive results that will soon be published.

• In addition, the CFM delivered MBSR programs to over 1,500 inmates and 100 staff of the Massachusetts Department of Corrections. Positive outcomes were observed and will soon be published in the criminal justice literature.

Both the inner-city and Department of Corrections projects are examples of integrating mind/body approaches into settings and institutions within society that might further individual and community health and well-being and mitigate poverty, crime and violence.

* Source: University of Massachusetts Center for Mindfulness in Medicine, Health Care and Society
“I work with a lot of people who suffer from anxiety and depression,” she continues. “By learning mindfulness skills, they have a practical tool to take home and practice daily. Getting in touch with the present moment helps people pull themselves out of habitual patterns of worrying about the future, which can develop into anxiety, or ruminating about the past, which can lead to depression. Mindfulness activates the parasympathetic nervous system, sending a calming wave of relaxation over the body.”

LIVING WITH CHRONIC PAIN

Ms. Burns-Pentecost also uses mindfulness as a supportive measure in medical treatment to help patients manage chronic pain. “Pain is a perception, an interpretation of an intense sensory experience,” she states. “Mindfulness helps to change people’s relationship to their pain. Mindfulness skills such as the body scan have a component of acceptance of the pain rather than automatically judging pain as bad. This takes a lot of practice, but patients have reported that they notice a difference in the pain. By bringing awareness to the tension in the body around the pain area, they are able to relax the body and, as a result, the pain may lessen.”

Mindfulness has also been reported to help mitigate insomnia, according to Ms. Burns-Pentecost. “Insomnia often accompanies anxiety and depression,” she explains. “Using mindfulness skills to help manage anxiety throughout the day can help to stop the process of worry at bedtime. If worries start to creep in as you try to fall asleep, practicing mindfulness can stop the increased response of the nervous system.”

ENHANCING PATIENT-PHYSICIAN INTERACTIONS

Mindfulness can enhance the therapeutic relationship between physician and patient, bringing benefits to both.

“Physicians who understand mindfulness skills can be present with their patients, really listening to what they say,” observes Ms. DiChiara, who has witnessed this with her own physician father, Frank P. DiChiara, DO ’76. “My father is a very mindful person in his approach to patients and colleagues. He and other physicians like him have a greater ability to listen with compassion and acceptance rather than judgment, and patients respond well to that. A lot more problem solving happens as a result, which benefits the patient.”

“Physicians who know how to use mindfulness skills can offer to help patients learn to use them,” notes Dr. Baldino. “However, knowing when to offer this as an intervention is critical. People want instant cures in our society. With a condition such as chronic pain, it can take time for the patient to understand and accept that it will never go away completely. A physician needs to be mindful of where the patient is in that process, and at the right time, suggest mindfulness as a tool that will help the patient live a fuller life by owning the condition, befriending the problem rather than trying to get rid of it.”

Mindfulness helps to change people’s relationship to their pain.”
More than 75 years after Vermont became the first state to license DOs, osteopathic medicine’s battle “for complete rights in all states...was finally won in 1973 with the passage of a full practice law in Mississippi. In general, the rhetoric of this time period [1954–1974] suggests the ‘maturing’ of the profession.”

Joshua Kerr, director of international affairs, American Osteopathic Association (AOA), echoes the thought in describing today’s comparable battle: gaining full practice rights for U.S.-trained DOs abroad. “The profession is growing up,” he says. “While we worked and continue to work for parity within the United States, the profession has come to a point where we can look at the country next to us, or where our parents were born.” What we see, whether next door or across an ocean, may be unexpected.

WHERE DO WE STAND?

Our neighbor to the north generally provides unlimited practice rights for U.S.-trained DOs, through recognition of the Royal College of Physicians and Surgeons of Canada. But Newfoundland and Prince Edward Island, unlike other provinces, lack specific provisions for licensing U.S.-trained DOs, and Saskatchewan limits DOs’ scope of practice to OMM. To the south, according to the AOA’s International Licensure Summary (available at the AOA Web site, www.osteopathic.org), no physician, whether DO or MD, may receive long-term licensure in Mexico (outside of the Yucatan state) “without working papers, which requires completion of a five-year residency and after which services are given on a limited basis and under the supervision of a Mexican MD. Political connections are extremely helpful but do not necessarily guarantee licensure.”

As shown in the AOA map below, 58 countries currently provide unlimited practice rights to U.S.-trained DOs. (The U.S. State Department recognizes 195 independent countries worldwide; the AOA has investigated osteopathic licensure in roughly 100.) The number changes every year, according to Mr. Kerr, and generally for the better. Several hundred U.S.-trained DOs practice abroad, he estimates; the AOA’s data are self-reported and generally quite limited.

Story continues on page 13.
The AOAs map tells the story in broad outline, but licensing decisions are in practice often made on a case by case basis. In some countries where the scope of practice for U.S.-trained DOs is officially unlimited, the International Licensure Summary notes that a license is “difficult to obtain.” Examples include Austria, Greece, Italy and Luxembourg. Several countries offer “partial practice rights,” which means that DOs have restricted privileges and may not be allowed to, say, perform surgery or prescribe medication.

In many instances, the AOAs simply has no information on a country’s policies, as its inquiries to governing bodies have received no response. This is the situation in, for example, Bolivia, Cambodia, Denmark, Egypt, Ghana, Iran, Japan, Kuwait, Peru, Romania, South Korea, Syria and Turkey.

**HOW DOES IT WORK?**

According to the AOAs, “The procedure by which international countries consider granting physician licensure to foreigners . . . can take the form of a simple interview with a Minister of Health or Medical Board, a handshake with a governmental insider or the submission to a battery of examinations, intensive residencies and the like.” Mr. Kerr offers two stories that demonstrate the extremes of the process.

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**TANA FISHMAN, DO ’95: AN ARDUOUS PROCESS, A FANTASTIC CAREER**

According to the AOAs, some countries are “simply not educated on the qualifications of U.S.-trained DOs and their equivalence in education, training and practice to MDs. To that end, communication with international health care officials can be a time consuming and formidable task.” Dr. Fishman, a general practitioner in New Zealand since 2001, can attest to that.

In 2000, Dr. Fishmans husband, H. Charles Fishman, MD, a child psychiatrist, went to New Zealand for a six-month project on teen suicide; she and their children came to visit. The project wasn’t finished, the family found themselves discussing a move and “the wheels were set in motion.” But Dr. Fishman was adamant that she would not make the move until she knew she could practice.

The New Zealand Medical Council rejected her original application, which she had anticipated. Then began the process of appealing.

The appeal was heard before the Medical Council Board in Wellington. Dr. Fishman had about half an hour to present her case. With help from her husband and daughter, she developed a dossier to help the board members understand medical training in an osteopathic medical school. It included her undergraduate and PCOM transcripts, along with solicited letters of endorsement from New Zealand doctors who had trained overseas, sometimes alongside DOs.

The 25-member board sat at a big, round table, she recalls; she had prepared one copy of her thick dossier for each of them. One member had worked in the United States and was knowledgeable about osteopathically trained doctors.

Dr. Fishman was armed not only with her impressive paper file, but with two impressive colleagues as well: “I invited the head of the department and professor of General Practice and Primary Healthcare, University of Auckland, Faculty of Medical and Health Sciences [FMHS], as well as the associate professor of General Practice, to testify on my behalf.” The latter had taken it upon himself to call all the doctors who had supervised Dr. Fishman during her residency training in family medicine, and he reported back to the board what each supervisor had said.

Dr. Fishman highlighted her medical coursework as well as her training rotations in the emergency department, ICU, general surgery, and obstetrics and gynecology. She spoke about some of her most challenging cases and of her work with secondary care specialists. By the end of the session she felt optimistic about the outcome of the appeal, and she was right: The next day the Board granted her registration. She now could practice as a GP—but only with oversight.

“There are GPs who never fully finish their training in this country,” observes Dr. Fishman, “900 of them.” But she was determined to become fully vocationally registered. That meant going back into a training program and becoming, once again, the equivalent of a resident.

This process required a clinical exam, given once a year, during which Dr. Fishman was observed and marked at 10 to 15 stations. “It was quite stressful,” she says emphatically. “You also have in-practice visits; an educator/supervisor visits the clinical practice and observes your consultations, reviews your medical notes in the computer and audits conducted on your recall system, and gives you feedback and an overall mark.” Dr. Fishman was finally deemed fully trained and granted fellowship in the Royal New Zealand College of General Practice (RNZCGP), equivalent to board certification in the United States.

Iironically, says Dr. Fishman, in her correspondence and on her prescriptions “DO” never appears. Only when she publishes is her degree given. Otherwise she is Dr. Tana Fishman, FRNZCGP (dist). The parenthetical honor reflects a Distinction of Service Dr. Fishman received in 2010.

Dr. Fishman is on the faculty in General Practice and Primary Healthcare at the University of Auckland, FMHS. She also is a partner in Greenstone Family Clinic (www.greenstoneclinic.co.nz), which conducts teaching and research. She has served on government committees to develop smoking cessation and lung cancer guidelines and presents her work at conferences. “Ive had a fantastic career in New Zealand,” she says, “and its a great place to practice and to live.”

DIGEST 2011 13
Mr. Kerr was contacted by a DO interested in practicing in Granada. A letter from the AOA initially received no response. Then a two-page form letter was received from a health ministry assistant, referencing an attachment that listed the degrees Granada recognized. “And DO” had been written in by hand.

By contrast, Mr. Kerr’s office spent a year and a half in discussions with the United Kingdom’s General Medical Council, at first answering very general questions about osteopathic medicine, and later addressing details about specialty training and credit hours. In 2005 the Council announced that “US-trained DOs will be accepted for full medical practice rights in the United Kingdom.” Mr. Kerr describes this as “a big win.” As the International Licensure Summary puts it, “Many countries that were or continue to be under British influence adhere to Britain’s definition of an ‘osteopath,’ a non-physician health care practitioner” who coordinates care and whose main practice focus is manipulation. “Due to the similarity of the titles, many of these countries refuse to grant U.S.-trained DOs practice rights beyond the scope of manipulation.” For example, “The Australia Medical Council has continually denied requests by the AOA to recognize U.S. educated and trained DOs for the unlimited practice of medicine. . . .[But it] appears that licensure [is] dependent on the state.” A trend abroad toward granting bachelor’s or master’s degrees to osteopaths, rather than a DO degree, should help, Mr. Kerr notes.

Elsewhere, AOA inquiries have yielded some interesting results. For example:

- Aruba issues licenses to graduates of only five U.S. medical schools, none of them osteopathic.
- Chinese law does not provide specifically for osteopathic medicine or the U.S. DO degree. U.S.-trained DOs can apply for “short term medical practice,” which Mr. Kerr describes as “a bit more than rotation or medical outreach.”
- In France, only MDs can obtain full practice rights.
- No U.S. physicians, whether DO or MD, are eligible to be licensed in Morocco.
- In Norway, U.S-trained DOs can practice only manipulation, cannot use the title “doctor,” and cannot have their services covered for payment under the country’s socialized medical system.
- In Russia, U.S-trained DOs have unlimited scope of practice—if they can obtain a sponsor. “Do you know anyone there?” is the first thing Mr. Kerr asks when an inquiry about Russia is brought to him.
- The Singapore Medical Council does not recognize the DO degree and recognizes MD degrees conferred by only 11 allopathic medical schools.
- Osteopathic medicine is not recognized by the Swiss government.

Anthony Wehbe, DO/MBA ’07: A PERSONAL CONNECTION, A RECEPTIVE ENVIRONMENT

Through a startup company called SenaCare (www.senacare.com), Dr. Wehbe has opened a telemedicine clinic in Abuja, Nigeria. Although the clinic can work with local physicians, it was important to Dr. Wehbe to have a license himself. His father, brother and uncles all do business in Nigeria, and as a result Dr. Wehbe, who grew up in Cherry Hill, New Jersey, traveled there frequently as a child.

The Nigerian medical governing body, the Medical and Dental Council of Nigeria, wanted to know more about the DO degree. With the help of information from the AOA, Dr. Wehbe’s license was granted at the beginning of 2011. Besides acknowledging the value of his personal connections, Dr. Wehbe says that Nigeria is receptive to foreigners in general.

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Although Dr. Wehbe earned a joint DO/MBA degree, he describes himself and his SenaCare colleagues as physicians at heart, not businesses that hire doctors. He is proud of his PCOM education and eager to export American medicine, both to Nigerians and to foreigners working there. On the volunteer front, he hopes to organize a Nigerian medical mission by the beginning of 2012. On the business side, Dr. Wehbe is making innovative use of increasingly inexpensive technology and a small satellite network that can be put in place virtually anywhere. American-trained doctors can examine and test expatriates who are building a highway in Nigeria—or are on a six-month assignment in India, or are spending a semester abroad. “Using telemedicine technology, we are able to examine and diagnose patients remotely, and being a locally licensed physician I can also treat them,” says Dr. Wehbe.

Dr. Wehbe is board certified in internal medicine. He also speaks Arabic, Hausa (widely spoken in Nigeria, although English is the official language), and Spanish. His team of consulting physicians includes his wife, Zeina Ghayad, DO; and PCOM classmates Joseph Del Priore, DO ’07; Rajen Mehta, DO ’07; Ami Mehta Shah, DO ’08, MBA; Stephen Tiley, DO ’07; and Sabbir Khan, DO, who did his residency at PCOM in conjunction with Drexel University School of Medicine.

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“Everyone wants to make sure they are safeguarding their citizens,” says Mr. Kerr. That’s why the AOA sees a large part of its international mission as educational, designed to expand public knowledge about the difference between the osteopath and the osteopathic physician.

In 1998 the AOA established the Bureau on International Osteopathic Medical Education and Affairs (BIOMEA), which among other things serves as a point of contact with the World Health Organization, the Pan American Health Organization (PAHO) and other international health organizations, and distributes information about the AOA and American osteopathic medicine to interested parties outside of the U.S. BIOMEA also conducts an ongoing survey of all colleges of osteopathic medicine and their programs and activities in international student clinical electives, medical outreach, and professional interactions with international organizations.

The AOA is also a founding member of the Osteopathic International Alliance (OIA), whose mission is to advance “the philosophy and practice of osteopathic medicine and osteopathy worldwide.” The OIA represents more than 80,000 osteopathic practitioners around the world and has more than 60 organizational members from more than two dozen countries.

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**WHY DOES IT MATTER?**

The great majority of DOs clearly are not interested in practicing internationally. But those who want to “are raring to go,” says Mr. Kerr. Today’s young DOs didn’t experience the profession’s domestic battle for practice rights, and in a shrinking world, global medicine has a growing appeal.

Evidence of Mr. Kerr’s theory comes from Michael David Passafaro, DO ’03, who became interested in global medicine as an emergency medicine resident at Saint Barnabas Hospital in the Bronx. Dr. Passafaro is an assistant professor in the Department of Emergency Medicine at the New York College of Osteopathic Medicine, where he is a course facilitator and clinical field instructor for students and residents in the Global Health Certificate program—as is his wife, Deborah Lardner, DO, who has joined him in international practice.

Dr. Passafaro received a diploma in Tropical Medicine and Hygiene from London’s School of Hygiene and Tropical Medicine.

**PCOM’S RESPONSE**

Allan M. McLeod, DO ’88, JD, MBA, director, undergraduate clinical education, says that PCOM’s faculty and students have a significant informal interest and involvement in participating in and promoting osteopathic medicine internationally. “A large number of students seek and perform international outreach/missions in their first two years, and international medical electives clerkships in their third and fourth year,” says Dr. McLeod.

“And some members of the OMM faculty go to Europe several times a year to teach OMM and also host physicians from Europe here on campus yearly to do the same. Kenneth J. Veit, DO ’76, MBA, provost, senior vice president for academic affairs and dean, went on a trip to mainland China to discuss and promote primary care, specifically osteopathic family medicine, and had several representatives from mainland China here on campus to continue the discussion.” [See the cover story in the *Digest*, 2007, Number 3, “Going Global: Osteopathic Medicine Enriches Worldwide Health.”] He adds, “Other faculty and students have organized or performed medical outreach/missions all over the world.”
Dr. Drummond is a captain in the Salvation Army, which she joined in 2001. She found fulfillment practicing family medicine but longed to serve overseas, aiding those who were disadvantaged and medically underserved. Having participated in short-term medical mission trips to India, Zambia and Haiti, in 2008 she requested an overseas assignment and was assigned to a hospital in Tshelanyemba, a village in Zimbabwe. The hospital’s sole doctor, a Salvation Army physician, had served 20 years and was now returning home to Canada.

Dr. Drummond arrived in Zimbabwe in February 2009 with a visa and working permit. She presented her medical credentials to the Medical Council of Zimbabwe and, while awaiting approval, began her supervised practice at the Salvation Army’s Howard Hospital in Glendale, the only functioning hospital near the capital city of Harare. The hospital’s chief medical officer was also a member of the Medical Council.

Within a month, the MD colleague who had arrived with Dr. Drummond—and had graduated from the same residency program—received her registration papers. Dr. Drummond’s case was repeatedly deferred. In June, she received word that she had been rejected because of her “American degree.”

In response to Dr. Drummond’s appeal, Zimbabwean officials suggested that she present more documentation. She sent an urgent request to PCOM, receiving “phenomenal support and encouragement” from Florence Zeller, vice president, alumni relations & development. Ms. Zeller recommended that Dr. Drummond correspond with Tana Fishman, DO ’95, who had been through a similar ordeal [see sidebar on page 13].

Despite additional documentation, including support from the AOA and the American Medical Association, and despite the country’s desperate need for physicians, Dr. Drummond’s appeal was denied at the end of September. The Salvation Army had expected to have greater influence in Zimbabwe, says Dr. Drummond; lay people from the Salvation Army held governmental positions. And an osteopathic medical student received temporary approval to work at Howard Hospital even while Dr. Drummond was making her appeal. The seeming disconnect was enormously frustrating.

“When I graduated in 1986,” says Dr. Drummond, “I knew there were countries that had restricted practice for DOs, but I expected that in the 20-plus years since my graduation, something would have changed, especially in countries where the need is great. In this age of globalization, we are truly citizens of the world. Our unique training as osteopathic physicians should set us apart in our approach to medical issues and health, but it should also resound with equality to our allopathic counterparts.”

According to the AOA, “After review of the osteopathic medical curriculum, the Health Professions Council of Zimbabwe denied the AOA’s request for full practice rights and instead referred DO licensure requests to the Natural Therapists Council.”

The AOA has recently created a one-page proclamation template to be sent to an agreeable health ministry or authority for signoff, which ideally can streamline the licensure process. The organization continues to attend meetings of the International Association of Medical Regulatory Authorities, the World Health Organization and similar bodies. “In a perfect world,” says Mr. Kerr, “we could send our leadership to meet one on one with representatives of licensing bodies abroad.

Technology and political trends may have shrunk the world for a matured osteopathic medical profession. But even halfway into its second century, there is considerable room for global growth.


**CINDY-LOU DRUMMOND, DO ’86**

**A REQUEST DENIED, AN ASSIGNMENT THWARTED**

**WHAT THE FUTURE HOLDS**

Mr. Kerr estimates that one to three countries per year grant practice rights to U.S-trained DOs. His office urges DOs to notify the AOA of the outcome of any inquiries they make, and to forward any correspondence they receive from international health agencies.
Avalon, New Jersey, has celebrated “Giunta Shore Week” in more than 40 years, Dr. Giunta’s family—his work, visit www.artmyers.com.

Beyond Snapshots Less Seen of the City of Light . . . and his photographs have been exhibited in museums and galleries throughout the country and globally. For more information about his work, visit www.artmyers.com.

Robert S. Maurer, DO, Edison, NJ, was awarded the 2011 UMDNJ–SOM Founders’ Award presented by UMDNJ – School of Medicine at the AOA Convention and Scientific Seminar on November 1, 2011.

Leonard C. Giunta, DO, West Chester, PA, and his family were highlighted in an article, “The Shore House,” published in the June 2011 issue of Philadelphia Magazine. For more than 40 years, Dr. Giunta’s family—consisting of 16 adults and 14 children—has celebrated “Giunta Shore Week” in Avalon, New Jersey.

Russell V. Silverman, DO, Longport, NJ, partnered with Cenegenics Medical Institute to establish a new-age management center for the Atlantic City region, R. Silverman Cenegenics in Somers Point. This service offers residents and visitors five-star services and a comprehensive, hands-on experience to learn how to live well longer.

D. Bruce Foster, DO, Waynesboro, PA, has had his third book published, a medical thriller called Kiss Tomorrow Goodbye, available on amazon.com or barnesandnoble.com. Dr. Foster is chief of Emergency Medicine at Waynesboro Hospital, and is medical director for Air Methods LifeNet 8-1, an aeromedical helicopter service.

Jacalyn Ann Danton, DO, Boca Raton, FL, was recently elected as senior vice commander of VFW post 10556, Boca Raton. She retired from the Army with the rank of colonel.

Barbara D. Dougherty, DO, Voorhees, NJ, regrets that she was unable to attend her 35th Class Reunion; her daughter was married on June 4. Dr. Dougherty looks forward to the next Reunion in June 2016.

Ted S. Eisenberg, DO, Philadelphia, PA, had his article “Implant Exposure Through a Breast Augmentation Incision Repaired with Porcine Acellular Dermal Matrix (Strattice™): A Technique to Ensure Graft Take” published in the May 2011 issue of Aesthetic Plastic Surgery. The Guinness World Record holder for the most breast augmentation surgeries performed in a lifetime, Dr. Eisenberg has developed a cosmetic breast surgery workshop offering 20 Category 1 CME credits.

Gilbert E. D’Alonzo, DO, Philadelphia, PA, was recognized by Philadelphia Magazine (May 2011) as one of the “Top Doctors in Pulmonary Disease.”

Gregory M. Christiansen, DO ’92, Chesterfield, VA, was inducted as president of the American College of Osteopathic Emergency Physicians at their Scientific Assembly held in Las Vegas on October 11, 2011.

John J. Kenny, DO ’77, Little Egg Harbor, NJ, was the recipient of the Robert S. Irvin, MD, Award for Medical Service, presented by the Southern Ocean Medical Center Foundation at their 40th Annual Chrysanthemum Ball held on November 5, 2011.

Robert D. Ligorsky, DO ’69, Scottsdale, AZ, became a Master Fellow of the American College of Osteopathic Internists (ACOI) and a member of the Gillium Society of the ACOI.

John J. McPhilemy, DO ’78, Lafayette Hill, PA, was elected president of the Philadelphia Orthopaedic Society.

Anthony J. Silvagni, DO ’82, PharmD, Fort Lauderdale, FL, professor and dean of Nova Southeastern University College of Osteopathic Medicine, was selected to serve as a Fulbright Senior Specialist scholar. He traveled to Slovakia in September 2011 to pursue his Fulbright endeavors at Comenius University Faculty of Medicine in Bratislava.
ANTHONY J. SILVAGNI, DO ’82, PharmD

Working to create a better healthcare system locally and globally by Colleen Pelc

There has never been a DO selected to be a Fulbright Senior Specialist Scholar … until now. Dr. Silvagi, professor and dean of Nova Southern University College of Osteopathic Medicine, was selected to travel to Slovakia in September and October 2011, to pursue his Fulbright endeavors at Comenius University Faculty of Medicine in Bratislava.

Created in 2000 to complement the traditional Fulbright Scholar Program, the Fulbright Specialists Program “promotes linkages between U.S. academics and professionals and their counterparts at universities abroad.” Specialists engage in short-term collaborative two- to six-week projects at higher education institutions in more than 100 countries worldwide.

Dr. Silvagi had already been in contact with Comenius University while developing his Fulbright proposal and said (in an interview prior to his trip), “I am looking forward to having the opportunity to work closely within the European medical education model and comparing it with the United States mode. My goal is to be better able to extract and utilize the advantages of both systems and incorporate them to further improve the quality of medical education within both institutions.”

He continued, “There will be significant opportunities to introduce some of the more contemporary electronic tools that we utilize in the United States, such as simulated mannequins, e-books, compressed video and standardized patients. In addition, as part of my responsibility there, I will be able to work with the medically underserved and impoverished Roma communities and evaluate their healthcare delivery and some of the cultural challenges that exist.”

Another major goal of Dr. Silvagi’s revolves around the education that he received while at PCOM: “As I have publicly said many times, my education at PCOM provided me with all of the tools to become an excellent physician and gave me the awareness to realize the responsibility each of us has in making a difference in health care and its availability to all people. In Slovakia, I will have the opportunity to introduce osteopathic medicine as taught in the United States. I will provide the model of a physician who is prepared to see the patient in a more holistic way.”

Additional opportunities that will follow from Dr. Silvagi’s Fulbright program include a speaking engagement at an international medical program in Prague and a celebration at the Slovak embassy in Washington, D.C.

CLASS OF 1982

John R. Bucholtz, DO, Columbus, GA, was appointed to the Residency Review Committee for Family Medicine, one of 28 specialty review committees of the Accreditation Council for Graduate Medical Education. Dr. Bucholtz is the director of medical education and program director of the family medicine residency program at The Medical Center – Columbus Regional Healthcare System.

CLASS OF 1983

Gary A. Aaronson, DO, New Hope, PA, was recognized by Philadelphia Magazine (May 2011) as one of the “Top Doctors in Pulmonary Disease.”

Daniel F. Battafarano, DO, San Antonio, TX, received two awards in 2011, the “Outstanding Clinical Educator Award” presented by the Internal Medicine Residency Program at San Antonio Military Medical Center (SAMMC) and the “Outstanding Faculty Medicine Clerkship Award” presented by the University of Texas Health Science Center – San Antonio (UTHSCSA). Dr. Battafarano is the chairman of rheumatology at SAMMC and clinical professor of medicine at the UTHSCSA.

Carol L. Henwood, DO, Pottstown, PA, had her article “Breast Cancer Awareness Month: Preparing for Your Mammogram,” published in the October 10, 2011, issue of The Mercury. Dr. Henwood is an independent member of the medical staff at Pottstown Memorial Medical Center, and is in practice with Pottstown Medical Specialists Inc. in Stowe.

David M. Lasorda, DO, Sewickley, PA, was included on the national “Best Doctors in America” list for 2011–2012 by Best Doctors, Inc. He was also recognized in the May 2011 issue of Pittsburgh Magazine for being among the region’s top doctors. Specializing in cardiology, Dr. Lasorda is director of the interventional cardiology fellowship program at Allegheny General Hospital and is a physician with Cardiology Associates, Inc., both in Pittsburgh. He is also an associate professor of medicine at Drexel University College of Medicine in Philadelphia.

Lee Pachter, DO, Elkins Park, PA, was recognized by Philadelphia Magazine (May 2011) as one of the “Top Doctors in Pediatrics.”

Antonios Zikos, DO, Wexford, PA, was named to the national “Best Doctors in America” list for 2011–2012 by Best Doctors, Inc. He was also recognized by Pittsburgh Magazine (May 2011) for being among the region’s top doctors. Specializing in pulmonary and critical care medicine, Dr. Zikos serves as medical director of the Neuro-Intensive Care Unit at Allegheny General Hospital and is a physician with Integrated...
Pulmonary Physicians, Ltd., both in Pittsburgh. He is also a clinical assistant professor of pulmonary/critical care medicine at Drexel University College of Medicine in Philadelphia.

**CLASS OF 1984**

Mark A. Melrose, DO, New York, NY, opened a new urgent care center, Urgent Care Manhattan.

Richard A. Ortoski, DO, Erie, PA, was featured in the article “Fight Against AIDS Continues, 30 Years Later” in the *Erie Times News* (June 23, 2011). The HIV medical director of the Northwest Pennsylvania Rural AIDS Alliance, Dr. Ortoski is a physician with Fairview Family Medicine. He is also the chair of the primary care education department, a clinical professor of family medicine and human sexuality, and the clinical director of the Primary Care Scholars Pathway at Lake Erie College of Osteopathic Medicine.

**CLASS OF 1985**

Bruce E. Maniet, DO, Howe, TX, was elected to serve a two-year term on the Board of Trustees of the Texas Osteopathic Medical Association.

Gary W. Raab, DO, Ocean City, NJ, was named “2011 Spirit of Shore Physician of the Year” by Shore Memorial Hospital. Dr. Raab has been a family practice physician at Shore Memorial Hospital since 1987.

**CLASS OF 1986**

Carol Denicola Cola, DO, Pottstown, PA, had her article “Stay Safe While in the Sun: Don’t Leave Home Without All the Essentials” published in *The Mercury* (June 13, 2011). Dr. Cola is a member of the medical staff and department of surgery at Pottstown Memorial Medical Center and an associate at Dermatology Specialists P.C. located in Pottstown and Collegeville.

Mary B. Russo-Colt, DO, Erie, PA, joined the medical staff of Saint Vincent Primary Care.

**CLASS OF 1987**

Bart L. Matson, DO, Clarion, PA, joined the medical staff of University of Pittsburgh Medical Center’s Magee Women’s Specialty Services.

Stanley J. Savinese, DO, Ridley Park, PA, was appointed medical director of the Visiting Nurse Association of Greater Philadelphia’s Hospice of Philadelphia.

Kennedy J. Sbat, DO, Pottstown, PA, had his article “Early Diagnosis, Treatment Key to COPD Management” published in *The Mercury* (July 11, 2011). Dr. Sbat is a member of the medical staff of Pottstown Memorial Medical Center.

**CLASS OF 1988**

Paul A. Chemello, DO, Frankfort, IL, joined the medical staff at Advocate Medical Group.

Neal M. Davis, DO, Carbondale, PA, was elected chief of staff of Marian Community Hospital.

**CLASS OF 1990**

David A. Dalsimer, DO, Raleigh, NC, joined the medical staff of Southeastern Orthopedics, an affiliate of Southeastern Regional Medical Center.

Frank A. Filipetto, DO, Fort Worth, TX, has been named chairman of the department of family and community medicine of the University of North Texas Health Science Center, Texas College of Osteopathic Medicine.

Mark S. Gottlieb, DO, Collegeville, PA, joined the medical staff of Upper Providence Family Medicine.

Denise M. Harnois, DO, Ponte Vedra, FL, a hepatologist at the Mayo Clinic in Jacksonville, specializes in liver diseases and liver transplantation.

**CLASS OF 1991**

Michael S. Weiner, DO, Washington, DC, was appointed chairman of the Clinical Information Systems Expert Panel for the North Atlantic Treaty Organization. Additionally, Dr. Weiner was appointed chief medical information officer for the new joint Veterans Administration and Department of Defense’s EHR Initiative. He is developing one computer system that will consolidate all military records for veterans’ health—from enlistment through end of life.

**CLASS OF 1992**

Helen M. McCullough, DO, Wilmington, DE, was recognized by *Delaware Today* (October 2011) as one of the “Top Docs in Obstetrics.”

**CLASS OF 1993**

Joseph W. Hufnagel, DO, Norwalk, CT, was appointed medical advisor to the town of Wilton, Connecticut. Dr. Hufnagel is on staff at Doctors’ Pediatric in Wilton.

Dean A. Reali, DO, Lake George, NY, joined the medical staff at St. Mary’s Hospital.

Joseph W. Stauffer, DO, Palo Alto, CA, was appointed chief medical officer and vice president of strategy at PharmacoFore, Inc. This biopharmaceutical company develops next-generation abuse-resistant prescription drugs.

**CLASS OF 1995**

John B. Bulger, DO, Danville, PA, was appointed chief quality officer for Geisinger Health System. Dr. Bulger is director of the hospitalist service line and of osteopathic medical education at Geisinger Health System. He is also a regional assistant dean and clinical assistant professor of medicine at Philadelphia College of Osteopathic Medicine and an associate professor of medicine at Temple University School of Medicine.

Frances A. Feudale, DO, Drums, PA, joined Lehigh Valley Physician Group as an emergency physician at Hazleton General Hospital.

Jeffrey A. Heebner, DO, Flourtown, PA, was reappointed to the State Board of Osteopathic Medicine by Pennsylvania Governor Tom Corbett.

Richard J. Laracy, DO, Conway, NH, was featured in the article “Memorial Hospital to Screen All Newborns for Critical Congenital Heart Disease,” published in *The Conway Daily Sun* (September 29, 2011). Dr. Laracy’s advocacy efforts have been instrumental in the widespread use of the CCHD screening measure.

John J. Orris, DO, Chester Springs, PA, was featured in the article “Baby Boom: There Are a Wealth of Options for Couples
DAVID HOLLOBAUGH, JR., DO ’01

A Gift of Life by Colleen Pelc

In September 2003, Dr. Hollobaugh began a journey—both medically and spiritually. His heart function had not improved after a serious bout with viral myocarditis, and he learned that his long-term medical therapy would include the need for heart transplantation. Like so many physicians, Dr. Hollobaugh grappled with the experience of being both a doctor and a patient and the complexity of emotion that arises from a battle with a grave illness.

In July 2004, an organ donor was identified, and Dr. Hollobaugh was found to be the best-matched potential recipient for the heart (other organs would be transplanted into two other patient recipients). Dr. Hollobaugh's new heart came from 19-year-old Andrew Marion of Danville, Pennsylvania, who was killed in a tragic ATV accident. In one of life's strange coincidences, it was discovered that Dr. Hollobaugh had once treated Andrew at a clinic while doing his pediatric residency. Even more unexpected was the fact that Andrew was the son of a nurse who cared for Dr. Hollobaugh during and after his transplant surgery.

Dr. Hollobaugh recognizes that his transplant was a miracle—an answer to his prayers. “Throughout the duration of my illness, I prayed for a return to health. I prayed for the man or woman who would become my donor—and I now pray for Andrew every day after my transplant. I pray for his family and hope that they can take some solace in the fact that a part of their loved one still lives on through others.” He continues, “And I pray for all those who cared for me. They are God’s instruments.”

Through his journey, Dr. Hollobaugh also gained a new awareness of what it means to be a physician. “It is easy to get so caught up in the process of becoming a physician, and then later, in practicing as a physician. We must realize that it is a privilege to treat and to heal others—not just technically, but emotionally. We need to remember that there is so much more to a patient than his or her illness.”

Carl Hoegerl, DO ’01, a former PCOM classmate and close friend of Dr. Hollobaugh, spent two years writing *Andrew’s Gift*, a tribute to his colleague, to Andrew and to Andrew’s family. “*Andrew’s Gift* was a story that I felt compelled to tell,” he says. “It’s so powerful; it is about life itself. And life is an ultimate gift.”

For more information about *Andrew’s Gift* (June 2011), visit amazon.com or lulu.com.

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Struggling to Conceive—Once They Get Past the Rumors and Hype,” published in *Main Line Today* (November 2011). Dr. Orris is a reproductive endocrinology specialist at Main Line Fertility in Bryn Mawr, Paoli and West Chester.

CLASS OF 1996

Steven G. Eisenberg, DO, San Diego, CA, was featured on a segment of the *Today Show* (July 18, 2011), “Doctor ‘Tunes’ into Cancer Patients’ Needs.” Dr. Eisenberg is an oncologist who writes songs for patients undergoing chemotherapy. He believes music therapy helps patients in pain get through their hardest times.

Howard M. Hammer, DO, Maple Glen, PA, was named assistant clinical professor of otolaryngology at Philadelphia College of Osteopathic Medicine. Dr. Hammer is a physician and partner at Bucks ENT Associates.

CLASS OF 1997

Scot A. Currie, DO, Elizabethville, PA, joined the Department of Surgery at Altoona Regional Health Systems.

Gregory J. Wood, DO, Massillon, OH, an interventional cardiologist, joined Mercy Cardiovascular Institute in Canton.

Kristie Ann Zangari, DO, Milton, DE, joined the hospitalist program at Beebe Medical Center.

CLASS OF 1998

David M. Gilbert, DO, York, PA, joined Hanover Cardiology Associates PC as medical director of the new cardiovascular catheterization lab.

Jennifer M. Landes, DO, Quakertown, PA, was named chairperson of the department of obstetrics and gynecology at Grand View Hospital in Sellersville.

James V. Lieb, DO, Windber, PA, joined the medical oncology team at Conemaugh Memorial Medical Center in Johnstown.

CLASS OF 1999

Beth A. Clark, DO, New Paris, PA, was highlighted in the article “Guernseys—Just What the Doctor Ordered,” which appeared in the June 4, 2011, issue of *Lancaster Farming*. 
Eric R. Gejer, DO, Warrington, PA, is a member of the Quality Advocacy Committee of the Pennsylvania Chapter of the American College of Cardiology (ACC). Dr. Gejer was invited to participate in a bipartisan legislative conference for the ACC in Washington, DC, from September 11-13, 2011. He is on the medical staff at Central Bucks Specialists in Doylestown.

Rhonda L. Randall, DO, Orlando, FL, was among the recipients of the “Alumni of Distinction Awards” presented by St. Vincent College at a reception and dinner held on October 7, 2011. Dr. Randall is chief medical officer for United Healthcare Medicare and Retirement.

CLASS OF 2000
Jamison S. Jaffe, DO, Ambler, PA, was recognized by Philadelphia Magazine (May 2011) as one of the “Top Doctors in Urology.”

CLASS OF 2001
Liam A. Haveran, DO, Whitinsville, MA, was highlighted in the article “Adjusting the Tools of His Trades,” which appeared in the Cape Cod Times (June 16, 2011). Dr. Haveran worked as a plumber on Cape Cod before deciding to go back to school; he is now a colon and rectal surgeon at Southeastern Surgical Associates in Hyannis.

CLASS OF 2002
Hobart J. Carr, DO, Warren, PA, joined the hospitalist program at Warren General Hospital.

Chad R. Gordon, DO, Lutherville, MD, was featured in the article “Skulls and Bones: Area Native Setting New Standards in Surgery,” published in the Jewish Exponent (September 22, 2011). In 2011, Dr. Gordon became clinical director of the face transplant program at Johns Hopkins in Baltimore. He now serves as assistant professor in the Department of Plastic and Reconstructive Surgery at the Johns Hopkins University School of Medicine.

CLASS OF 2003
Joshua M. Baron, DO, Blue Bell, PA, was appointed assistant professor in the department of emergency medicine at Philadelphia College of Osteopathic Medicine. Dr. Baron is a staff physician at Main Line Emergency Medical Associates.

Tecla M. Brabazon, DO, North Wales, PA, joined the department of emergency medicine in association with Doylestown Emergency Associates.


Jennifer L. Gilbert, DO, State College, PA, joined the medical staff of Mount Nittany Pain Management Clinic.

Kelly Curtin-Hallinan, DO ’07, and husband, Michael, welcomed their second daughter, Cara Caitlin, into the world on October 21, 2011.


Michael M. Langer, DO ’97, Avon Lake, OH, and his wife, Lori, are the proud parents of Sylvia Mary born on August 6, 2011. Baby Sylvia joins big sister, Vanessa, in the growing Langer family.

Alicia R. Meadows, DO ’10, Milton, PA, and her husband, Jeffrey Meadows, II, are the proud parents of Jeffrey Meadows, III, born on June 28, 2010, and Ethan James, born on October 6, 2011.

Margaret A. Nam, MS/Psy ’10, Honolulu, HI, and her husband, Edwin, are the proud parents of Maggie Hanna, born on September 1, 2011.

Michael A. Washinsky, DO ’10, Albuquerque, NM, and his wife, Gillian, are the proud parents of River Coltrane, born on January 22, 2011.

Dana Weinstein, DO ’01, Norristown, PA, and her husband, Brett, are the proud parents of twins Ella Olivia and Alec Samuel, born on May 5 and May 6. The babies join their big brother Cole, age two.
Sharing a Passion for Helping Others by Colleen Pelc

As coordinator of homeless services for the Philadelphia Department of Behavioral Health, Mr. Holloman helps thousands of people each year through five Philadelphia Homeless Outreach teams and through the assistance of four different nonprofit agencies.

“Today my job entails me working with various city agencies, departments and nonprofit organizations in serving individuals and families who are chronically homeless or experiencing homelessness with housing opportunities, mental health and addiction treatment, if needed,” he says.

“Homeless outreach is a 24-hour-a-day, 7-day-a-week service to the city of Philadelphia. On average, Philadelphia Homeless Outreach teams have contact with about 5,500 individuals a year. In comparison to other urban cities similar in size to Philadelphia, this number is below the average. Over the years, Philadelphia has been a model for other cities in reducing homelessness, and I am proud to be a part of this model of success,” Mr. Holloman says.

“However, this effort is not finished until we are able to house everyone who is experiencing homelessness.”

As the seasons start to shift and the cold winter months approach, Mr. Holloman says that many of his team’s efforts are ramped up.

“During these months, additional housing resources are available to the homeless population. We provide extra outreach staffing on the street to deal with the increased number of calls from concerned citizens. Shelter beds are also expanded to accommodate the increase of placement to the shelters,” he says.

Mr. Holloman adds that one of the biggest misconceptions about the homeless is that they want to be homeless and don’t want any help.

“This is far from the truth. In fact, many of the individuals and families want help and would like to be helped. Part of that help is providing that person with the right resources that will provide stability in their lives. I see myself as a change agent,” Mr. Holloman says.

“I take pride in motivating a person to see their strengths even when they don’t believe that they have any. It is a challenge; however, it is a challenge I welcome.”

Stephen P. Kovacs, DO, Erie, PA, was highlighted in the August 21, 2011, Erie Times-News article “Lung Doctor Returns to Erie with New Technology.” Dr. Kovacs is a pulmonologist and critical-care specialist who practices at Chest Diseases of Northwestern PA. He uses cutting-edge technology to help detect lung cancer at an earlier and more treatable stage.

Ryan R. Ridenour, DO, State College, PA, was one of the guests on the live call-in program titled “To the Best of My Knowledge,” which aired on WPSU-TV, WPSY-FM and the Pennsylvania Cable Network on October 20, 2011. Dr. Ridenour discussed the symptoms, triggers and treatment options for migraine headaches. He specializes in family medicine at Penn State Hershey Medical Group.

Monica Shamsid-Deen Carter, DO, High Point, NC, was featured in the article “Doctor Shares Story of Breast Cancer to Encourage Others,” published in The Dispatch (September 21, 2011). A personal experience with the disease has changed how Dr. Carter values life while also making her an advocate to encourage others to pay attention and be tested.

Emily T. Suvock, DO, Danville, PA, joined the gastroenterology department of Geisinger – Scenery Park.

CLASS OF 2004

Sunny Gupta, DO, Philadelphia, PA, joined the medical staff of Rothman Institute’s Bensalem and Northeast Philadelphia offices.


Leslie A. Saltzman, DO, Philadelphia, PA, is director and co-founder of Rittenhouse Women's Wellness Center (www.rwwc.com). The center has received National Committee for Quality Assurance Level 3 Patient-Medical Home recognition for facilitating a coordinated approach to quality health care for female patients.
CLASS OF 2005

David L. Ambrose, Jr., DO, Port Matilda, PA, joined the cardiology department at Geisinger – Grays Woods.

Megan DelBaggio Fernandez, DO, Harrisburg, PA, joined the medical staff at Geisinger Medical Center.

Emmanuel R. Isaac, DO, Boca Raton, FL, was featured in the article “Hard Times Prompt Doctors to Focus on Poor, Uninsured,” published in the Orlando Sentinel (October 24, 2011). Dr. Isaac is a member of the National Health Service Corps, which serves patients in low-income areas who otherwise could not afford to see a doctor. He is currently a family practitioner at Broward Community and Family Health Centers in West Park, a refuge for patients who have fallen on hard times.

Evan B. Lenkowsky, DO, Doylestown, PA, joined the department of emergency medicine in association with Doylestown Emergency Associates.

Scott C. Lindsay, DO, Columbus, OH, a plastic and reconstructive surgeon, joined the medical staff of CMH Regional Health System in Wilmington.

Chavone D. Momon-Nelson, DO, Lansdowne, PA, joined the medical staff of Penn Medicine Woodbury Heights.

Jeremy L. Patterson, DO, Danville, PA, joined the department of pulmonary medicine and critical care at Geisinger Medical Center.

CLASS OF 2006

Francis M. Maguire, DO, Syracuse, NY, joined Critical Care Associates and is now an attending physician in Crouse Hospital’s Intensive Care Unit.

CLASS OF 2007

Ashley R. Graeff, PA-C, Lancaster, PA, is a physician assistant with Internal Medicine Hospital Specialists at Lancaster General Hospital. She was featured “In the Spotlight” which appeared in the Lancaster Sunday News (October 9, 2011) to promote National Physician Assistant Week.

Michael P. Greenage, DO, Williamsport, PA, joined the medical staff of Susquehanna Health Behavioral Services.

Brittany Mentzer Stofko, DO, Holland, PA, joined the medical staff of Penn Medicine Woodbury Heights.

Pamela Q. Taffera, DO, Phoenixville, PA, was featured in the article “Attracting Future Doctors to Berks” published in the Reading Eagle (July 19, 2011). Dr. Taffera is associate director of the family practice residency program at St. Joseph Medical Center in Reading.

CLASS OF 2008

Benjamin J. Saks, DO, Montour Falls, NY, joined the medical staff of Schuyler Hospital and will specialize in internal medicine at Montour Falls Primary Care Center.

CLASS OF 2010

Jacqueline A. Ferenz, MS/ODL, Yardley, PA, was appointed senior product manager at Wolters Kluwer Pharma Solutions.

Margaret A. Nam, MS/PsyD, Honolulu, HI, is working as a counselor at a residential program for dual diagnosis in Honolulu.

Suzanne M. Smith, DO, Southampton, PA, was awarded second place in the Pennsylvania Osteopathic Medical Association’s Clinical Essay Contest for her entry titled “Screening and Surveillance—Protecting Yourself Against Health Burglars: Recommendations for Detecting Cancer Early.” Dr. Smith intends to complete a research fellowship at Wayne State University in Michigan next year.

Michael A. Washinsky, DO, Albuquerque, NM, is completing his psychiatry internship at the University of New Mexico.

CLASS OF 2011

Alicia Y. Huff, DO, Lincolnton, NC, was featured in the article “GHSU Surgery Resident Works to Spread Breast Cancer Awareness Among Young Women” published in the Augusta Chronicle (October 12, 2011). Dr. Huff is a first-year resident in general surgery at Georgia Health Sciences University.

In Memoriam

William J. Athens, DO ’57, Columbus, OH, July 15, 2011.


John H. Bender, DO ’82, New Albany, IN, September 16, 2011.


Philip A. Brick, DO ’53, Margate City, NJ, August 6, 2011.

Linda Latisko Castenova, PsyD ’08, Phoenixville, PA, September 15, 2011.

Arthur Melvin Cooper, DO ’57, Palm Beach Gardens, FL, October 18, 2011.

John F. Curreri, DO ’54, Merchantville, NJ, August 19, 2011.

Francis E. Davis, DO ’58, Palm Bay, FL, July 17, 2011.


Donald Farrow, DO ’58, Miami Shores, FL, August 24, 2011.

Bernard Fisher, DO ’52, Bryn Mawr, PA, November 14, 2011.

June Hackman (Capitain) Galebach, RN ’54, Hobe Sound, FL, October 9, 2011.

George O. Hoover, DO ’44, Oberlin, OH, June 9, 2011.

Myron Howell, DO ’63, Fort Lauderdale, FL, October 12, 2011.

William A. Jamack, DO ’91, Bloomsburg, PA, September 27, 2011.

Kenneth J. Lee, MS/FM ’11, Philadelphia, PA, August 16, 2011.


Samuel V. Origlio, DO ’45, Denver, CO, May 18, 2011.


E. Norman Weiss, DO ’72, Upper Darby, PA, July 7, 2011.
Change of Course
by Richard M. Pescatore II (DO ’14)

My stomach twisted when the dispatcher read the address over the radio. Unfortunately, in my tiny hometown, I was the only EMT around—so we drove fast. Diesels roared, sirens screamed, and within minutes the ambulance pulled up into the driveway of my home. I found my mother on the cold floor, my dad kneeling beside her. He looked up as I threw open the door—like so many times before, only endlessly different. “Help.”

I did the things that medics do. My mom was quickly placed and strapped into the waiting stretcher. I administered oxygen. I checked her vital signs and dutifully recorded them on the paper chart. My father watched with expectant eyes as I moved about the ambulance, pulling supplies and manipulating wires. All the while, I despaired, knowing how little I knew. My love of "medicine" to that point had been a false product of my myopia, and as I surrendered my mother to the receiving doctor I knew that I needed to become a physician. At that moment I longed for the knowledge to help and to heal, and I set out to change my course.

At the time, I was a midshipman second class (a junior) at the U.S. Naval Academy. EMS had been just a hobby, an exciting escape on weekend liberty and winter leave. I had already committed to the Submarine Service, and my engineering degree satisfied almost none of the medical school prerequisites. I began to use my electives with an eye toward the future. Instead of “double easy” (Electrical Engineering for Humanities Majors), I took biology. Saturday liberty became less about escaping to Baltimore and more about shadowing Annapolis DOs. After graduation, I spent half of Nuclear Power School doodling Stars of Life on “Aspects of Reactor Plant Operations” notes. Assigned later on as a legal officer, I leaned through organic chemistry textbooks between courts martial.

Ultimately, I made it to PCOM. Not knowing what to expect, I quickly found myself awash in a sea of notes, books and cadavers. It was a different kind of difficult, an academic adversity that I’d never encountered before. Shined shoes and firing solutions were worth nothing on a multiple choice exam, and I struggled to find my place. Through luck or fate, I had been placed in an anatomy group that eased the adjustment. Kamun’s work ethic, Bill’s excitement, Rachel’s affect, and Pat’s wisdom—as a team they readily worked to help me along, embodying the “family” that the admissions office had claimed this school to be.

“My love of ‘medicine’ to that point had been a false product of my myopia, and as I surrendered my mother to the receiving doctor I knew that I needed to become a physician. At that moment I longed for the knowledge to help and to heal, and I set out to change my course.”

It’s second year now. “Xs” on the calendar mark an inexorable countdown toward boards, and the sun is long gone when I leave the library. Every day holds a new lesson, be it from a professor, a patient or a classmate. When the books stack high and the mood dips low, I think back to that day on the ambulance. There’s nowhere I’d rather be than right here, right now, working to become the physician I need to be.
I AM WHO I AM BECAUSE OF PCOM

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