Challenged to Serve

INSIDE

Fresh faces in Wichita
Recruiting rural Kansas doctors
Alumni provide disaster relief
Learning opportunities span the world
Four KU School of Medicine–Wichita students share what they learned abroad.

Grads answer call for Haitian aid
Rick Moberly, MD; Jennifer Koentz, MD; and Aaron Davis, DO, provided aid to those affected by January’s earthquake.

“River Me Timbers”
Medical school embraced its inner pirate during the annual River Festival.

Full, four-year campus on the horizon
With Kansas in need of more doctors, the KU School of Medicine identified Wichita as an ideal place for expansion both in terms of moving to a full, four-year curriculum as well as expanding our class size.

Recognition and support is growing
• The KU School of Medicine–Wichita has an annual economic impact of $49.7 million in the metropolitan area.
• About half of Sedgwick County’s practicing physicians are graduates of the KU School of Medicine–Wichita and/or one of our residency programs—a surprising statistic given the size and level of sophistication of the Wichita medical community.
• Out of 105 Kansas counties, 102 are currently being served by a graduate of the medical school and/or a residency program in Wichita.

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Welcome new students
The Wichita Campus gave a warm welcome to the new class of 51 3rd-year students during orientation week in June.

Challenges and rewards for a rural doctor
“Strong relationships” attracted Bonnie Cramer, MD, to practice in Concordia, Kan.

Attracting physicians to western Kansas
Sheila Scheffe, MD, can attest to the benefits of practicing in a small town.

How You Can Help
There are many ways you can help support our efforts to educate doctors for Kansas:

Donations by Mail - KU Endowment, 1010 N. Kansas, Wichita, KS 67214
Online Giving - kuendowment.org/givenow

We welcome the opportunity to visit with you about how you might help. And we assure you that 100 percent of your gift will benefit the area of your choice. Please call Heather Clay at (316) 293-2601 or send her an e-mail at hclay@kuendowment.org.

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Bonnie Cramer, MD, a Wichita resident alumna, is one of three family practice physicians in the town of Concordia, Kan., 140 miles north of Wichita. With a population of 5,714, it’s just the right size and has the type of lifestyle she’s always wanted.

Following her around for a day this past spring revealed a doctor committed to her patients and appreciative of the opportunity to serve in a small Kansas town. A soft-spoken physician, Dr. Cramer usually sees about 15 to 20 patients a day at the Cloud County Health Center. Following her around for a day this past spring revealed a doctor committed to her patients and appreciative of the opportunity to serve in a small Kansas town. A soft-spoken physician, Dr. Cramer usually sees about 15 to 20 patients a day at the Cloud County Health Center. The family-friendly environment of Concordia, the interaction with patients, and the opportunity to work as part of a medical team of physician assistants and other medical professionals are what Dr. Cramer said she’s always wanted.

Growing up on a farm two hours east of Concordia, Dr. Cramer wanted to be a nurse but decided in high school to become a doctor. “I wanted to be the one making the decisions.”

At 9:30 a.m., she drives a few blocks from the clinic to the Sunset Home. After reviewing the patients’ charts and visiting with several aides, she begins making rounds. A 60-year-old man sits in a chair, his head down. Her questions elicit clipped responses. “What doesn’t feel good?” she asks. “My legs.” “We did physical therapy, how’s that going?” “Pretty good.” At her request, he gets up and walks. “The nurses say you’re still not eating, why not?” “I don’t know.” “The nurses are kind of worried. What if we try Megace [an appetite stimulant]?” He nods. “Can I listen to you?” She leans forward with her stethoscope and touches his shirt pocket. “Still smoking?” He smiles. “Cigars.”

Back at the nurses’ station, Dr. Cramer recounts her observations on a hand-held recorder, a routine she’ll follow throughout the day. By noon, Dr. Cramer has completed her visits and returns briefly to the clinic. Lunch, served with a friendly hello by the owner of Hearty’s, a downtown barbecue restaurant, is followed by a short drive to Mount Joseph Senior Community for more patient visits.

“You develop strong relationships in a small town,” she said. “People know you wherever you go.” If she stops at the local Wal-Mart, the manager, a member of the hospital’s board of directors, might spot her and holler: “Doctor Cramer!” But that friendliness is what she’s used to, though at times embarrassed by.

She enjoys the variety of her medical practice. What she’ll see a lot during her visits to nursing homes, she said, is depression. “It’s pretty prevalent.”

She steps inside the room of an elderly woman. “How’s your appetite?” she asks. “What appetite?” she responds. “Do you think your depression is getting worse?” “Could be.” “I increased your medication, have you noticed any difference?” No response. “Do you think it might help to see a psychiatrist to make you feel better?” “Are you kidding?” she responds sharply. “OK. I won’t bring it up again. Are you breathing OK?” “Well, I guess I am, I’m still alive.” After listening to her heart and lungs, Dr. Cramer offers a cordial farewell but gets no response. “I don’t know that any more medications would help her,” she comments after she leaves the room.

Her husband, who’s a history teacher in Salina, asked her on their first date: “How do you deal with everything as a physician that you have to?” Her answer: “What bothers me the most is that it doesn’t bother me as much as it should.”

At 3 p.m., she sees her last patient, an 89-year-old Catholic nun. “How are you doing?” she asks. “Oh, honey, I’ve had the worst month of my life.” A blood clot in an artery in her arm had to be removed. “Do you have any questions?” “A lot of them — when you’re not here. I need to make a list.” “Let me know if you need anything,” Dr. Cramer says after completing her examination. “I’m glad you came,” the nun quiedy says.

Bonnie Cramer, MD

When Dr. Bonnie Cramer came to Concordia in August 2009, fresh out of residency in Salina, people were excited to have a new doctor. “Some of them told me jokingly: ‘Are you sure you’re old enough to be a doctor?’ ”

Bonnie Cramer, MD

A day in the life of a rural doctor

At 4 p.m., Dr. Cramer heads back to the hospital to finish reviewing patients’ charts and lab work and to see if anything has come up while she was away. She and Brian pick up their children from daycare later that afternoon. In the evening, she and Alli plant flowers in their garden. “She loves playing in the dirt,” Dr. Cramer said. By 10:30 p.m., with the children asleep, Dr. Cramer calls it a day.

Learn more about the Kansas Bridging Plan and other Rural Health and Educational Services: http://ruralhealth.kumc.edu/
We want to build a new critical-access hospital at the airport,” he said. “We can’t find in the nation, other than military, that has direct taxiway access to a runway.” With it, specialists could quickly be flown in and critical care patients flown out. Such a hospital would provide an added bonus: “We’re convinced that it will help us recruit doctors and grow our community.”

Out of the 105 counties in Kansas, 102 are currently being served by a graduate of the medical school and/or a residency program in Wichita.

S heila Scheffe, MD, a Wichita student and resident alumna, wasn’t sure she wanted to return to her rural Kansas roots after medical school. But during her fourth year, she completed a month of training in Tribune, Kan., and decided it was where she wanted to be. “I liked how the community respected its doctors, and how doctors interacted with the community,” she said. Dr. Scheffe also understands why it isn’t easy to attract physicians to out-of-the-way, slower-paced settings. “I was born and raised here, so this wasn’t a huge surprise.”

Still, she was worried when she arrived in 2008 whether Tribune, a town in far west Kansas with 835 people, could support five doctors. “They have proven they can.”

Working together, supporting one another
James Wahlmeier, CEO of Cloud County Health Services in Concordia, Kan., (population 5,714) knows how difficult it is to recruit doctors. “It was kind of a revolving door until about seven years ago,” he said of doctors coming to and leaving Concordia. That’s when two doctors came to town and helped recruit Bonnie Cramer, MD, (featured on page 4) in 2009. “It’s been really stable since then. We’re probably close to being fully staffed.” Now the north-central Kansas community has a unique idea to replace its 60-year-old hospital, said Kirk Lowell, executive director of CloudCorp, an organization that promotes economic development in Cloud County.

“We want to build a new critical-access hospital at the airport,” he said. “We can’t find another hospital in the nation, other than military, that has direct taxiway access to a runway.” With it, specialists could quickly be flown in and critical care patients flown out. Such a hospital would provide an added bonus: “We’re convinced that it will help us recruit doctors and grow our community.”

Enjoying rural life and community connections
Matthew Heyn, administrator for the Pawnee Valley Community Hospital in Larned, Kan., 130 miles west of Wichita, has a slightly different problem. The town of 4,200 has a new medical clinic, but it’s vacant. A new physician is what’s needed.

Heyn’s recruiting message includes promoting the advantages of living in a small town, “away from the hustle and bustle of city life,” and the fact that physicians are more than nameless faces in a larger community. “At the end of the day, they’re heroes in the community,” he said of physicians who serve in small towns. “They can make a big impact in a short while.”

Dr. Scheffe said working in Tribune – and towns in two other nearby counties – allows her to perform a variety of medical procedures she couldn’t do in a city with specialists. Plus, she’s closer to her parents, who live 30 miles away. She’s certain she made the right decision to come to Tribune. “You just can’t beat a relationship with the people out here. It’s just golden.”

Scholarship encourages medical practice in ‘acute need’ areas of Kansas
Rachel Krob (W11) of Wichita received the Olive Ann Beech Scholarship for her third and fourth years at the KU School of Medicine–Wichita. The $10,000 scholarship is awarded for two years to a third-year student based in part on the recipient’s personal integrity and excellence in patient care as well as a desire to serve as a primary care physician and a willingness to consider committing, after residency, to two years of practice in areas of acute need in Kansas.

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Orientation week at the KU School of Medicine–Wichita gives students just a taste of what they can expect once their clinical rotations begin. Early mornings, hectic schedules, heaps of information.

“It was annoying at first, but on day one of clinical rotations, I was glad I had been getting up early the previous week,” said 3rd-year student Chris Cassidy, adding that orientation week was valuable, too. “Some of the things you hear in Introphase aren’t said anywhere else, and they’re things you need to know.”

Wichita welcomed Cassidy and 50 other new 3rd-year students in June; students from places like Hays and Overland Park, Kenya and China. During the first week, students learned to tie surgical knots, present patients, write prescriptions, and read x-rays. It’s also a week for them to get to know each other better and become familiar with faculty and staff, as well as the Wichita Campus.

“This was a very good transition from the didactic years (1st and 2nd) to the clinical years (3rd and 4th),” said Geoffrey Konye. “The staff members were very helpful in showing us where we needed to be. The family fun time at Eberly Farm was very good, not to mention the personalized attention and presents we received at the events.”

The annual welcome picnic at Eberly Farm proved to be the favorite part of orientation week for many students. Garold Minns, MD, left, presented each student, including Brian Gulf, with a personalized gift, courtesy of the Wichita Dears Club. The picnic provided time for students and their families to get to know each other as well as faculty and staff.

During their first week of orientation in Wichita, 3rd-year students from the basics of patient exams. Heidi Johnson, left, practices using the otoscope on Alisa Jost.

Third-year student Chris Cassidy intently practices tying surgical knots during the suture lab as part of orientation week.

George Farha, MD, emeritus professor of surgery and a KU School of Medicine–Wichita founder, spoke on the importance of maintaining the profession of medicine at the White Coat Ceremony in June and offered the following: “Your patients do not care how much you know until they know how much you care.”

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Creating learning opportunities around the world

Shane Everett Thoreson, MD
Quito, Otavalo, Napo River Basin, Ecuador
Family Medicine, Smoky Hill Family Practice Center

Objectives: “I wanted to go to an underserved area in a Spanish-speaking country. Ecuador was a place where my skills gained in medical school could be used to their fullest, and I could further develop my Spanish-speaking ability.”

Challenges: “There were many times a clash in the way the Ecuadorian people and I thought about disease and the causes of it happened. For example, in traditional Ecuadorian healing, sickness is brought on by a bad spirit, so to get rid of the disease you go to a healer for a cleansing to rid your body of the bad spirit. Because this way of thinking is still common in the culture, explaining diseases as a biological process was difficult, and the concept of chronic disease that is managed for the long-term rather than cured after one visit to the doctor was often not understood.”

Clinical moment: “Our group was working in a health brigade in the rainforest. My morning’s work was spent with a multi-generational family. I helped a newborn baby that was sick, as well as the baby’s grandparents and everyone in-between. As a future family physician, it was exciting to work with a single family that spanned the gamut. It was a glimpse of what I’d be doing in the future.”

Cultural moment: “We visited the home of a traditional reed-mat weaver. He demonstrated his work and told us about the weaving process. The visit opened my eyes to the types of living and working conditions many of the indigenous people of Ecuador face every day. Many of their houses have dirt floors with little ventilation or light, and their work is grueling on the body. Many of the complaints faced in the hospital and health brigades were directly related to their work and living conditions.”

Emily Allred, MD
Dublin, Ireland
Obstetrics and Gynecology
Medical College of Wisconsin Affiliated Hospitals

Objectives: “I wanted to examine possible reasons for the lower Caesarean section rate in Ireland compared to the United States, including the different uses of external fetal monitoring and fetal scalp blood monitoring.”

Challenges: “My biggest challenge was not being recognized as a senior medical student because fourth-year students in Ireland have a lot less clinical responsibilities.”

Clinical moment: “Watching a woman deliver her twins naturally and finding out that they were both boys — the mom didn’t know the sex of the babies ahead of time!”

Cultural moment: “Seeing a woman whose baby was diagnosed with a condition that was not compatible with life, and knowing that because of the laws in Ireland, her choices were to carry the pregnancy to term or to go to the United Kingdom for an elective termination.”

Giao Q. Pham, MD
Ho Chi Minh City, Vietnam
Pediatrics, KU School of Medicine–Wichita

Objectives: “From a medical standpoint, this was a great chance for me to learn about a variety of tropical illnesses that I would otherwise never encounter. I specifically chose dengue illness. Dengue is the most common and rapidly spreading mosquito-borne viral disease worldwide, and it is the leading cause of hospitalization and death among Vietnamese children.”

Challenge: “While in the hospital, my greatest challenge was communicating with patients through medical terminology. I often asked the residents to translate for me specific medical terms for illnesses or body parts. Although I fluently spoke the language, medical terms are not part of everyday conversation. Aside from this, I also faced difficulty when ordering tests because of limited resources and technology. CT scans and MRI machines were not readily accessible. Although basic lab tests, such as the CBC and CMP, were available, the turn-around time was longer than I am used to.”

Clinical moment: “While working at the dengue/hematology unit, I witnessed several near-death cases and was involved in the care of some of the sickest children in hemorrhagic fever and dengue shock syndrome. One year. I stood next to the attending as he delivered the bad news to the family on a day meant for national celebration.”

Cultural moment: “As the first generation of Vietnamese Americans born and raised in the United States, I had the opportunity to visit Vietnam for the first time and learn the native culture because of the international elective. One of the most enjoyable moments was handing gifts to every patient in the hematology unit during the Vietnamese New Year. I watched each child’s face gleam with joy upon receiving his or her gift. We wanted to give the children a reason to celebrate and feel special.”

Photos courtesy of the featured medical students.
O
n Jan. 12, 2010, a 7.0 magnitude earthquake hit Haiti, an already impoverished Caribbean island roughly halfway between the southernmost tip of Florida and the northernmost edge of South America. The natural disaster claimed more than 200,000 lives, left thousands wounded, and prompted former KU School of Medicine–Wichita students and residents to take action.

News of the devastation led Rick Moberly, MD, to contact Heart to Heart International, which dispatches medical aid around the globe. Dr. Moberly arrived in Haiti one week after the earthquake and found a landscape marked by chaos. With the city of Port au Prince closed to incoming air traffic, his flight was rerouted to Santo Domingo, in the Dominican Republic, a country bordering Haiti. Upon landing, Dr. Moberly was driven over land toward the heart of Haiti’s catastrophe. As he neared Haiti’s perimeter, it was like a scene out of a movie, with people pressed against boundary fences, simply trying to escape.

Spirit of Haitians humbling

Like Dr. Moberly, Jennifer Scott Koontz, MD, MPH, set foot in Haiti seven days after the earthquake occurred. She dressed wounds, closed large lacerations, and set fractures. By week’s end, triage treatments transitioned into caring for cases of pneumonia, dehydration, and diarrheal illness.

But it was in a makeshift clinic set up in Port au Prince’s national stadium that Dr. Koontz met a woman who became a game-changer.

“One day, some men pushed an elderly lady in a wheelbarrow into our clinic. They brought her several kilometers from an outlying community. The lower half of her right leg was badly injured—I could see her tibia and fibula. She was so thankful that she kept saying ‘merci beaucou’ over and over,” Dr. Koontz said. “She needed an amputation and she handled the pain by singing hymns. It was just one of so many examples of the Haitian people being so full of praise and gratitude.”

Toll on caretakers high

Armed with gauze and antibiotics, Dr. Moberly was prepared to treat crushed limbs and infected wounds. It was the emotional devastation that took him by surprise; he hadn’t expected to encounter the deep and widespread anxiety washing over earthquake victims.

Aaron Davis, DO, agreed. A second-year family medicine resident, Dr. Davis also mobilized to Haiti within days of the tremors. He’d been mentally prepared for the physical trauma: septic infants and cases of pulmonary edema that represented the hundreds of thousands of injured Haitians. But they were all outnumbered by those who were silently hurting: the walking wounded.

Dr. Davis soon realized that even his translators, who were local medical students, needed a compassionate ear.

“Here were people whose lives had been severely affected, but they continued to function and to help us. One of our translators, Mark, was talking to his sister when the quake hit. They were in the middle of an argument, and he’d walked out of the building. He looked back mid-sentence to see that she’d been sliced cleanly in two by falling debris. Yet here he was, giving a 100-percent effort on a daily basis but suffering in his own way,” Dr. Davis said.

Need continues

As Dr. Davis worked to assuage victims’ physical and psychological wounds, the experience of “treating the whole person” offered a sense of what it means to be a family physician.

“Toward the end of your training,” Dr. Davis said, “we’re well trained at the KU residencies, and we’re prepared for this type of work. You can make a difference early in your training.”

He echoes the concern of many who’ve come to Haiti’s aid: that we’ll forget what’s happened.

“Haiti has fallen out of the public eye, but building collapses are still happening, food is only slowly coming in, people are still sleeping on the streets because they’re scared to sleep in buildings,” Dr. Davis said. “The most important thing about our story isn’t that we went. The important thing is that Haiti has far to go. And everyone has something to share.”
“Jayhawk Sick Bay” sailed along Wichita’s downtown streets May 7 as the city’s annual River Festival parade got underway. Faculty, residents, students, and staff dressed up as pirates in keeping with this year’s festival theme of “River Me Timbers” to let everyone know the KU School of Medicine–Wichita educates doctors for Kansas.

Avast, ye medical school maties

Rachel Smith, left, and Daniel Miller, right, are among the KU swashbucklers. Others getting into the spirit of the parade are, left, Tara Shirley and Baby Jay. On the right is Erin Guex-Clark. Her 12-year-old son, Aiden, waves to the crowd.

Three-year-old Kyle Zarchan gets a bird’s-eye view of the parade. “He was so proud of himself to be able to sit next to Baby Jay. He loved it,” said his mother, Katie Zarchan.

The Jolly Roger flies over the “Jayhawk Sick Bay” float. The message to the crowd: “We educate doctors for Kansas.”

Happenings

Garold Minns, MD, associate dean for Academic and Student Affairs and Internal Medicine professor, received the KU School of Medicine 2010 Rainbow Award at the annual Grande Affair in Kansas City on May 1. The distinguished Rainbow Award honors a single faculty member who exemplifies the attributes of professionalism in medicine and shares those qualities with the medical students he or she mentors on the Kansas City and Wichita campuses. Medical students from both campuses nominate five finalists then vote for the ultimate award recipient. The specific characteristics of professionalism recognized by The Rainbow Award include those attitudes and behaviors that serve to maintain patient interest above physician self-interest, altruism, accountability, excellence, duty, service, honor, integrity, and respect for others.

P. J. Stiles, MD, who graduated from the KU School of Medicine–Wichita in May, was selected from a class of 170 from the Kansas City and Wichita campuses to receive the KU School of Medicine’s Deborah Powell Pride in Profession Award on May 13 at a dinner honoring the graduates in Kansas City. The annual award is given to a senior medical student who most appropriately characterizes the qualities of professionalism in medicine as envisioned by Dean Deborah Powell during her tenure at the KU Medical Center in Kansas City, Kan. Those qualities include altruism, respect, honor, integrity, ethical and moral standards, accountability, excellence, and duty and advocacy. A graduate of Claflin High School in Claflin, Kan., Stiles received his undergraduate degree from Washington University in St. Louis, Mo., and will start his surgery residency in Wichita this summer. Stiles received a plaque and $500 as well as his name added to a master plaque displayed at the KU School of Medicine in Kansas City.

The KU School of Medicine–Wichita honored an associate dean and a professor with the distinguished 2009 Dean’s Excellence in Leadership Awards. Jan Arbuckle, associate dean for administration, and Dana Kuever, MD, Internal Medicine professor, received nominations from their staffs. In its second year, the award recognized one staff member and one faculty member for their leadership contributions. The other nominees included: Lisa Brommer, former Human Resources director; Marcia Hartman, Internal Medicine sr. coordinator; Tyann Orton, assistant dean for Finances; Judy Johnston, MS, RD, Preventive Medicine and Public Health research instructor.

Michele Mariscalco, MD, will join the KU School of Medicine–Wichita on Oct. 1 as the new Associate Dean for Research. She is coming from the Baylor College of Medicine in Houston, Texas, where she has most recently been Associate Professor of Pediatrics and Director of Fellowship Research. Dr. Mariscalco will replace David Grainger, MD, who has led research efforts for almost five years.
A team of Wichita-area health professions students representing the KU School of Medicine-Wichita and the College of Health Professions at Wichita State University received national recognition April 10 by winning first place in the national CLARION case competition at the University of Minnesota. The CLARION program’s aim is to encourage interprofessional case education for students in various health professions. Students participated in special classes to prepare for the national competition under the guidance of faculty mentors Jennifer Koontz, MD; Linda Goldberg, MD; Paul Uhlig, MD; Tanya Kajese, MD; who served as a 4th-year medical student at the KU School of Medicine-Wichita at the time, was one of the participants.

Brenda M. Kopryza, MD, presented her research in March at an annual meeting of the Southwestern Surgical Congress in Tucson, Ariz., and won the Jack A. Barney Resident Award Competition. She is only the third resident in the history of the General Surgery program at the KU School of Medicine-Wichita to win the award. The study, co-authored by Stephen Smith and Stephen Helmer, PhD, is titled “Blood Transfusion is Associated with Increased Complications in Moderately Injured Patients.”

Alpha Omega Alpha, the only national honor medical society, is often referred to as the Phi Beta Kappa for medical schools. Its mission, developed over the past 100 years, has been to recognize and enhance professionalism, academic achievement, service and leadership within the profession. The following KU School of Medicine-Wichita students, alumni, faculty, and housestaff were inducted into AOA on May 12:

Class of 2011 AOA members

Stephanie Murray
Brenda Neunlist
Bruce Tjaden
Matthew Wilson
Elected as Alumni

Jenifer Cox, MD, Family & Community Medicine, Wichita
Elected as Housestaff

G. Aron Faust, MD, Family & Community Medicine, Wichita

Fifty-two 4th-year students from the KU School of Medicine-Wichita received their medical doctor degrees (MD) during ceremonies May 15 at the KU Medical Center in Kansas City, Kan. Specific awards went to the following graduates: Bruce A. Bowser of Derby, Kendra and Michael T. Hagam of Wichita received the F.G. Czarinski Family Award for their superior skills in patient care and management, as well as scholarly understanding and prudent application of the principles of clinical science. In addition, the award recognizes a significant contribution to the overall environment of health care and patient education. Bridget L. Harrison of Wichita received the Willard J. Smith, MD, Award for Academic Achievement for her dedicated commitment to the scholarly acquisition and effective application of knowledge. Bruce Bowser also received the Frank R. Wold, MD, Clinical Student Award for excellent performance during clinical rotations at the school of medicine.

Elizabeth Ablah, PhD, MPH, Preventive Medicine and Public Health assistant professor, led 25 children from a Wichita day camp in an effort to place “No Dumping” medallions on stormwater drains in July. The drains were identified as havens for bacteria, chemicals, and harmful bacteria that pollute the Arkansas River. For more than a year, the KU School of Medicine-Wichita Preventive Medicine and Public Health department has led a grassroots effort to investigate public perceptions and concerns for environmental health issues involving more than 1,500 Wichitans thanks to a $10,000 grant from the U.S. Environmental Protection Agency. In partnership with the City of Wichita and Kansas State University, the stormwater drain medallion project was the first step in addressing the public’s concerns.

Eight students and two faculty members from the KU School of Medicine-Wichita were honored at the Gold Humanism Honor Society Induction Ceremony on April 16 at the KU Medical Center in Kansas City, Kan. The eight students are Competition Winners of the Cramer Reed Award: Exercise decreases during pregnancy: What can the prenatal team do to help?

The third quarter issue of the Kansas Journal of Medicine (KJM) is now available at wichita.kumc.edu. Detailed in this issue:

- “Utilization of Fosphenytoin for Dignosis-Induced Ventricular Arrhythmia”
- “Side Effects of Adalimumab Masquerading as Lymphoma”
- “Need of a Revised Bleeding Risk Model in Patients on Warfarin Therapy: Considering Hypertension as an Important Risk Factor”
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- “Need of a Revised Bleeding Risk Model in Patients on Warfarin Therapy: Considering Hypertension as an Important Risk Factor”

The KU School of Medicine-Wichita is looking to fill the position of Associate Dean for Graduate Medical Education. This person is responsible for providing leadership that ensures the academic quality and integrity of the residency programs and ensures that all residency programs maintain accreditation. Required qualifications include a medical doctor degree, board certification, and clinical experience. For more information and to apply, visit wichita.kumc.edu/hr and click on “Employment Opportunities."

Ahlers-Schmidt, PhD; Angela Paschal, PhD; Amy Cheesser, PhD; Traci Hart, PhD; Denise Baker, PhD; General Medical Category: Mechanical properties and elution characteristics of polymethylmethacrylate bone cement impregnated with antibiotics for various surface area and volume constructs.