DEDICATION, INSPIRATION, PERSEVERANCE: A RESIDENT’S JOURNEY

By Tara Richardson, M.D, Chief Resident

I met Dr. Walter Kalu in 2013, when we were both interviewing for residency. I sat next to him on a trolley tour of Wichita, which gave us plenty of time to talk. We discussed what led us to psychiatry and I was impressed by how much genuine thought and passion he had given to the field already. I didn’t know at the time that this was a person I would grow to admire even more in the coming years and who would also become a great friend.

Dr. Kalu was born and raised in Benue, in what is known as the Middle Belt of Nigeria. His father worked in construction, having not completed high school, and his mother stayed at home raising their six children, of which Walter was the eldest. He attended boarding school, considered a privilege in Nigeria, for most of his life. A middle school placement exam suggested that he pursue medicine, but he initially resisted “because everyone in the class wanted to be a doctor.” After convincing arguments from his family that his personality and compassion were well-suited for a career in medicine, he changed his mind. Immediately after high school graduation, he attended a six-year medical school, Ebonyi State University. However, this was just the first step on a long journey to fulfilling his dreams of becoming a psychiatrist.

In 2007, after completing medical school and working at a teaching hospital five hours from his hometown, Dr. Kalu learned that he won a coveted spot in a visa lottery to move to the United States and establish permanent residency. “It was sheer luck, against all odds,” he says, “There are probably millions of people all over the world applying for less than 1,000 spots.” He couldn’t even travel back to his home city to say goodbye to his parents for fear that something may interfere with his plans. Dr. Kalu shares a common Nigerian saying that when someone has a big smile on their face, one might ask in jest, “Did you win the visa lottery to America?” That’s exactly what happened for Dr. Kalu. “It was really exciting. Just too overboard,” he says. “I didn’t know how hard it was going to be. The excitement of going to America doesn’t make you think about some of the difficulties.”

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The learning process is being transformed from the traditional didactic format to interactive real-time engagement with a little help from technology. Cheryl Wehler, M.D., medical student clerkship director, pioneered this initiative by applying for and being awarded a grant to allow the purchase of a Turning Point Audience Response System (ARS).

Dr. Wehler set up eight sets of multiple-choice questions designed to help students study for their rotation exam. Each student receives a responder, and can submit their answer to the question in real time. Once all responses are submitted, Dr. Wehler reveals the correct answer and facilitates discussion around the question. Every student participates in every question, and can learn at their own pace.

This system isn’t just for medical students. Tara Richardson, M.D., chief resident, and Christina Bowman, M.D., associate chief resident, set up three sets of multiple-choice questions to help the residents study for the PRITE. Residents are able to learn from each other in a fun, engaging environment.
Jana Lincoln, M.D., is now accepting referrals for ECT consultations.

Rachna Kalia, M.D., is now accepting referrals for an outpatient Delirium Clinic that will provide evidence-based care for patients who develop delirium while hospitalized. The clinic will monitor patients, providing assessments, education, and medication management for up to one year.

The KU Psychology Clinic has moved. Robin Heinrichs, Ph.D.; Phillip Martin, Ph.D.; Don Morgan, Ph.D.; Kelli Nelson-Amore, Ph.D.; Ryan Schroeder, Psy.D.; Glenn Veenstra Ph.D.; and Cheryl Wehler, M.D., are now seeing patients at the KU Center for Health Care at 8533 E. 32nd Street North, near K-96 and Rock Road.

Phillip Martin, Ph.D., is now providing neuropsychological consultation and rehabilitation psychology services at Via Christi Rehabilitation Hospital. He offers neuropsychological evaluation of patients with central nervous system injury and brief therapeutic interventions for those coping with changes in their medical condition.

Nicole Klaus, Ph.D., and Kelli Nelson-Amore, Ph.D., are providing inpatient pediatric psychology services at the new Wesley Children’s Hospital. Consultation services include suicide risk assessment and behavioral health interventions for children admitted with a variety of medical conditions.

Hannah Oliver, PGY2 resident, is working with medical students interested in psychiatry to revitalize the Psychiatric Interest Group, or as we call it, PsyIG. Jocelyn Mattoon, MS3, serves as student president, alongside Chanel Doyle, MS2, and Jeremy Bennett, MS2, vice president and secretary. The mission of PsyIG is to educate medical students about a career in psychiatry and the diverse paths within the field, encourage interest, and help medical students gain familiarity and build relationships with the KU psychiatry program. Our first event was a private viewing of “The Accountant,” a movie about a man with autism, followed by a group discussion between medical students and current residents. Students learned about Rorschach cards and their interpretation, and then made their own Rorschach cookies at another PsyIG meeting. For more information about our upcoming events, contact Hannah Oliver at holiver@kumc.edu or Jocelyn Mattoon at jmattoon@kumc.edu.

Lisa Harding, M.D., was given the award for revitalizing resident roles in the Kansas Psychiatric Society (KPS), developing the resident chapter of KPS, and for volunteer work with the National Alliance for Mental Illness.

Hannah Oliver, D.O., received the award for assisting in the redevelopment of the Assessment Center Rotation. Her assistance included meeting with hospital administration, drafting documents, and working with fellow residents and chief residents.

Walter Kalu, M.D., was recognized for going above and beyond to mentor and teach junior residents. He is reliable, calm, easy to work with, and an excellent role model for junior residents.

Developing a culture of feedback can assist with improving resident-faculty relationships and creating an environment of inquiry in a training program. Tara Richardson, M.D., fourth-year resident, is developing a research project on improving resident-faculty relationships towards completion of her Scholars in Medicine and Research Training (SMART) Certificate.

The six-month SMART program, facilitated by the Office of Research, is available for senior residents who are looking for additional experience, specifically targeting those with an interest in academic medicine or subspecialty fellowship training. The program curriculum involves monthly meetings, didactics, and developing a research protocol with the help of a departmental mentor. The purpose of the SMART program is twofold: 1) to enhance knowledge, comfort and skills needed to design and implement research projects and 2) to facilitate completion of a scholarly project through design of a high-quality protocol. After course completion, participants will receive a certificate of program completion, and are encouraged to publish or present the results of their projects. Recent participants also include graduates Alexandra Flynn, M.D., and Shean McKnight, M.D.
Kristin Jones, director of the psychiatric outpatient clinic at KU School of Medicine-Wichita, has a new personalized license plate - KDNYGVR - and she hopes everyone following her around will think or ask about it.

Jones, an advanced practice registered nurse who primarily sees children and adolescents at the clinic, became a “kidney giver” this summer when she donated one to her father. She’s advocated organ donation for years, and her family had far too personal of an experience with the issue when a brother-in-law, niece and nephew died in a car accident a dozen years ago.

Now, though, after a very personal organ donation, she advocates even more energetically. She wanted patients to know exactly why she was out of the office, hoping that through a personal connection they might be swayed to put “organ donor” on their driver’s licenses. She hopes to help serve as a bridge with donor programs at KU, and wants to talk with potential donors. And she would like to campaign for opt-out vs. opt-in organ donation programs, where when you get a driver’s license you’d have to say, “No, I don’t want to donate” instead of the current, “Yes, I want to donate.” The change would go far to trim waiting lists.

To Kristin, the decision to give her father a kidney was simple, particularly since his kidney troubles came not from disease but as a side effect of surgery. There was security in the fact that kidney problems didn’t run in the family.

Kristin’s parents live in Salem, Illinois, about 90 minutes due east of St. Louis, home to Barnes-Jewish Hospital and the kidney transplant program. Six years ago, Don Jones had knee replacement surgery, and a perforated bowel was a complication, which led to renal failure and dialysis. A new kidney was his only option for getting off dialysis. And for his eldest daughter, the only option was donating one of hers.

“It wasn’t a family decision,” Kristin said. “It was, ‘I’m doing it.’ If I am a match and can get through the whole process, that was it. There was no rock-paper-scissors between my brother and my sister.”

“Both mom and dad asked a bazillion times, ‘Are you sure?’ I was just never more sure of anything,” she said.

Being related made her an ideal donor, but the vetting was extensive. Blood tests, more blood tests, X-rays, CT scans and, of course, plenty of urine samples. She didn’t find the physical part onerous, with much of it done in Wichita, but a May visit to St. Louis drove her stress up quite a bit.

There, after months of screening, Kristin would find out if it was a go. The hardest part of that visit was her “concern that I had gone that far and they were going to find out I couldn’t do it.” A small cyst found on a scan disrupted her calm, but eventually was deemed harmless. They got the thumbs-up. Continued on page 2.