FACULTY, STAFF, RESIDENT AND STUDENT NOTES . . .

CONGRATULATIONS

Don Brada, MD, on his recent promotion to professor, Department of Psychiatry and Behavioral Sciences.

Janice McAdam, associate director, on her being selected April Employee of the Month.

Tess James, medical record clerk, on her marriage to Jason Bedard, May 1, 2004.

Don Brada, MD, on receiving the Nancy Roeske Award for excellence in teaching awarded by the American Psychiatric Association at their annual convention in May.

Lin Xu, MD, COMCARE, who received the American Psychiatric Association Roeske Award for excellence in medical student teaching by a volunteer faculty in May.

Tamara Aloyan, MD, Don Brada, MD and Laurie Coyner, MD.

Lin Xu, MD and Don Brada, MD at the American Psychiatric Awards Banquet

PUBLICATIONS

Marsh C., **Walling A.** Depression and Anxiety: Women's Health in Mid-Life: A Primary Care Guide. Rosenfeld JA (ed) Cambridge University Press. Cambridge UK 2004.

PRESENTATIONS

Glenn Veenstra, PhD, associate prefessor, presented "Therapeutic Applications of the New Understanding of Emotions," the keynote address to kick off the Kansas Psychological Association convention, March 26, Topeka, Kan.

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Medical student education in Psychiatry

One of the principal missions of the Department of Psychiatry and Behavioral Sciences on the Wichita campus is the education of medical students. To this end, we have ongoing efforts to enhance our educational programs and engage students in the field of psychiatry.

The required clerkship in psychiatry has undergone a number of changes in the last five years and more changes are in the works. In 1999 we added a two-week experience in neurology to our curriculum and changed the name of the clerkship to Neuropsychiatry. This change was driven in part by the historical association between psychiatry and neurology, and the absence of any designated neurology curriculum in our four-year undergraduate medical program.

During the eight-week Neuropsychiatry clerkship, students now have a four-week adult inpatient psychiatry experience, a two-week neurology rotation, and a two-week specialty selective experience in child and adolescent, geriatric, or consultation-liaison psychiatry. During the clerkship, students participate in a didactic program of lectures and seminars, spend time in outpatient psychiatry and addictions clinics, and attend weekly skill-building sessions where they learn and practice patient interviewing, the mental status exam, and the neurological exam.

Not to rest on our laurels, a number of new program improvements are underway. We have begun piloting the educational software, Blackboard, recently purchased by the School of Medicine, which offers a variety of innovative educational strategies to enhance our course. As well, we are joining a school-wide program to incorporate standardized patients into all clerkships to provide students with structured exercises for applying knowledge and practicing clinical skills (more on these programs in a separate article).

To better engage students in the neuropsychiatry learning experience, we have implemented a number of strategies. We now have students identify personal learning goals for the neuropsychiatry clerkship during the first week of class and then revisit these periodically to assess their progress and assist them with forming action plans to achieve these goals during the eight weeks. We have the **Ron Martin, MD** Awards for student performance in the clerkship and extra-clerkship activities. And for the last three years, we have had a Psychiatry Interest Group (PsyIG), pronounced "sig" that meets regularly to socialize, explore career options in psychiatry, and perform community service (more on these programs in separate articles).

The department remains committed to medical student education and faculty have been busy learning about the new educational software and refining their assigned lectures and seminars to encourage active learning and emphasize problem-solving skills. We remain indebted to our community volunteer faculty who provide an invaluable learning resource for our students in the clerkship. This year, one of our top-rated volunteer faculty, **Lin Xu, MD**, COMCARE, received the American Psychiatric Association Roeske Award for excellence in medical student teaching by a volunteer faculty. My hope is that in coming years, more of our alumni and community psychiatrists will also be able to participate in the rewarding activity of medical student education.

Michael J. Burke, MD, PhD

THIS IS YOUR NEWSLETTER

Let us hear from you!

Contact: Mary Spachek
Call: 316/293-2669
Write: 1010 N. Kansas, Wichita, KS 67214
E-mail: mspachek@kumc.edu

COMMUNICATOR ON LINE

Share the Communicator without giving up your copy. It can viewed at: http://wichita.kumc.edu/psych/ Archived issues can also be viewed.

Neuropsychiatry clerkship to add web-based learning, standardized patients

By Brian Schmidt, Medical Student Coordinator

Each year, about 50-55 medical students spend eight weeks in the Department of Psychiatry and Behavioral Sciences learning about and gaining clinical experience in psychiatry and neurology. Since most of these students later choose a non-psychiatric specialty, the department has both a great opportunity and a great obligation to train these future physicians to deal appropriately with mental health issues. We are striving to make our medical student education program as effective as possible, and to that end, we are now working to incorporate a few innovative learning tools into our curriculum.

The first of these tools is Blackboard course management software. A Web-based tool, Blackboard can facilitate a deeper level of interaction among faculty and students than what is practical in a physical classroom setting. With Blackboard, faculty can quiz students over what they've taught in their lectures and give students corrective feedback, and they can do this at a time that is most convenient for each student. The best part is that once quizzes are set up, no faculty time needs to be spent either administering or grading them, which frees up faculty time for more advanced educational activities. This software is already up and running, and we are in the process of developing curricular materials to use with it.

Another tool that we plan to incorporate is standardized patients. Standardized patients are people from the surrounding community who are trained to act as if they were patients with a set of conditions specified by the faculty. Standardized patients have several advantages over seeing actual patients in a clinical setting. For one, faculty have more control over the kinds of clinical experiences to which the students will be exposed. In a clinical setting, students may not always see a wide variety of conditions. Another advantage is that students have more freedom to practice certain skills. Reimbursement and liability issues sometimes limit what students are allowed to do in a real clinical setting. In addition, the student's interview with a standardized patient is videotaped, so faculty can observe the student via video in real time and students can review the experience either on their own or with faculty guidance afterward. Finally, the United States Medical Licensing Examination (USMLE) is instituting a required clinical skills component on the Step 2 examination beginning in 2005, and standardized patient experiences will help to prepare students for that examination.

Blackboard and standardized patients are just two prominent examples of what we are doing to better prepare future physicians. There is not enough space in this article to write about all of the smaller changes we have made and are making in that regard – things like tracking patient contact data, revising clinical evaluation forms, and purchasing better textbooks for student use. But for the sake of improving the mental health of Kansans, we are continually looking for ways to improve our medical student education program.

Awards available for medical students

Through the gracious donations of department members and alumni, a number of student awards are available in the name of **Ron Martin, MD**. Dr. Martin was professor and chair of the Department of Psychiatry and Behavioral Sciences at the University of Kansas School of Medicine-Wichita (KUSM-W) from 1988 to the time of his death in 1998. Dr. Martin, a prominent researcher, clinician and teacher, was committed to fostering interest among medical students in psychiatry as a career. Accordingly, the Department of Psychiatry and Behavioral Sciences, is pleased to present The Ron Martin, MD Scholarship Fund for Medical Students. Based upon appropriate submissions, the following awards will be made available to third-and fourth-year students at the University of Kansas School of Medicine-Wichita who have successfully completed their required psychiatry clerkship:

A) **$600 annual award** for the best paper written on a topic in psychiatry. Topics are to be selected and the paper prepared under the guidance of a psychiatry faculty mentor. The submitted paper must be suitable for publication in a refereed medical journal. **March 1 is the deadline for paper submissions** to be considered by the awards committee for a May award.

B) **$250 annual award** for outstanding performance in a psychiatry elective. The student must prepare a written summary of their learning activities during the elective course and the relevance of the experience to their medical career. The attending faculty will prepare a letter explaining how the student has consistently exceeded performance expectations during the elective. **March 1 is the deadline for submitting materials** to be considered by the awards committee for a May award.

C) **$150 annual award** for outstanding interest and performance in the field of psychiatric medicine during the basic psychiatry clerkship. Nominations for this award will be made by clerkship faculty attendings. The awards committee will review nominations and supporting clerkship performance summaries at their annual meeting in May.

Interested students are encouraged to contact the director of medical student education in the KUSM-W Department of Psychiatry and Behavioral Sciences for additional information on application procedures and award availability.

KPA selects KUSM-W psychologist for Outstanding Teacher Award

Glenn Veenstra, PhD

Glenn Veenstra, PhD, associate professor, Psychiatry and Behavioral Sciences, has earned the 2004 Outstanding Teacher Award from the Kansas Psychological Association. The award presentation capped the organization's annual convention in Topeka, Kan., March 26.

"The award goes to psychologist/educators whose teaching receives very high evaluations," said KPA president C. Don Morgan, PhD, associate professor, Psychiatry and Behavioral Sciences. "Award winners are also noted for originality and their contributions to the professional literature."

Veenstra, who earned his doctorate at Michigan State University, has been a KUSM-W faculty member since 1979. An approved supervisor of the American Association of Marriage and Family Therapists, he is also a clinical psychologist here, specializing in marital, family, individual and group therapy, as well as psychological assessment of personality and intellectual abilities. He is also an active participant in the current NIMH study, Sequenced Treatment Alternatives to Relieve Depression (STAR*D).

A prolific author and lecturer, Veenstra was selected as the "Teacher of the Year" in the Department of Psychiatry and Behavioral Sciences in 1981, 1987 and 1999.

Happenings with PsyIG

By Laurie Coyner, MD, resident liaison, PsyIG

Members of the Psychiatry Interest Group, PsyIG, recently concluded the years' activities with a presentation to their fellow students in, Issues in Medicine, covering the critical public health issue of suicide prevention.

Earlier in the year, third-year medical students, Ben Davis, Kelly Sweeney, Ruth Nguyen, Justin Overmiller, Leah Brantley, and Raelene Knolla attended the Sedgwick County Suicide Task Force Speaker's Training. Other members of the group were involved in creating a pocket card for physicians to carry listing suicide risk factors, screening questions, and local resources. The card committee included: Ruth Nguyen, Sheila Scheffe, Jared Scott, Clint Colberg, and Jennifer Koontz. These cards were distributed at the Issues in Medicine presentation, will be available to area physicians, and will be handed out to students entering the Psychiatry clerkship. The cards were also available at the Link 4 Life Suicide Prevention Race where our medical students volunteered.

Interest in PsyIG has steadily grown this year with 15-20 students attending each month. Meetings are held on the third Thursday of each month, a brief business meeting is held at 6 p.m. at the Loft in Old Town followed by a social hour. All third and fourth year medical students are encouraged to attend.

SUICIDE: RISKS, ASSESSMENT, PREVENTION

FACTS ABOUT SUICIDE:

- Average of 85 Americans die from suicide each day.
- More people die from suicide than from homicide.
- Suicide is the 11th leading cause of death for all Americans.
- Suicide is the 3rd leading cause of death for 15-24 year-olds.
- Firearms/guns are the main method of suicide for all age groups.
- Males are more than four times more likely to die from suicide than are females; however, females are more likely to attempt suicide than are males.
- In 1999, white males accounted for 72% of all suicides.
- Together, white males and white females accounted for over 90% of all suicides in 2000.
- Suicide rates are generally higher in the western states, lower in the eastern and midwestern states.
- Substance abuse increases suicide risk 4-5 times.
- Talking to a support person about suicide will not encourage the individual to try it.

WARNING SIGNS OF SUICIDAL BEHAVIOR:

- A strong interest or preoccupation with death.
- Gives away prized possessions to others without explanation.
- Inability to make decisions or concentrate.
- Increased complaints about physical problems.
- Life changes, medical illnesses, losses.
- Loss of interest in usual activities.
- Suicidal statements such as "I would be better off dead," or "The world can get along without me."
- Negative comments about him- or herself.
- Increase in alcohol consumption or drug use.
- Overwhelming feelings of sadness and hopelessness.
- Sudden change from extreme depression to being "at peace."
- Hinting, joking, talking, writing about suicide.

SUICIDE RISK FACTORS:

"**SAD PERSONS**" Mnemonic:
(>6 = significant risk)

Sex - Males more often complete while females more often attempt
Age - Teenage years and age >45 years
Depression – Depressive episode in 70% of suicides
Prior attempts/**P**rior mental illness - Personal or family history
Ethanol or drug use – Ethanol use and/or other drug use increases risk
Rational thinking loss – Profound cognitive slowing, psychotic depression, and pre-existing brain damage
Social support deficit – Disconnected from family and friends, unemployed
Organic disease – Medical illness, chronic pain
Note of plan – Organized plan, availability of lethal means
Stressors – Recent losses

WHERE TO GET HELP:

- COMCARE Crisis Center: 316-660-7500
- Covenant House Nineline: 1-800-999-9999 or www.covenanthouse.org
- Good Grief of Kansas: 316-264-8900
- Hopeline Network: 1-800-SUICIDE (784-2433)
- Kansas Children's Service League's Youth and Family Crisis Line: 316-263-KIDS (5437) or 1-800-332-6378 or www.kcsl.org
- Prairie View's Crisis Line: 1-800-362-0180 or www.prairieview.com
- Self-Help Network of Kansas: 316-978-3843 or 1-800-445-0116 or www.selfhelpnetwork.wichita.edu
- Via Christi Psychiatry Assessment Center: 316-689-4850
- Wichita Children's Home Street Outreach: 316-262-HOME (4663) or www.wch.org
- Yellow Ribbon Suicide Prevention Program: www.yellowribbon.org

Farewell to residents!

June 26 the department will say goodbye to fourth-year residents: Laurie Coyner, MD (who will be with us until December), Fatima Saherwala, MD and Shabbir Saherwala, MD, who will be going into private practice in the Dallas, Texas area and Jaspreet Bains, MD.

As the year comes to a close the department will also be saying farewell to: Talat Tayyaba, MD and Syed Quadri, MD who are leaving at the end of their third year to go into child psychiatry fellowships at KUMC and Tamara Aloyan, MD who is moving closer to family.

We wish everyone the best of luck!

Farewell to Spanish Classes

Being the innovative leader that she is, Janice McAdam, associate director, started Spanish classes for her staff as a result of Mercedes Perales, MD, clinical assistant professor, providing services to the Spanish-speaking community. The classes started about 14 months ago with two classes of five people each and went to one class of five people. The final Spanish class has been held with Debbie Conrady, RN, Sansi Hargrove, Janice McAdam and Mary Spachek completing the class.