The Search Committee for CCHS Dean/Associate Dean of the University of Alabama School of Medicine(UASOM) - Tuscaloosa Program met in December. A job description was formulated and the position is being advertised nationally. "The incumbent should have a terminal degree (MD or PhD or equivalent) and, if an MD, should be board certified in a specialty, preferably a primary care specialty. He/she should be committed to high quality medical education and related fields in a matter compatible with the aims, goals, and mission statements of the medical school and university," says the announcement being published.

"Research in health care delivery systems and outcome studies are encouraged, and rural issues are emphasized" in the position description disseminated by the Search Committee. It also calls for a person with "administrative experience in a medical school, preferably one with multiple campuses" and "experience in an evolving matrix organization."

CCHS is a branch campus of the University of Alabama School of Medicine and as such is responsible for the medical education of third and fourth year medical students. CCHS also provides training for future family physicians in a three-year family practice residency which is partially supported by DCH Regional Medical Center. Both students and residents see patients at DCH and at the University Medical Center, an outpatient clinic operated by CCHS faculty physicians which is located on the University campus and close to DCH.

The Search Committee is chaired by the medical school's Senior Associate Dean William B. Deal, M.D., F.A.C.P. He said the committee is a well-balanced group of representatives from UA, UAB, and private practice.

"The Program in Tuscaloosa is a key part of our educational system. Through several programs, it provides a perspective on rural health care to which the School of Medicine is dedicated. It is hoped that greater collaboration among the faculty at the Birmingham and Tuscaloosa campuses will result in significant scholarly contributions to rural health care," said Dr. Deal.

UA President Andrew Sorenson and Provost Nancy Barrett met with the committee in December, said Search Committee member Dr. James Leeper, professor and chair of Behavioral and Community Medicine at CCHS. "They shared their vision for the College of Community Health Sciences and stressed the need to find a dean who can help CCHS integrate vertically (as one campus of the University of Alabama School of Medicine) and horizontally (as part of the University of Alabama)," said Dr. Leeper.

"I think their involvement in the process shows the interest and commitment of UA's leaders to the importance of this college and its mission," Leeper added.

Dr. Sorenson has both master's and doctoral degrees in medical sociology and a master's degree in public health. He was executive director of the AIDS Institute and professor of health policy and management at Johns Hopkins, and he directed the School of Public Health at the University of Massachusetts at Amherst. He has also been visiting faculty member to medical schools at Harvard, Cambridge, and the Welsh National School of Medicine. At the kickoff reception last fall for a new UA program to recruit and retain rural students in medical careers, Dr. Sorenson said he envisioned CCHS as leading the way in rural medical education and research.

In addition to Dr. Deal and Dr. Leeper, members of the Search Committee include Roger Lacy, M.D., assistant professor of Psychiatry; Bryan Kindred, president and CEO of DCH Healthcare Authority; Garry Magouirk, M.D., Fayette family physician and former CCHS resident; Jerry McKnight, M.D., chair of Family Medicine; Beverly Wender Pool, M.D., Family and Community Medicine at UAB; Sarah Barger, dean and, UA Capstone College of Nursing; William W. Winternitz, M.D., professor emeritus, Internal Medicine, CCHS; Lee W. Badger, Ph.D., associate professor of Social Work at UA; Kathleen Nelson, associate dean for students, UASOM; and Catarina Kiefe, M.D., Ph.D., associate professor of Medicine and Biostatistics at UAB.
Lister Hill Society
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The Lister Hill Society of the UA College of Community Health Sciences, the University of Alabama School of Medicine's Tuscaloosa Program, is named for the late Alabama Senator who worked tirelessly to advance health care for all citizens. The Lister Hill Society is a voluntary organization which supports the CCHS mission to train and place primary care physicians in rural and underserved areas. For more information about membership, contact Vicki Johnson in the Dean's office, (205) 348-0093.

Angela Powell Extends Her Family Practice Expertise During CCHS Obstetrical Training Fellowship

Angela Powell, M.D., is the OB Fellow at CCHS this year in an exemplary training opportunity for family physicians who expect to deliver babies in their medical practices. This fellowship provides training in Caesarean Section, ultrasound, and colposcopy. The fellowship was initiated by the CCHS Department of Obstetrics and Gynecology with the leadership of Paul Mozly, M.D., in 1988. The fellowship is funded by the Family Practice Rural Health Board of the State of Alabama. The Family Practice Residency Review Committee considers obstetrics an integral part of the family practice curriculum, and the Alabama Academy of Family Physicians recognizes the needs of rural Alabama and the communities of the need to have family physicians trained in obstetrics. A flexible, integrated curriculum includes both normal and high risk OB care and related procedures (delivery, tubal ligation, neonatal advanced life support, and management of prenatal and postpartum care). The OB Fellow is also responsible for following high risk patients, supervision of medical students and residents, in-house hospital call, medical recordkeeping, and scholarly research and writing suitable for publication.

Former OB Fellows include Cindy Moton, who became a member of the CCHS faculty and is now in private practice in Tuscaloosa; Blaine Schilling, Carrollton; Phil Smith, Sylacauga; Ghassan Hamadeh, who returned to his home in the country of Lebanon; Melissa Behringer, Bibb County; and Kelvin Sherman, Waynesboro, Mississippi. Angela Powell, M.D., (right) receives the OB/GYN departmental award at her 1996 graduation from the Family Practice Residency Program from Dr. Paul Mozly, Chair of Obstetrics and Gynecology. She is now completing a fellowship in Obstetrics.

Research Conferences Will Highlight CCHS Research

The CCHS Research Committee is planning a series of monthly Monday noon research conferences to share current projects and promote research efforts of faculty, residents, and students within the University community. Initially, the committee will be highlighting the work of recipients of the CCHS research awards. Members of the CCHS Research Committee are: Dr. Elizabeth Rand, Chair, and Dr. Nancy Rubin, Psychiatry and Neurology; Dr. James L. and John Wheat, M.D., Behavioral & Community Medicine; Mike Taylor, M.D., Pediatrics; Elizabeth Philp, M.D., and Sam Gaskins, M.D., Family Medicine; Helvi McCall, Health Sciences Library; Lon Haskell, M.D., Resident 1; James Parker, MS4; and the CCHS fiscal officer.
Dr. Rand does not have a problem with turf issues between primary care and psychiatry. "There are plenty of these patients for all of us," she said, "probably more than all of us together can take care of. She favors treatment of the most common mental disorders. The setting where the patients are most likely to present—the primary care clinic or physician's office. "With proper training, the family physician can capably treat the common mental health problems—depression, anxiety, substance abuse, and somatic disorders," she said. Those who don't respond, those with complications, or those who just prefer, can be treated in the psychiatry specialty sector. Dr. Rand also sees many opportunities for collaborative research between psychiatry and primary care and hopes to promote such research through her AAP leadership. Examples she cites of topics needing further study include effective interventions to improve recognition of mental disorders, the link between recognition and outcome, examination of the link between recognition and patient outcomes, development of new structural models for delivery of psychiatric services in the primary care setting, improved prevention activities in late adolescence and early adulthood when most serious mental disorders first present, and the development of guidelines for collaboration between physicians and nonphysicians when they are working together in the care of a patient. Dr. Rand's own research at CCHS has touched on several of these topic areas. Dr. Rand became active in the leadership of the Association for Academic Psychiatry 10 years ago when she served as president of the national committee. For three years, she was editor the association's quarterly Bulletin, after which she served as treasurer for three years. She has also been a member of the national board and, this year, she will conclude her presidency next spring. The culmination will be the annual conference in San Diego in March, 1998. The conference theme will be her own theme of psychiatry's interface with primary care.

Rand's Leadership Theme (from p. 1)

The Association for Academic Psychiatry, a professional organization for teachers of psychiatry, includes as members many chairs of psychiatry departments, directors of residency training programs, directors of medical student educational programs, and other interested faculty at junior and senior levels. The AAP nurtures its members by offering a variety of seminars, workshops, knowledge and skills needed for teaching their profession to medical students, residents, and physicians in practice. "My focus will be training psychiatric specialists to teach in and also deliver patient care in the primary care setting," said Rand. "There is a body of knowledge and skills unique to the primary care sector that is different from teaching in the psychiatry specialty area. These include such things as understanding the administrative and financial incentives and constraints of primary care practices, awareness of the different presentations of mental disorders when seen in primary care, and different responses to medication when mental and medical ailments are both present.

One of AAP's current initiatives, she said, is preparation of teaching modules on mental health issues for use by faculty. A module may be a single case, for example, and include lecture notes, slides, problem-based learning cases, evaluation forms, recommended readings, and audio-visual materials. A faculty member could save preparation time when presenting this topic by requesting the module from AAP. AAP also sponsors numerous teaching awards for faculty. This is particularly important, says Rand, at a time when clinical demands and the need to generate dollars are so intense that time and rewards for excellent teaching are in short supply.

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Behavioral and Community Medicine Seeks Rural Researcher

The CCHS department of Behavioral and Community Medicine (BCM) is launching a search for a new faculty member to refine and implement the research mission of the college and promote collaborative research. "This is a full-time, tenure-track position," said Dr. Sarah Barger, chair of the Behavioral and Community Medicine. He has appointed a search committee to screen and recommend candidates for the Rural Health Researcher position.

The new faculty member must be an "experienced rural health services researcher who has demonstrated ability to work collaboratively with rural populations and to attract external funding," he said. He added that this person should have a Ph.D., Dr.P.H., or equivalent, in rural health research or an M.D. with interest in community medicine and a minimum of five years work experience. The search committee will be looking for a record of funded research and research publications.

The appointee to this position will be responsible for developing research programs and capabilities in collaboration with all faculty in all departments of CCHS, other academic units of the University of Alabama System in Tuscaloosa, Birmingham, and Huntsville, and external institutions and agencies responsive to rural health concerns. Responsibilities include supervising research staff, teaching research methods, enhancing faculty development in research skills, designing and implementing research projects, and teaching medical students and residents.

"We want someone who will provide leadership to achieve a high standard of excellence in rural research and dissemination of research publications," said John Wheat, M.D., associate professor of BCM and Internal Medicine, who is chairing the search committee. Other members of the search committee are Dr. Sarah Barger, dean of the Capstone College of Nursing; Dr. David Coombs; Dr. Bill Dressler, professor of Social Work; Dr. Debra McCallum, director of the UA Institute of Social Science Research (ISSR); Jerry McKnight, M.D., chair of Family Medicine; Dr. John Wheat, M.D., chair of Neurology and chair of the BCM Research Committee; and Dr. Susie Spence, associate professor of Social Work.

CCHS to Bring in Nationally Known Rural Researchers

As part of the search process for a Rural Health Researcher faculty member, CCHS will present five research seminars over the spring and summer featuring nationally recognized experts in rural health research. John Wheat, M.D., of the BCM faculty is working with Provost Dr. Nancy Davis and the UAB Academic Affairs and Research Development office to arrange funding for the seminars. They will be open to faculty and researchers in all disciplines and interested persons from outside the university.

"This is an exciting academic opportunity for all our colleagues with an interest in rural health," said Dr. Wheat. The University of Alabama enrolls approximately 19,000 students (including 4,200 graduate and professional students) from 49 states and 90 countries. UA employs 880 full-time and part-time faculty in 15 schools, colleges, or related academic areas. Faculty members secure millions of dollars annually in external research support and contribute to the academic and scholarly body of knowledge in their fields. The University of Community Health Sciences, founded in 1972 as a branch of the UA medical school focused on improving medical care in Alabama's rural and underserved areas, provides clinical training for third and fourth year medical students and operates a family practice residency program. The Department of Behavioral and Community Medicine (BCM) is the focal point for research activities that involve all departments. "Other colleges, schools, academic units, and outside service agencies look to CCHS for partnership and collaboration in achieving health research goals," said Wheat.

CCHS has affiliations with other colleges at UA, DCH, the VA hospital, state mental health facilities, community health centers, public health, and rural health care systems as well as UAB, which houses the main unit of the National Institutes of Health, the National Institute of Mental Health, the National Institute of Public Health, and related federal and public health, allied health professions. Other important potential research partners are Rural Health Alliance (RAHA)—which links CCHS with rural preceptors, community hospitals, and agrimedicine opportunities, the Office of Rural Services and Research at The University of Alabama, and the UA Institute for Social Science Research.

"I expect the research seminars to help us create a better research environment and to improve opportunities for collaboration," said Dr. Jim Leeper. "This fits well with our search for a rural research faculty member." The guest experts will also assist the search by providing names of possible qualified applicants.
In January, Norman Huggins, M.D., Assistant Professor of Psychiatry and Medical Director, UAB Substance Abuse Program, presented a CME program on “Treatment of Chronic Pain and Addiction.” It was sponsored by Alice McLean Stewart of Tuscaloosa.

A Special Emphasis Week on Osteoporosis sponsored by Merck Pharmaceuticals featured Charles Slemenda, M.D., Department of Nutritional Sciences, presented a CME program on “General Measures in Nutrition.” The FIRST FRIDAY Arts and Letters speaker was Gene Byrd, Ph.D., Professor of Astronomy, University of Alabama, whose topic was “The Mars Rock.” On March 7, the FIRST FRIDAY CONFERENCE speaker is Martha Morgan from the law school. Her topic is “Affirmative Action—Global Gender Perspectives.” The spring CME schedule is listed below:

**March 14:**
James R. Stallworth, M.D., Associate Professor of Pediatrics
University of South Carolina School of Medicine

“Lead Poisoning”

**March 21:**
William A. Broughton
Associate Professor of Medicine
University of South Alabama
Mobile, Alabama

“Nosocomial Pneumonia”

**March 28:**
John Ferrara, M.D.
Department of Surgery
Tulane University
New Orleans, LA

“Diagnosis & Management of Malignant Breast Lesions”

**SPRING BREAK**

**NO GRAND ROUNDS**

**April 11:**
Dennis Boulware, M.D., FACP
Professor of Medicine
UAB School of Medicine

“Treatment of Rheumatoid Arthritis: Today and Tomorrow”

**April 18:**
Donald R. Smith, M.D.
UAB Department of Surgery

“DVT Prophylaxis”

Sponsor: Pharmacia & Upjohn (Mark Leach)

**April 25:**
Adisesha B. Reddy, M.D.
Medical Director, Tuscaloosa Endoscopy Center

“H-Pylori”

**May 2:**
FIRST FRIDAY CONFERENCE
Cornelius Carter, M.F.A.
Assistant Professor
UAB Department of Theatre & Dance

“Performance & Lecture”

**May 5-9:**

SPECIAL EMPHASIS WEEK in PSYCHIATRY

Sponsors: Meade-Johnson, Eli Lilly, Cerenex, Wyeth, Roche

**May 5:**
Harvey R. Greenberg, M.D.
Clinical Professor of Psychiatry
Albert Einstein College of Medicine

Yeshiva University, Bronx, NY

“Reel Significations: Cinema on the Psychoanalytic Couch”

**May 6:**
George Murray, M.D.
Department of Psychiatry
Massachusetts General Hospital
Boston, MA

“Complex Partial Seizures”

**May 7:**
Steven Dubovsky, M.D.
Professor of Psychiatry
University of Colorado School of Medicine
Denver, CO

“Overview of Antidepressants”

**May 8:**
Hasop Akiskal, M.D.
Professor of Psychiatry
Director of the International Mood Center
University of California at San Diego

“Temperament and Mood Disorders”

**May 9:**
C. Robert Cloninger, M.D.
Wallace Renard Professor of Psychiatry,
Genetics, and Psychology
Director, Center for Psychobiology of Personality
Washington University
St. Louis, MO

“Theories of Personality”

**May 16:**
Larry Dean, M.D., F.A.C.C.
UAB Dept. Of Cardiology

“Current Status of Coronary Angioplasty”

Sponsor: Eli Lilly & Co. (Joan Anderson)

**May 23:**
Joseph M. Ernest, III, M.D.
Obstetrics and Gynecology
Bowman Gray School of Medicine
Winston-Salem N.C.

“Infectious Diseases in Pregnancy”

**May 30:**
Robert P. Kimberly, M.D., Director
Division of Clinical Immunology & Rheumatology
UAB School of Medicine

“Current Advances in treatment of SLE and Related Disorders”

**Continuing Medical Education (CME) lectures will resume in the fall. For more information on speakers, topics, or CME credits, contact Vicki Johnson, CME Coordinator, (205) 348-0093.**

**GRAND ROUNDS**

The University of Alabama School of Medicine
Tuscaloosa Program
Spring 1997

**DCH Regional Medical Center • Willard Auditorium • 12:15 - 1:15 p.m.**

OnRounds • 4 • Winter 1997
The laboratory services at Capstone Medical Center are an important aspect of both patient care and medical training. CMC provides X-rays and EKGs at the center, and the lab performs the tests most commonly ordered by CMC physicians. Most tests are performed on-site, so that lab results are usually returned to the doctor before the patient leaves the clinic. Fast turnaround time gives the resident the ability to compare results with clinical symptoms observed during the physical exam and gain experience in diagnosis.

The CMC lab is a full service laboratory with a wide range of testing such as renal function tests, thyroid panels, lipid panels, CBC's (complete blood count), urines, and a full microbiology department. Other lab tests not performed in-house are collected and sent out to reference labs.

For these tests, the blood is drawn by CMC technicians, two full-time phlebotomists. "These two staff members are both very patient-oriented," says Sherry Wedgeworth, Director of the CMC laboratory.

"They ease patients' anxiety and are very attentive to their feelings of fear or worry. People do not like needles!" said Wedgeworth. "Children, especially, are very apprensive by the time they get to the lab after being poked and probed in the exam room or having shots."

Some test results are ready within 15 minutes; others take longer. The lab makes a special effort to finish the tests before the patient leaves the clinic. Currently, lab staff hand-deliver reports to the medical suites, but the goal is to network all the departments to the lab so tests can be ordered and results received electronically to save time. Seven laboratory staff serve approximately 70-80 patients a day. Counting part-time faculty, there are about 70 physicians seeing patients at Capstone, which schedules 55,000 appointments per year.

Capstone patient Thomas Sims looks to Stacy Morris for reassurance as she and Christy Parsons (right) prepare to draw blood for lab tests at CMC. Thomas is the son of Patricia Sims of Northport. Thomas is one of 70-80 patients per day served by the Capstone Medical Center's lab.

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**News**

**All CCHS '96 Graduates of Residency Program Now Board Certified in Family Medicine**

All the 1996 graduates of the Family Practice Residency Program passed the certification examination of the American Board of Family Practice (ABFP). In a memo to Dean Center and CCHS faculty, Residency Director Marc Armstrong, M.D., said that the class's cumulative scores again exceeded the national average.

In the ABFP Intraining Examination, another test administered each year by the national family practice board, all three classes of residents are tested to measure skill levels in surgery, community medicine, psychology, OB/GYN, internal medicine, pediatrics, geriatrics, and clinical problems. These scores are compared nationally and used to monitor yearly progress in the residency program. "By and large, our residents show improvement in their scores over three years," said Dr. Armstrong, "and are mostly above the national average." The scores of the third year residents were high and indicate a better than 90% likelihood that they will pass their board certification exam, he added. The high scorers by year were Doctors Harvey, L. Sward, and Shenkenberg.

**Dr. Brent McLarty Winner of Scholarship to Study Asthma in London**

Brent McLarty, a third year resident from Jackson, MS, participated in "The Distinguished Residents and Fellows Asthma Education Scholarship Program last summer in London, England. The two-day advanced interactive course on modem asthma management was held at the National Heart and Lung Institute (Imperial College) Royal Brompton Hospital, the largest European center devoted to the study of pulmonary diseases. The Institute's emphasis is on treatment of asthma, with more than 100 full-time investigators working on asthma research."

The conference was chaired by Professor Peter J. Barnes in the Department of Thoracic Medicine at the Heart and Lung Institute, Astra, USA, Inc., a pharmaceutical company, awarded scholarships to residents who demonstrate clinical and academic excellence at their institutions. Dr. McLarty was nominated by Residency Director Marc Armstrong, M.D. The seminars are conducted twice a year for third and fourth year residents in primary care specialties working on asthma research.

On the preceptor's evaluation of students focuses on clinical skills and professionalism. The preceptor rates students on their ability to target important areas of concern, procedural skills, communication, fairness, constructive criticism, and balance between supervision of student and allowing the student sufficient autonomy.

The preceptor's evaluation of students focuses on clinical skills and professionalism. The preceptor rates students on history taking, physical examination, problem solving, knowledge base, technical skills, case presentations, and organization. Interaction with colleagues and relationship with patients are also observed.

The preceptor also evaluates the student's ability to deal with difficult patients, critical thinking, and take initiative.

**Lytle Uses Larry Mayes Scholarship for Study in Nepal**

Richard A. Lytle, Jr., of Birmingham, a medical student at the University of Alabama School of Medicine in Birmingham, was awarded the Larry Mayes scholarship for study and work in an underserved area in this country or abroad. The scholarship is given by Mr. and Mrs. Jack Mayes of Tuscaloosa in memory of their son, a CCMH medical student who died while he was on rotation in Africa shortly before his graduation. Lytle is using his scholarship for an elective in Nepal.

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**Briefs**

**Continuity Clinic Gives Medical Students Longitudinal Patient Care Experience**

WE CARE is the name of the family medicine continuity clinic for student physicians. This program, coordinated by CCHS Assistant Professor of Family Medicine Bobbi Adcock, M.D., allows the student physician to train comprehensive and longitudinal patient care in the family medicine ambulatory setting under the supervision of the family medicine faculty.

The continuity of care concept of the program is important because it allows the student physician to assess family dynamics, develop interpersonal relationships with the patient, the family, and other medical personnel, and practice effective communication. The program is designed so that the student physician who is responsible for a patient and his/her family will serve as the physician of first contact. The student physicians are scheduled to see patients approximately every two weeks during morning clinic hours at Capstone Medical Center. This clinic takes precedence over all other rotation responsibilities, and the student physicians are expected to treat their clinic as if they were in private practice.

The student physicians meet monthly in small groups facilitated by family medicine faculty to make case presentations and discuss each presentation.

Evaluation of students by preceptors and of preceptors by students is built into the program. Students judge their teachers on punctuality, organization (flow of patients) and relevance (ability to target important areas of concern), procedural skills, clear communication, fairness, constructive criticism, and balance between supervision of student and allowing the student sufficient autonomy.

The preceptor's evaluation of students focuses on clinical skills and professionalism. The preceptor rates students on their ability to target important areas of concern, procedural skills, communication, fairness, constructive criticism, and balance between supervision of student and allowing the student sufficient autonomy.

**OnRounds** • 5 • Winter 1997
Dr. Robert Eaton will soon graduate from his third medically-related training program -- the CCHS family practice residency this June. He plans to go into practice in Mississippi. But he was also highly recruited by Dr. David Eaton, a family physician in Tuscaloosa and past graduate of the CCHS family practice residency program. In fact, when he visits the Tuscaloosa doctor, patients in the hall may be startled because they have just left their own identical doctor in the examining room. That is what happened when we visited Dr. David Eaton’s office to make this picture.

Dr. Rob Eaton had completed his pharmacy degree and was a practicing pharmacist with Harco when he decided to go to medical school. He said he wanted to become a physician because the help he could offer his patients as a pharmacist was limited to recommending a less expensive drug, which could only be prescribed by an M.D., or counseling them on the effect of their medications. He couldn’t make the decisions he sometimes thought needed to be made and he couldn’t help his patients as much as he wanted to. He was interested in a holistic approach to health care and medicine -- which considers all aspects of physical, mental and emotional welfare of the patient -- so he decided to get a D.O. (doctor of osteopathic medicine) degree.

The D.O. medical training includes the same elements as the M.D. curriculum, he said, but adds training on the musculoskeletal system and how the nervous and circulatory systems effect the interrelationship between body systems. His twin, David, was a first year resident here at CCHS when he applied to medical school, having completed medical school while Rob earned a pharmacy degree and started his practice at Harco.

Eaton completed medical school in West Virginia, then applied to the family practice residency program at CCHS. He completes his residency in June and plans to return to his hometown of Columbus, Mississippi, to practice family medicine with Baptist Memorial Hospital. His wife, Becki, “is looking forward to moving home,” he said, and raising their daughters, 6-year-old Kaitlin and Kade (6 months), near family.

I asked Robert why he had waited to become a doctor. He said he had worked in a drug store all through his teen years at Cataclonia High School near Columbus and had wanted to be a pharmacist. He added that David always knew he wanted to be a doctor and went straight to Ole Miss medical school after graduating from Mississippi State.

“David usually gets all the credit,” Rob laughingly said when Residency Coordinator Kay Hall mistook him for his brother at the hospital one day. “He even got my award!”* Dr. Eaton and Dr. Eaton have taken different routes to get to their family practice destinations. David was more direct, since he went straight from college to medical school,” said Rob Eaton, “but then he had the advantage of having me to help him with pharmacology when he came to Ole Miss!” (Rob had graduated from the University of Mississippi School of Pharmacy degree David arrived for medical school.) Now David will supervise his brother in one of his last clinical rotations when Robert works with him in his private practice this spring. Robert said David had threatened to give him an F when he heard Rob was leaving Tuscaloosa instead of joining him in practice.

Both twins convey the interest in people, outgoing nature, and caring approach that patients appreciate and which attracts physicians to the family medicine specialty in the first place. Since they are both Kansas City Chiefs fans from their boyhood days living there and probably would have the same office decor, not to mention their looks, maybe it will be less confusing to their patients and colleagues if they do practice in different towns! In the mean time, don’t page “Dr. Eaton” at the hospital without using his first name!

*Editor’s Note: On page 1 of the Fall '96 issue of OnRounds, I mistakenly reported that David Eaton, M.D., had received the V.A. Hospital’s “Award for Outstanding Work as a Second Year Resident.” Belated congratulations, Dr. Robert Eaton, and my apologies!
Honored Teachers Marsh and Robards Offer Specialty Training and More

One thing about training for medical students and primary care specialists (i.e., Tuscaloosa family practice residents) is that they get exposure to every specialty and the physicians who chose it as a career. At CCHS they have, among others, a neurologist and a nephrologist with whom to rotate and learn. The graduating class last year chose the two for outstanding teaching awards. They are Dr. Eugene Marsh, an assistant professor of Neurology and Psychiatry and neurologist in private practice, and Dr. Michael Robards, assistant professor of Internal Medicine, specialist in diseases of the kidney, and medical director of dialysis clinics in Tuscaloosa and surrounding counties. They exhibit special positive qualities of many CCHS faculty.

The students in Dr. Eugene Marsh’s seminar were working on a PBL case the day I joined them. “I was introduced to PBL (problem-based learning) by Dr. Jim Philip,” said Marsh. “It is a wonderful teaching tool, an ideal mechanism for helping students learn about patients with neurological problems.” Dr. Marsh’s PBL cases are based on his actual past or present patients and similar to patients the students see on hospital rounds with Marsh.

Dr. Marsh does not lecture his class; it is more that he leads them in the direction he wants them to go. Students examine the symptoms, discuss the possible causes, decide what additional information they need, and do research. The “learning issues” or questions are listed on a flip chart by the appointed “scribe.” After individual reading and study, they report back to Dr. Marsh and each other to discuss pathophysiology, diagnostic procedures, etc. “This gives us a setting in which to talk about treatment and the patient’s condition as well as causes and possible consequences, but not at bedside,” said Dr. Marsh. “Students like it because we tie together the basic science knowledge they learned in their first two years of medical school with actual clinical situations.”

An elderly stroke patient was the topic that day, and students were discussing which area of her brain had been affected as indicated by facial numbness, pupil size, suddenness of onset, etc. Dr. Marsh interrupted occasionally with comments or questions about properties of the pons, which artery it is blocked, and to suggest a multi-colored chart by the appointed “scribe.” After individual reading and study, they report back to Dr. Marsh and each other to discuss pathophysiology, diagnostic procedures, etc.

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“Welcome to clinical medicine,” replied Marsh, who confessed to being intimidated by journals when he was in medical school. There is an “expert” opinion in every article, he said, and they do not necessarily agree; in fact, they often disagree. Then he learned the difference in opinion articles and peer reviewed articles, he told his class.

Peer review journals are the ones to rely on, he explained, since the research is critically examined by other specialists to make sure the article makes sense before being published. He also cautioned them about drawing conclusions based on anecdotal studies and “your own experience” in the absence of large scale clinical trials. Broad-based testing of various drug treatments is needed, he said, to uncover the fine points of how it affects patients with different conditions, older or younger patients, how long and how much medicine it takes to make a difference, even whether it affects males and females in the same way.

“Consider how humble you should be about what you think you know,” said Marsh. “There may be more factors at work than theory takes into consideration.” Theory based on laboratory knowledge says low dose aspirin works, he pointed out, “but different people’s platelets inhibit at different levels of aspirin dose. Patients don’t come in wearing badges that say: I inhibit at 81 milligrams.” The students and residents in Dr. Marsh’s class will not see neurological cases every day, like he does. “These are students who plan careers in family medicine, pediatrics, emergency medicine, or surgery, etc.,” says Marsh. “They will face neurological crises less frequently, but no less importantly, he stresses. These doctors must be able to recognize danger signs, take preventive action quickly, and know when to call for specialized help. His students are learning these things.

Dr. Mike Robards says his patients are some of his best friends, and his attitude of concern is one of the most valuable things he thinks he can give to his students. He gives lectures in his specialty of nephrology, teaches his students and residents about kidney disease, dialysis, and medication, and trains them in treating patients as they make hospital rounds together. Robards and his students also spend a lot of time in rural counties where he makes weekly visits to supervise outlying dialysis clinics and the patients there.

One of his major themes, he says, is that physicians need to “give something back.” He advises his students to look at the doctors with whom they plan to go into practice and those to whom they will refer. “It’s a character issue,” he says. “These college-trained very capable doctors, and they have a lot to contribute to the communities they will practice in when they leave here.”

One round for internal medicine, Robards leads one or more students and residents into intensive care situations on a daily basis. “My patients are usually very sick and/or chronically sick,” said Robards. “I want my students to learn to treat them effectively and make decisions about their medical needs. But I also want them to be aware of their patients’ overall needs and the needs of the community that they can help to meet.”

He spends a lot of time with his students because he really enjoys them and his teaching responsibilities. He feels that his ability to break things down into understandable segments is an advantage.
The Rural Medical Scholars Program (RMSP), initiated this year at the University of Alabama School of Medicine’s College of Community Health Sciences in Tuscaloosa, selects and prepares ten outstanding rural scholars each year for Family Medicine or primary care practice in Alabama. The RMSP selects applicants to the UA School of Medicine who have a rural background and the desire to become a rural physician and provides them with a special educational program which will influence them to practice a primary care specialty in an underserved (rural) area of Alabama.

The RMSP Admissions Committee will select among eligible applicants based on academic and personal factors, characteristics indicating teamwork and self-motivation, and other criteria that predict their abilities to become outstanding rural physicians. The RMSP Admissions Committee is composed predominantly of primary care practitioners in rural practice and CCHS faculty with representation from the UASOM Admissions Committee. For more information or to recommend a student from your area, contact Dr. John Wheat, BCM, Box 870326, Tuscaloosa, AL 35487.

Faculty Honors

Dr. Elizabeth Rand, professor and chair of Psychiatry and Neurology, has been elected as a Fellow of the American Psychiatric Association. Her election reflects recognition by peers of outstanding abilities, talents, and contributions to the profession. She will be formally inducted at a Convocation ceremony at the association’s annual meeting in San Diego, California in May.

Dr. Robert Pieroni, CCHS professor of Internal Medicine, was included in the 1996 edition of Who’s Who in Medicine and Healthcare. He has previously been named to The Best Doctors in America: Southeast Region (1995), International Who’s Who of Professionals, and Who’s Who in Gerontology.