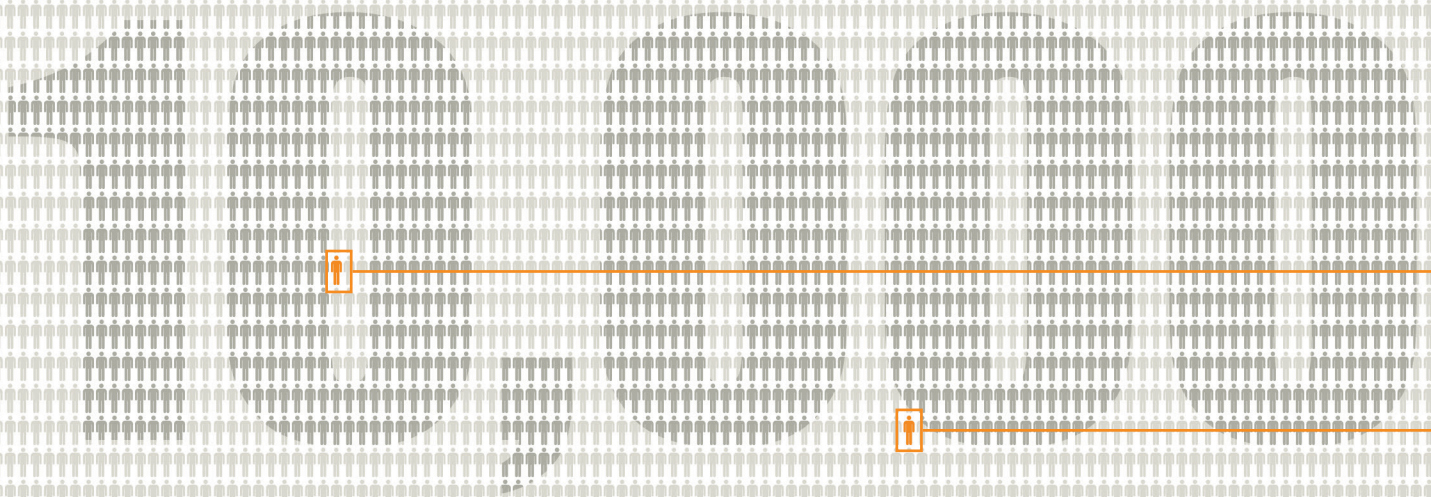


# KCUMB magazine

KANSAS CITY UNIVERSITY OF MEDICINE AND BIOSCIENCES | SUMMER 2014



# KCUMB Celebrates the College of Osteopathic Medicine's 10,000th Graduate

**1916:** The Kansas City College of Osteopathy and Surgery (KCCOS) is founded.

**1917:** Mamie Johnston, D.O., a transfer student, becomes the first KCCOS graduate.

**1949:** KCCOS celebrates its 1,000th graduate.

**1961:** KCCOS celebrates its 2,000th graduate.

**1970:** KCCOS becomes the Kansas City College of Osteopathic Medicine (KCCOM).

**1972:** KCCOM celebrates its 3,000th graduate.

**1980:** KCCOM becomes the University of Health Sciences, and UHS celebrates its 4,000th graduate.

**1986:** UHS celebrates its 5,000th graduate.

**1994:** UHS celebrates its 6,000th graduate.

**1996:** The Education Pavilion, later renamed the Strickland Education Pavilion, opens and classes are finally consolidated to one campus.

**2000:** UHS celebrates its 7,000th graduate, and the Mary Lou Butterworth, D.O., Alumni Center opens.

**2004:** UHS becomes the Kansas City University of Medicine and Biosciences (KCUMB).

**2005:** KCUMB celebrates its 8,000th graduate.

**2006:** KCUMB's College of Biosciences confers its first master of science in biomedical sciences degrees on 17 graduates.

**2010:** KCUMB celebrates its 9,000th graduate.

**2014:** KCUMB celebrates its 10,000th graduate.

## KCUMB Celebrates the Class of 2014 and a Special Milestone



*Marc B. Hahn, D.O., president and chief executive officer, recognizes Rex Farrer, Jr., as the 10,000th graduate of the College of Osteopathic Medicine during Commencement ceremonies May 17 at Kemper Arena in Kansas City, Mo.*

With family and friends watching from the audience, members of the Class of 2014 officially received their degrees during Commencement ceremonies May 17 at Kemper Arena in Kansas City, Mo.

The ceremony also marked a significant milestone for KCUMB as the University conferred the doctor of osteopathic medicine degree on its 10,000th graduate of the College of Osteopathic Medicine.

In addition, the ceremony marked the first time in the University's history that the College of Osteopathic Medicine and the College of Biosciences conferred degrees together. Among those earning degrees:

- 235 earned doctor of osteopathic medicine degrees, including 10 who concurrently earned a master of arts in bioethics and 21 who concurrently earned a master of business administration in healthcare leadership through KCUMB's innovative partnership with Rockhurst University
- 34 earned master of science in biomedical sciences degrees
- 4 earned master of arts in bioethics degrees
- 19 new osteopathic physicians were commissioned as officers in the U.S. Air Force, Army and Navy

During the ceremony, KCUMB conferred an honorary doctor of humane letters degree on Terry Dunn, former chair of the Board of Trustees and chief executive officer of J.E. Dunn Construction. The honorary degree is KCUMB's highest tribute and is awarded to an individual for his or her contributions to the betterment of all humanity.

Barbara Ross-Lee, D.O., vice president of health sciences and medical affairs at the New York Institute of Technology, delivered the keynote address. Dr. Ross-Lee is a trailblazer for her achievements in medicine, health policy and education. She overcame many obstacles not only in her journey to become an osteopathic physician, but also to become the first female African-American dean of a U.S. medical school in 1993.

Dr. Ross-Lee encouraged graduates to recognize that becoming a physician is not a typical career choice.

"It is a high calling with awesome responsibilities, but it's also something else," she said. "From this day forward, those of you who are receiving your D.O. degree today will need to understand that being a physician is now an immutable part of who you are and who you will always be.

"It's very much like your race, ethnicity or gender. It will be how you think of yourself and how others will think of you. No other profession is so honored," she added.

Join your classmates  
for Homecoming 2014

# Beneath the Cottonwood

Sept. 18–20  
on the KCUMB Campus

WATCH FOR INFORMATION ABOUT SPECIAL  
REUNION GATHERINGS COMING SOON FROM  
YOUR CLASS REUNION CHAIRS.

## EVENT SCHEDULE

All events and CME sessions are subject to change.  
Check [www.kcumb.edu/Homecoming](http://www.kcumb.edu/Homecoming) regularly to view updated information.

### Thursday, Sept. 18

7 a.m. – 8 a.m.	CME Registration, Breakfast and Exhibits
8 a.m. – 5:15 p.m.	CME Sessions
5:30 p.m.	KCUMB Alumni Association Annual Meeting of the Members

### Friday, Sept. 19

7 a.m. – 8 a.m.	CME Registration and Breakfast
7:30 a.m. – 4:45 p.m.	CME Sessions
11:45 a.m. – 1 p.m.	Picnic Lunch with Faculty, Staff and Students
1 p.m. – 2:30 p.m.	William J. Legg, D.O., FAOASM, Distinguished Lecture Series
2:30 p.m. – 4:45 p.m.	Student-Led Tours of the KCUMB Campus
6 p.m. – 7:30 p.m.	Homecoming Reception and Physicians' Hall of Sponsors Scholarship Inductions
Time TBD	Reunion Gatherings (Watch for information coming soon from your class chair.)

### Saturday, Sept. 20

7:30 a.m. – 5 p.m.	CME Sessions
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Register at  
[www.kcumb.edu/Homecoming](http://www.kcumb.edu/Homecoming).

DON'T MISS YOUR CHANCE TO EARN CME CREDIT  
**REGISTER FOR THE 14TH ANNUAL FALL CME SCIENTIFIC SEMINAR  
AND UPDATE IN CLINICAL MEDICINE**  
HURRY! EARLY-BIRD REGISTRATION ENDS AUG. 25





## Features

### 14 'When Abuse Stops, Childhood Starts'

KCUMB alum Ken McCann, D.O. (COM '04), has made it his mission to help victims of child abuse.

### 20 A Perplexing Predicament

With no simple solution for the looming shortage of primary care physicians in the United States, what led to the current situation and what are some of the options?

### 26 Tackling Obesity

Laura Voss, D.O. (COM '97), uses a common-sense approach and her own personal struggles to inspire her patients to lose weight.

### 32 'Wartime' at Fort Hood

Joe Jeanette, D.O. (COM '02), shares his experiences and thoughts after treating victims of the most deadly shooting at a U.S. military base in history.



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## Front Cover

Kansas City University of Medicine and Biosciences celebrates the College of Osteopathic Medicine's 10,000th graduate.

## FIRST impressions

*Employees take a first peek at KCUMB's new Academic Center, a state-of-the-art facility that houses two large lecture halls, as well as breakout rooms for smaller study groups. KCUMB hosted a special ribbon-cutting ceremony for the building on Aug. 2. (photo by Cortney Christensen)*



## KCUMB magazine

KCUMB Magazine is published twice a year by the University Relations Department for alumni, faculty, staff and friends of Kansas City University of Medicine and Biosciences.

Viewpoints expressed within KCUMB Magazine are those of the writers and individuals interviewed, and do not necessarily reflect the position of KCUMB, its administration, faculty, staff or students.

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**We welcome your responses to this publication.**

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## PRESIDENT'S message

**K**ansas City University of Medicine and Biosciences has made tremendous strides over the past year as we work to shape our institution's next 100 years. As we embark on the new 2014-2015 academic year, this is an ideal opportunity to reflect on all we have achieved during the past year. Thanks to the overwhelming dedication and tireless efforts of countless individuals, great changes have taken place on our campus.

We celebrated many accomplishments over the past year, including:

- the development of a new vision that clearly places student success above all else
- significant investment in academic support services to assure student success
- the incorporation of a tablet-based curriculum
- needed renovations to our anatomy laboratory
- remodeling of our Weaver Auditorium into a modern, state-of-the-art Academic Center
- restructuring of clinical services to once again offer medical care / clinical education in our neighborhood
- a major, multi-million dollar investment in scientific research and discovery that will place this University in solid collaborations with our peer institutions in Kansas City
- a new focus on telling the great story of our University, our people and the impact we have had over the past 98 years

This is a great start, but it's only the beginning. As Andrew Taylor Still, the founder of osteopathic medicine, once said, "Let us not be governed today by what we did yesterday, not tomorrow by what we do today, for day by day we must show progress."

Yours truly,

Marc B. Hahn, D.O.  
President and Chief Executive Officer

### Get the Latest KCUMB News

Read my blog at: [president.kcumb.edu](http://president.kcumb.edu)

Follow me on Twitter: @KCUMBpresident

## BY THE numbers

**10,877**

The estimated number of osteopathic physicians in the United States in 1950.

**87,300**

The estimated number of D.O.s in the United States as of May 31, 2013, according to information recently released by the American Osteopathic Association.

**5**

Missouri's rank among states with the largest populations of osteopathic physicians. KCUMB is also the fifth oldest of the colleges of osteopathic medicine. Coincidence? We think not.

**16,253 and Counting**

The number of drinks served by KCUMB's Common Grounds Coffee Shop so far this year. Forgive us if we seem jittery.

**45.6**

The percentage of Class of 2014 graduates who accepted residencies in primary care fields (family medicine, internal medicine and pediatrics).

The number of Class of 2014 graduates commissioned into the U.S. military during Commencement

**19**

The average MCAT score of a student accepted to KCUMB's College of Osteopathic Medicine this year, nearly a full point higher than the previous year.

**28.08**

**282**

The number of applicants to the College of Biosciences for the incoming class, an increase of 166 percent over the previous year.

**4,274**

The number of applicants to the College of Osteopathic Medicine for the incoming first-year class, an increase of 10 percent over the previous year.

## LETTER to the editor

It was with great pleasure that I read your recent article on Dr. George Smith and his efforts in the aftermath of the fertilizer plant explosion in West, Texas.

As a proud graduate of KCUMB, I wanted to add a little more to the story of KCUMB's influence that day and in the following weeks and months.

Your article referenced the local Level 2 Trauma Center where the majority of these people were triaged and treated. That Trauma Center is Hillcrest Baptist Medical Center in Waco, Texas. I am a fellowship-trained orthopaedic trauma surgeon and my partner, Dr. Brent Bauer, and I are the directors of the orthopaedic trauma program there. We worked through the night and into the next day caring for the most severely injured, and we have continued to provide ongoing care as we work to get all of our "West Heroes" back to life without limits.

Seeing our medical community come together that night is destined to be one of the highlights of my career!

Once again, thank you for the insightful piece on Dr. Smith's work. I have always been proud of the educational foundation I received in Kansas City, never more so than during the events surrounding April 17, 2013.

Regards,

Lance A. Ellis, D.O. (COM '01)  
Orthopaedic Surgeon/Founder  
Total Trauma Care, PLLC

**FEEDBACK:** We welcome your responses to this publication. Please send comments to [editor@kcumb.edu](mailto:editor@kcumb.edu).

# ALONGthe avenue

## Congressman Visits KCUMB Campus, Tours Community Garden

KCUMB officials rolled out the red carpet recently for a special guest, U.S. Rep. Emanuel Cleaver II.

Rep. Cleaver visited the KCUMB campus June 16, where he met with Marc B. Hahn, D.O., president and chief executive officer, to discuss the University's role as an anchor in the Northeast Neighborhood and as a leading provider of physicians for Missouri and Kansas.

"For nearly 100 years, the Kansas City University of Medicine and Biosciences has called our Northeast Neighborhood home," Dr. Hahn said. "And, although we have grown to become the second-leading producer of physicians for the states of Missouri and Kansas, we have never forgotten our mission, which is 'improving the well-being of the communities we serve.'"

Highlighting Rep. Cleaver's trip was a visit to KCUMB's Community Garden, where first-graders from Scuola Vita Nuova harvested snap peas, onions and kale.

KCUMB built the Community Garden in 2010. Since then, faculty, staff and students have annually grown and harvested nearly 2,000 pounds of fruits and vegetables, which they donate to nonprofit organizations in the Northeast Neighborhood.

Rep. Cleaver was particularly impressed by KCUMB's regular efforts to involve area children in the planting, growing and harvesting process as a way of encouraging them to live healthy.

"When they participate in keeping the weeds out and pulling out the food for harvest, then I think the chances are going to be greater that they're going to have an appreciation for healthy food," Rep. Cleaver said.



## KCUMB Sets a New Course for Future Research, Shifts Focus to Translational Research and Collaboration with Local Partners

In a concerted effort to elevate the institution's standing among those in the Kansas City research community and beyond, KCUMB officials recently announced a fundamental shift in research operations to focus on advancing the scientific exploration of biomedical and translational research.



Dr. Joyce

"This strategic shift in direction marks an important step toward achieving our goal of enhancing research activity and positioning KCUMB as a magnet for students pursuing biomedical sciences," said Jeffrey Joyce, Ph.D., vice president for research.

In addition, the change also provides KCUMB with additional opportunities to collaborate with colleagues at the University of Kansas Medical Center, the University of Missouri-Kansas City, Children's Mercy Hospital and other key stakeholders in the Kansas City Area Life Sciences Institute.

In conjunction with the shift, KCUMB will make significant, long-term investments that will be transformative, including:

- Recruiting an internationally recognized investigator and team
- Expanding laboratory space on campus
- Establishing a scientific core in the neurosciences
- Purchasing state-of-the-art equipment that benefits both investigators and the entire University community

As a result of this shift, KCUMB will no longer pursue industry-sponsored clinical trials.

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[www.kcumb.edu/KCUMBmagazine](http://www.kcumb.edu/KCUMBmagazine)

# ALONG the avenue

## Annual Golf Outing Raises Money for KCUMB's Score 1 for Health

Approximately 150 golfers joined forces with local sports celebrities June 17 to make certain that Kansas City children get a healthy start in life.

The Deron Cherry Celebrity Invitational raises money for KCUMB's Score 1 for Health program, which works to ensure that every child has the opportunity to reach his or her potential, without allowing undiagnosed health issues to stand in the way.

While a final fund-raising total from this year's event is not yet known, the event traditionally serves as one of the program's largest fund-raising efforts of the year.

For more than 20 years, Score 1 for Health and its teams of volunteers – a majority of whom are KCUMB osteopathic medical students and faculty – have provided free, in-school health assessments, preventive health education and mentors for children.

Deron Cherry, a former Kansas City Chiefs player who co-founded Score 1 for Health 1993 with the late Robert Ricci, D.O., said he is proud of the impact the program has made.

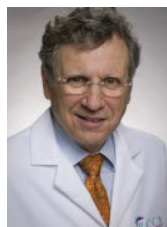
"You all can be successful, you can dream the biggest dreams," he said, recalling a frequent message to the children he encounters through the program. "But, you need to be healthy to give yourself that chance."

## KCUMB Welcomes New Members of the Board of Trustees

During its May meeting, KCUMB's Board of Trustees added two new members with experience in the medical profession.

Howard Kesselheim, D.O. (COM '74), is a senior oncologist at the Center for Cancer and Hematologic Disease in Cherry Hill, N.J. He currently serves as a clinical assistant professor for the College of Medicine and Dentistry of New Jersey.

Kevin Hicks, MBA, M.S., serves as chief executive officer for Overland Park (Kan.) Regional Medical Center, part of the HCA Midwest Health System. He has more than 30 years of health-care experience and has been with HCA since 1987, previously serving as CEO of Research Medical Center and completing an earlier stint as CEO at OPRMC.



Dr. Kesselheim



Hicks



## KCUMB Changes COM Curriculum to Better Prepare Medical Students

Goal No. 1: Enhance Student Success.

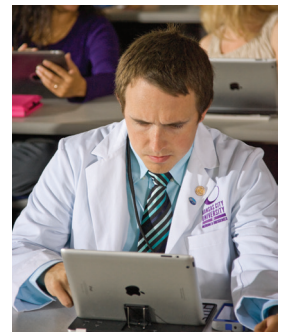
While KCUMB's Strategic Plan outlines all five of the University's major goals for the near future, none loom larger than that.

With that in mind, KCUMB's College of Osteopathic Medicine will transition to a modified-systems, application-based curriculum beginning with this fall's incoming first-year students. The new curriculum is based on adult-learning theory and focuses significant attention on the importance of problem solving and medical informatics.

The changes will move KCUMB away from a knowledge-acquisition model of learning, which consists of traditional lectures and slides, and toward a more interactive style.

Dr. Dubin said the newly adopted curricular model has been proven successful elsewhere in preparing osteopathic medical students for future practice.

"Change in curriculum is always an exciting opportunity for faculty and students," said Bruce Dubin, D.O., J.D., executive vice president for academic affairs, provost and dean of the College of Osteopathic Medicine. "It's really about ensuring that the next generation of physicians provides the best care possible to their future patients. The graduates of KCUMB will have the best residency opportunities and be among the best trained in the country, with our new curriculum direction."



## Medical Students Participate in Cassani Organ Transplantation Lecture

There are currently more than 122,000 people on the waiting list for organ transplants in the United States. Eighteen of those people die each day waiting for a transplant.

Those are startling statistics, something KCUMB's first-year osteopathic medical students learned May 12 as part of the Colby Cassani Endowed Lecture Series.

Starla Cassani and her husband, John, an osteopathic physician, established The Colby Foundation in 1995 to educate the public about organ, eye and tissue donation, two years after the death of their son, Colby, in a tragic accident.

Starla shared her family's personal story and spoke to KCUMB students about the importance of organ donation. Other speakers included Mark Reintjes, M.D., medical director for the Midwest Transplant Network (MTN); Chris Bryan, M.D., chief of lab services at MTN; and Ray Gabel, community education coordinator at MTN. KCUMB's bioethics staff also discussed potential ethical issues involved with organ, eye and tissue donation.

Learn more about The Colby Foundation at [www.colbyfoundation.org](http://www.colbyfoundation.org).



## Community Garden Harvests Nearly a Ton of Produce for the Northeast Neighborhood

KCUMB faculty, staff and students worked together throughout the year to contribute to garden maintenance and educate local elementary students on the benefits of eating healthy.



Children from Scuola Vita Nova Charter Elementary and Della Lamb Charter School made field trips to the garden, where they planted and harvested fresh vegetables. The produce was then distributed to the schools, along with the Della Lamb Food Pantry, Harvesters and Grace United Ministries.

In spite of a late start to the growing season due to last year's delayed winter weather, the total amount of produce cultivated in the garden equaled 1,937 pounds, just shy of the one-ton mark.

Children from Scuola Vita Nova Charter Elementary and Della Lamb Charter School made field trips to the

## Faculty, Staff Get First Glimpse of New Academic Center

Several KCUMB faculty and staff members gathered July 25 to tour the University's new Academic Center, which opened in late July.

The Academic Center, formerly Weaver Auditorium, features two large lecture halls, as well as several smaller breakout rooms for study sessions. Renovation of the existing facility cost the University approximately half of what an entirely new facility would have. A wall in the Academic Center will recognize donors to the building, and plaques from the original Weaver Auditorium seating will now be affixed to students' desks in the Academic Center.

"We have an obligation to provide our students with the best possible learning environment, and I'm confident the new Academic Center provides exactly that," said Marc B. Hahn, D.O., president and chief executive officer.

The Academic Center is a key component of KCUMB's five-year, \$60 million Campus Master Plan, which will create a state-of-the-art medical and health sciences campus for the future. Among many improvements, the plan also includes:

- Renovations to the Administration Building
- A new Center for Medical Simulation
- A new Health and Wellness Center

For more information and to see progress on other portions of the Campus Master Plan, visit [www.kcumb.edu/Future](http://www.kcumb.edu/Future).



*Jim Herrington, director of campus operations, addresses faculty and staff July 25 during a tour of the Academic Center. Much progress has been made on the facility during the weeks since, and a special ribbon-cutting ceremony took place Aug. 2 to mark the official opening of the building.*

## KCUMB Realigns Academic Departments to Improve Communication, Collaboration

Beginning with the new academic year, KCUMB will restructure several academic departments in an effort to improve communication and collaboration.

KCUMB's changes reflect national trends that demonstrate a shift away from small, one- or two-person departments to larger multi-disciplinary groups, said Bruce Dubin, D.O., J.D., executive vice president for academic affairs, provost and dean of the College of Osteopathic Medicine. The rationale stems from the premise that the flow of academic ideas and creativity is enhanced through a larger and more collaborative group effort. In addition, communication is greatly enhanced when groups have the opportunity to come together as one.



Dr. Dubin

Dr. Dubin announced the changes to the KCUMB community June 17. Among them:

- The Department of Family and Community Medicine will merge with the Department of Pediatrics to form the Department of Primary Care, which will be chaired by W. Joshua Cox, D.O. (COM '00).
- A new Department of Specialty Medicine will be created and include those formerly in the Department of Internal Medicine and various medical subspecialties, such as obstetrics and gynecology, surgery, neurology and others. Kevin Hubbard, D.O. (COM '86), will serve as interim chair of the Department of Specialty Medicine.
- The Department of Osteopathic Manipulative Medicine has been separated from family medicine, and the interim chair will be Kevin Treffer, D.O. (COM '87).
- A new Division of Social Medicine will be formed within the College of Osteopathic Medicine. Score1 for Health will reside within the Division of Social Medicine, as will other initiatives centering on community health.
- The master of arts in bioethics program will move into the College of Osteopathic Medicine beginning with the 2014-2015 academic year. This will assist in strategic planning for the bioethics program and further enhance the dual-degree D.O./M.A. in bioethics program.
- As the D'Angelo Library becomes more involved in the arena of academics and teaching with the development of a new Medical Informatics course in the medical school, the D'Angelo Library will now report directly to the Office of the Provost.

## Kansas City Business Journal Honors KCUMB Executive as a CFO of the Year Award Recipient

The Kansas City Business Journal recently honored a KCUMB executive for his financial acumen.

Joe Massman, MBA, executive vice president for finance and operations, chief financial officer and chief operating officer, was named as a 2014 CFO of the Year in the large, nonprofit category. He was recognized June 27 during a special event in Overland Park, Kan.



Massman

"Joe is a tremendous asset to our University," said Marc B. Hahn, D.O., president and chief executive officer. "He has brought stability and confidence to the institution, while simultaneously initiating the necessary changes to move us toward achieving our vision and mission."

Massman, who has been with KCUMB for three years, has been instrumental in leading initiatives to improve and expand the physical campus, update technology systems, and enhance compensation and benefit programs. In 2013, his focus on fiscal procedures and process improvements contributed KCUMB being the only private medical school in the nation to decrease students' tuition.

"The achievements KCUMB has accomplished during my short time here are the result of an engaged and highly supportive Board of Trustees, strong presidential leadership and an extremely talented group of employees," Massman said. "I am proud to be able to represent them and the University."

## KCUMB Finds Success Starting Graduate Medical Education Programs

As a part of the University's ongoing strategic initiative to develop clerkship and residency opportunities for its students, KCUMB officials are working with hospital and clinical partners to improve students' clinical training and residency experiences.

KCUMB recently developed a new general surgery residency program in collaboration with St. Anthony Hospital in Lakewood, Colo. The new program, which was approved by the American Osteopathic Association to accept 20 surgical residents, began accepting students in July.

A Level 1 Trauma Center, St. Anthony Hospital is now a member of KCUMB's Osteopathic Post-doctoral Training Institute (OPTI). This new relationship will also increase the number of clerkship spots available for third- and fourth-year osteopathic medical students in the 2015-2016 academic year.

## KCUMB Announces New Military, Global Medicine Tracks

The addition of two specialized tracks for osteopathic medical students will better prepare them for situations they encounter in their future careers, while also providing additional reasons for prospective students to choose to attend KCUMB.

Beginning in August, KCUMB will offer osteopathic medical students the opportunity to take a special military track, making the University only the third medical school in the United States to offer this specialized training.

Bruce Dubin, D.O., J.D., executive vice president for academic affairs, provost and dean of the College of Osteopathic Medicine, said the track is designed for medical students participating in the Health Professions Scholarship Program. Through the U.S. Army, Navy and Air Force, HPSP pays for medical education in exchange for service as a commissioned medical department officer upon completion of a medical degree.

HPSP students at KCUMB will now receive 20 to 25 additional contact hours of training each semester. Hands-on didactic experiences and lectures focusing on trauma, disaster life support, tropical diseases and post-traumatic stress disorder will make up a portion of the simulations and training.

"As physicians in the U.S. Armed Forces, our military students will certainly face unique medical challenges of combat care," Dr. Dubin said. "This track will supplement their medical curriculum with hands-on didactic experiences focusing on what they are likely to face on a battlefield or in crisis situations. It will better suit and prepare them for a career in military medicine."

Dr. Dubin announced the new military track in January during a special presentation on KCUMB's campus that featured Maj. Gen. Philip Volpe, D.O., U.S. Army (retired), former commanding general of the U.S. Army Medical Department Center and School in San Antonio, Texas.

Dr. Dubin said lectures by military physicians, such



as Maj. Gen. Volpe, will give students firsthand insights into situations they can expect to encounter both at home and abroad.

The addition of the military track fills multiple needs for the University and for students who are HPSP participants.

"Establishing this track helps KCUMB fulfill our mission to care for the well-being of the communities we serve, one of which is our men

and women in service," he said. "Additionally, it addresses the need of our military students to better understand the situations they are very likely to face during their career. And, finally, it fulfills part of our unwritten social contract to care for our men and women serving in the military."

KCUMB is also responding to international health-care challenges by implementing a new global medicine track for interested osteopathic medical students. Students who qualify for the global medicine track will gain additional knowledge they can use while serving internationally, such as during KCUMB's annual medical missions to Guatemala with DO-CARE International.

Often, American medical students only experience the Western model of medical care. The global medicine track will teach KCUMB students how various models differ and help the students develop solutions to challenges in health-care delivery and implementation in other countries.

Led by Gautam Desai, D.O., professor of family and community medicine, the global medicine track will include

a research component, which will benefit students by making them more competitive for post-graduate training programs. To counter the shortage of medical laboratories and imaging capabilities in some international areas, students will receive additional training in navigating language barriers and further improving their physical exam skills.



## Enrollment Numbers Increase Across All Degree Programs

If the number of applications is any indication, a degree from KCUMB is as highly sought after as it has ever been. Application numbers for the 2014-2015 academic year were up across the board for both the College of Osteopathic Medicine and the College of Biosciences.

"I think we're seeing unprecedented interest," said Richard Winslow, Ph.D., vice provost of student and enrollment services. "It's a direct reflection of not only the brand recognition we have within the medical education community, but also of the quality of graduates we turn out each year."



Dr. Winslow

The number of students applying to KCUMB's College of Osteopathic Medicine increased 10 percent over the previous academic year, reaching record-high levels. A total of 4,274 applications were received for the incoming first-year class. And, if that wasn't impressive enough, the quality of osteopathic medical students accepted also increased. Accepted students had an average score of 28.08 on the Medical College Admission Test, nearly a full point higher than the previous year.

Applications also soared 166 percent for the College of Biosciences, with a combined 282 applicants for the biomedical sciences and bioethics programs.

"Some of the increase is due to our strategy changing, taking a more targeted admissions approach," Dr. Winslow said. "We're seeing more success with those efforts. Prospective students are also seeing the opportunity there is to get a good foundation in the biomedical sciences before applying to medical school, pharmacy school or other professional schools."

## Ingram's Names Two KCUMB Faculty Among its 2014 Heroes in Health Care

A Kansas City magazine recently named two KCUMB faculty members to its list of 2014 Heroes in Health Care.

Douglas Rushing, Ph.D., professor of biochemistry, and Todd Hill, D.O. (COM '00), assistant professor and chair of psychiatry, were honored March 21 by *Ingram's Magazine*.

Dr. Rushing, a member of KCUMB's faculty for more than four decades, was named a recipient of the Lifetime Achievement Award. Dr. Hill was honored in the professional services category. In addition to his teaching role at KCUMB, he provides psychiatric care at his private practice, Northland Psychiatric Services, and at North Kansas City Hospital and Liberty Hospital.

## Hall of Famous Missourians Inducts Founder of Osteopathic Medicine

The founder of osteopathic medicine, Andrew Taylor Still, D.O., was officially inducted into the Hall of Famous Missourians during a special ceremony April 16 at the Missouri State Capitol in Jefferson City.

During a ceremony in the House Chamber, Speaker of the House Tim Jones and sculptor Brandon Crandall unveiled the bronze bust of the late Dr.

Still that now resides among sculptures of other famous Missourians between the House and Senate chambers.

Addressing more than 300 people, including medical students from Missouri's two osteopathic medical colleges, Jones emphasized Dr. Still's impact on medicine for the past century.

"What was a radical idea at the very beginning and a new way of looking at the healing process when he first brought it forth, today is a tried-and-true path to better health for millions of people in all 50 states and in more than 60 countries around the globe," Jones said.

Dr. Still founded osteopathic medicine in 1874. He is widely credited with pioneering the concept of "wellness" and being among the first to understand the importance of treating illness within the context of the whole body.

In 1892, Dr. Still opened the nation's first osteopathic medical school, the American School of Osteopathy, located in Kirksville, Mo., and now known as A.T. Still University. In 1916, four members of Dr. Still's original graduating class founded KCUMB in Kansas City, Mo. It is now the largest medical school in Missouri, the 12th-largest medical school in the United States, and the second-greatest provider of physicians in Missouri and in Kansas.

Marc B. Hahn, D.O., president and chief executive officer, attended the ceremony along with a group of KCUMB students, faculty and staff.

"Now, more than ever, Dr. Still's philosophy of primary care, prevention and the holistic approach to medicine is what this country is seeking," Dr. Hahn said. "It is the basis for developing care that is not only focused on the treatment of disease, but also upon prevention."



## Gift Body Memorial Service a Celebration of Hope and Heart

There are some things you can only learn through hands-on experience. For KCUMB's osteopathic medical students, that includes the inner workings of the human body.

On May 2, the KCUMB gathered to honor those who donated their bodies to be used for medical study during the University's 23rd-Annual Anatomical Memorial Service.

Jim Mitchell, keynote speaker for the event, spoke to students and to loved ones of donors, emphasizing the magnitude and impact of the gift by those who gave their bodies for the purpose of teaching.

"We are here to honor those who gave, that others might learn," Mitchell said. "There are things you simply can't learn by the printed page, by the spoken word or by film. There are things you can only learn by hands-on experience."

Approximately 50 bodies are used each year at KCUMB for the purpose of teaching anatomy.



## University Earns National Recognition for Communications Efforts

For a second consecutive year, the American Association of Colleges of Osteopathic Medicine recognized KCUMB with two first-place awards for excellence in communications during the organization's annual banquet April 4 in Washington, D.C.

*KCUMB Magazine* earned first place as the best print magazine, and the University's website, [www.kcumb.edu](http://www.kcumb.edu), won first place for best website.

AACOM also honored KCUMB with second-place awards in the categories of social media, print recruitment piece and newsletter, as well as an honorable mention for a feature story. Members of the University Relations team worked with internal clients to produce each of the entries.

Each year, AACOM's Excellence in Communications Awards are presented in honor of the outstanding marketing, media relations, public education, writing and design efforts of the nation's colleges of osteopathic medicine.



## Missouri ACOFP Honors KCUMB Faculty Member with Organization's Most Prestigious Award

The envelope, please ...

And with no further adieu, the recipient of this year's Family Physician of the Year Award is John Dougherty, D.O. (COM '92), of KCUMB.

The Missouri Society of the American College of Osteopathic Family Physicians (MSACOF) bestowed its highest honor on Dr. Dougherty, senior associate dean for educational programs and medical affairs, and professor of family and community medicine, Feb. 1 during the organization's President's Banquet in Kansas City, Mo. The award recognizes Dr. Dougherty for exemplifying the principles of osteopathic family medicine and bettering the osteopathic profession. In addition to his teaching and administrative responsibilities at KCUMB, he serves as the team physician for the Missouri Comets soccer team and for athletes at Rockhurst University.

MSACOF also recognized three other KCUMB alumni for their contributions.

Kevin Treffer, D.O. (COM '87), associate professor and director of osteopathic clinical skills at KCUMB, received the James A. DiRenna, Sr., D.O., Appreciation and Recognition Award, for his years of dedication and diligence to the osteopathic profession. Dr. Treffer currently serves as chair of the Educational Council on Osteopathic Principles and as a delegate to the Jackson County Osteopathic Medical Association.

MSACOF presented its Lifetime Achievement Award to Phillip L. Accardo, D.O. (COM '59), in honor of his dedication to the practice of osteopathic medicine. Dr. Accardo, now retired, practiced in the Kansas City area for his entire medical career.

The late Myral Coatney, D.O. (COM '55), was honored with the Memorial Award for his outstanding contributions to osteopathic medical profession and MSACOF.



Dr. Dougherty

## MAOPS Honors Faculty for Outstanding Service

The Missouri Association of Osteopathic Physicians and Surgeons recognized four KCUMB faculty members for their accomplishments on May 3 during the organization's 116th annual convention in Branson, Mo.

G. Michael Johnston, D.O. (COM '73), vice dean for the College of Osteopathic Medicine, received the Wilbur T. Hill, D.O., Distinguished Service Award.

MAOPS awarded its Physician of the Year Award to Kevin Hubbard, D.O. (COM '86), professor and chair of internal medicine.

Marilyn DeGeus, director of KCUMB's D'Angelo Library, received the Public Medallion Award.

Douglas Rushing, Ph.D., professor of biochemistry, was selected as the Professional Medallion Award recipient.

In addition to faculty recognition, MAOPS presented the College Medallion Award to KCUMB for its medical outreach efforts with DOCARE International. Since 1996, students, faculty, staff and alumni has served thousands of patients in the most remote and poverty-stricken regions of Guatemala.

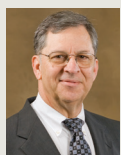
## Meet the Board of Trustees

*Members Help Establish Direction, Provide Oversight for KCUMB*

The Board of Trustees at the Kansas City University of Medicine and Biosciences is comprised of alumni, business leaders and experts in higher education. Board members also serve on subcommittees that provide business advice and investigate specific initiatives that might benefit the University.



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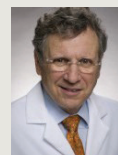
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Centerpoint/Lafayette Program,  
Midwest Physicians  
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City CARE Clinic  
Kansas City, Mo.



**Marc Hahn, D.O., ex officio**  
President and Chief Executive  
Officer, KCUMB  
Kansas City, Mo.

# SAY what?

## Everything You Want to Know About Kevin Hubbard, D.O.

**Q:** How would you explain your job to a 5-year-old?

**A:** I take care of grown-ups. Sometimes, they get grumpy because they don't feel well. I try to help them feel better, so they won't be as grumpy. Then, they'll feel like taking you out for ice cream.

**Q:** Why internal medicine?

**A:** Hey, if you get sick on the outside, I can't help you! I like things that make me think hard and think outside the box. Internal medicine lets me do that. Most importantly, I get to connect with patients in a very personal way. It's gratifying work.

**Q:** Describe yourself in five words or less.

**A:** Resourceful, loyal, dedicated, honest, ethical. I was going to use "ice cream lover," but I'd have blown three words on it.

**Q:** What couldn't you live without?

**A:** God. Really, I'd fall flat on my face.

**Q:** Why do you enjoy teaching?

**A:** I see students who come to us fresh and excited, and I get to watch them acquire a knowledge base that's almost unfathomable in depth and breadth in a very short period of time. They must learn to apply that knowledge in real-world situations with live patients, and then, they walk across the stage, receive a degree, and go out and take care of the world. This profession

has given me so much, and I have the chance to pass along what I've learned to the next generation. What a tremendous honor!

**Q:** What do people not know about you? Any deep, dark or mostly hilarious secrets?

**A:** Well, I was born by Cesarean section. It's really cool, but every time I leave home, I want to go out through a window. Also, I'm a third-generation KCUMB grad. My grandfather and father both graduated from here and taught here. We've had one of us teach every class since 1941, so I think we're on our 74th class when the Class of 2018 starts up.

**Q:** What makes you ... well, you?

**A:** In my job as an oncologist, patients are often fearful and afraid. I can make them laugh – and they laugh in the face of a terrible and deadly disease. And, just for a few moments, I've been able to make them feel better just by being in the room. I've been given a gift.

**Q:** When you leave work at the end of each day, what do you hope your students take away?

**A:** How much we all care about them, and about them being successful. I haven't slept the night before they take an exam that I wrote in over 20 years. I toss and turn, like a tuna on a trawler deck. I want them all to pass and I find myself wondering if I might have sent one of them down the wrong path when I answered a question or talked on a slide. I think they're some of the best people on the planet, and I tell them how much they all mean to me whenever I can.

*Dr. Hubbard currently serves as professor and chair of internal medicine. The American College of Osteopathic Internists honored him in 2013 with the organization's prestigious Internist of the Year Award.*





## *When Abuse Stops, Childhood Starts*

### **KCUMB Alum on a Mission to Help Children**

*By Joshua Roberts  
Photography by Mark Burnham*

**K**en McCann, D.O. (COM '04), describes his primary field of study and expertise as a disease that he wants to eliminate.

Not unlike most oncologists, probably. But Dr. McCann isn't an oncologist. He helps victims of child abuse.

"I would love to be out of a job," said Dr. McCann, 43. "We could get rid of all the child abuse in the world and I'd be happy."

As it stands, however, there's plenty of work to be done, and sadly so.

Dr. McCann stays quite busy in his work at the Regional Child Protection Center (RCPC) at Blank Children's Hospital in Des Moines, Iowa.

He was the center's clinical director from 2009-2012, before taking over as medical director in January 2013. He also serves as medical director of the Polk County Pediatric Sexual Assault Nurse Examiner program.

The RCPC sees roughly 1,100 children, encompassing about 1,500 annual visits. Some children, such as those born with drug dependencies, will be seen at least three times.

Approximately 60 percent of the children treated through the program represent one of the most vulnerable demographics – children 6 years old or younger.

The center is a collaborative effort, bringing professionals together from an assortment of disciplines to assist in the investigation, treatment and prosecution of child abuse cases in central Iowa.

It provides numerous services, including medical evaluations, psychosocial assessments, foster care placement physicals, expert court testimony and support for child victims, parents and caregivers.

The program's end goal is to "put the child's health, well-being and safety first."

Dr. McCann said he has a favorite mantra regarding the difficult content of his medical work: "When abuse stops, childhood starts."

"Certainly, there are those cases that are so traumatic and so severe they stay with you and you don't forget them," he said. "But, you just have to keep it all in perspective. I'm in a place where I can see children when they reach a turning point."

"There are kids who are extremely resilient and, given the opportunity, they will thrive, they will flourish. But, they need treatment (first)."

Dr. McCann, a Houston native, initially became interested in working with abused children before entering medical school.

He said an influential moment was meeting a pediatrician who operated a medical clinic for foster children and children who had been exposed to drugs early in their lives.

The pediatrician's mission was inspiring, Dr. McCann said, and his work left an indelible mark.

"I saw what he was doing and I was very impressed with him as a physician and a person," he said.

Dr. McCann's work in the field of abused children includes examining injuries to determine whether they're consistent with abuse, or if there's potentially another explanation; examining babies who have been exposed to illegal drugs; consulting with various professionals, including teachers, attorneys, social workers and police; and testifying in court, among other responsibilities.

"One of the clear lines I draw is that I'm not a cop," he said. "I defer to law enforcement on the whodunnit part."

One of the law enforcement officers Dr. McCann often defers to is Det. Lori Kelly, a 15-year veteran of the Des Moines Police Department.

Kelly has investigated child abuse and sexual abuse cases for 10 years. On average, she works about 250 cases per year involving children and allegations of abuse.

She's consulted with Dr. McCann enough that, "I practically have him on speed dial."

"He's very well respected in the field," Kelly said. "We're extremely lucky to have him here in Des Moines."

"Having someone like Dr. McCann, who is qualified and willing to stand by his opinion, is necessary to make a case. He just has a willingness to help."

The services Dr. McCann provides, the detective noted, are free. He's never submitted a bill to the police department.

He's also known, respected and appreciated for giving unbiased and objective scientific opinions on cases.

"That's what makes him so valuable," Kelly said. "He clears people just as much as he helps us in filing charges. He will say, 'No, this case, the story given, that's consistent with the injuries.'"

Another important, yet unheralded, aspect of Dr. McCann's collaboration with law enforcement is an ability to describe complex medical concepts in layman's terms.

"I mean, the guy's a genius," Kelly said. "But, he has this ability to describe issues in a way that makes sense. He takes the time to make sure we all understand."

Chaney Yeast is another professional who can attest to the thoroughness of Dr. McCann's work.

She has been the RCPC's manager for 12 years. Child abuse, she said, "is an extremely hard field to work in, but hope is a difference maker."

The core of the program model is working closely with community partners, Yeast said. At the center of that core is Dr. McCann, whose "knowledge base is one of our biggest assets."

*continued on page 16*



"We're very fortunate to have him," she said. "Everyone's take on Dr. McCann is that he's so approachable. (People) feel comfortable calling him or just stopping by. That's been a wonderful asset to our team."

Professionals and colleagues aren't the only ones who value the medical director's knowledge and demeanor. Appreciation for the doctor extends to his child patients and their families.

"He's like a big kid, too, really," Yeast said. "I think (children) respond to him really well. And, parents feel he cares for their kids and supports them as well."

One of the RCPC's goals is to reunite families, if possible. It's a mission Dr. McCann wholly supports.

He said it's not impossible for families to come back together if the source of abuse was addiction or mental health problems.

They can be treated, he said, and seeing parents get

healthy is "just a wonderful thing to watch."

As a physician, Dr. McCann said he tries to look at a person's actions rather than make judgment.

Take, for instance, his outlook on the parents of drug-addicted babies.

"Frankly, I firmly believe that when someone is addicted to a drug, it's a disease of the mind and not of the heart," Dr. McCann said.

Parents, just as children, can recover from instances of abuse. The key to ending the harmful cycle, in many cases, is treatment and education.

For example, Dr. McCann said one of the most common forms of abuse is a parent lashing out in response to an infant crying, particularly in situations known as "purple crying."

He said it's wise for a parent to be aware when frustration is building and to "walk away, cool off and come back."



Sexual abuse is a different topic, a more complex issue.

For insight into sexual abuse, Dr. McCann points to what he considers one of the best sources – Darkness to Light, an organization dedicated to ending child sexual abuse, and its website, [www.D2L.org](http://www.D2L.org).

The exact prevalence of sexual abuse against children, according to Darkness to Light, is unknown because many victims do not report the abuse. Most professionals in the field report rates ranging from 8-20 percent.

“Darkness to Light believes that adults should be taking proactive steps to protect children from this significant risk,” the organization states on its website. “It is unrealistic to think that a young child can take responsibility for fending off sexual advances by an adult.

“Adults are responsible for the safety of children. Adults are the ones who need to prevent, recognize and react responsibly to child sexual abuse. Yet, statistics clearly show that adults aren’t shouldering this responsibility. Darkness to Light believes that adults just don’t know how.”

Dr. McCann said his best advice to parents follows what he tries to do with his own family: Be vigilant and have an open and honest dialogue with children.

“One thing I really hope I’m doing as a parent is keeping open communication with my children,” he said. “They can always, always talk to me. They can turn to me should something happen.

“That’s the same advice I give families,” he added. “The key is to have those open lines of communication.”

Dr. McCann’s concern for the well-being of children has extended beyond his professional work. Before medical school, while living in Albuquerque, N.M., he was a foster parent for multiple children.

Though he’s been positioned personally and professionally to be near children who have been harmed by adults, it’s equally true he’s been there when they turn the corner.

“When abuse stops, childhood starts,” he said. “I get to see children thrive. That’s kind of the payoff, that’s what really helps offset cases that are disturbing.”

There have been occasions when people have asked Dr. McCann how he’s able to work in such proximity to acts of child abuse and about the personal toll it can take.

He looks at it differently. How can he not be there? While he’d prefer, in an ideal world, that physicians like him not be needed, child abuse is an unfortunate reality.

“After I’ve seen what’s out there in the real world, I don’t see how I could do anything else but help these kids,” he said.

“It’s absolutely fulfilling. They’re stuck with me for the long haul.”

**FEEDBACK:** Send comments on this article to [editor@kcumb.edu](mailto:editor@kcumb.edu).



## Startling Statistics

According to statistics provided by Darkness to Light:

- Approximately 500,000 babies born in the United States this year will be sexually abused before turning 18 years old, unless safeguards and preventive measures are in place.
- In most cases, victims know their abusers:
  - Family members commit approximately 39 percent of reported sexual assaults.
  - Acquaintances of the child or the family commit 56 percent of reported sexual assaults.
  - Only 5 percent of reported sexual abuse cases are perpetrated by strangers.

# Score 1 for Health Community Report Re

*Report Provides Valuable Glimpse at Screening Data, Barriers to Health Care for Underprivileged*

Nearly 41 percent of the approximately 12,300 children screened by Score 1 for Health during the 2011-2012 academic year were overweight or obese. That's just one of many noteworthy statistics revealed in the 2008-2012 Score 1 for Health Community Report, which was released in July.

Score 1 for Health, a program of the Kansas City University of Medicine and Biosciences, works to ensure that every child has the opportunity to reach his or her potential, without allowing health issues to stand in the way.

For more than 20 years, KCUMB's Score 1 for Health program has provided free, in-school health assessments, preventive health education and mentors for children. The program focuses its efforts on reaching children with the greatest need, such as those living in the urban core, and in underprivileged or low-income families.

Annette Campbell, director of Score 1 for Health, said the report suggests more work must be done to understand why disparities in health care persist, as well as how to respond to those disparities. Among children Score 1 for Health screened:

- African-American children are most likely to have evidence of tooth decay and untreated vision problems throughout their grade school years.
- Obesity rates are high, especially for African-American and Hispanic children.
- Incidence of untreated tooth decay is significantly higher on the Missouri side of the Kansas City metropolitan areas than on the Kansas side.

Campbell said there is no concentrated research to explain or understand why those types of variances exist in Kansas City.

While the program at its core is about helping children and their families identify and address health concerns, Score 1 for Health officials recognize the importance of proactively sharing the data collected so that researchers and other organizations can find new ways to promote healthy lifestyles for children.

"When we ask parents, 'What do you need most to act upon your child's health screening results?' they often want more information – information about accessing services, about utilizing Medicaid benefits and about



applying for benefits," Campbell said. "Parents want to learn more about high blood pressure, nutrition and exercise, for example.

"We've identified a health literacy gap," she added. "Parents are eager to learn more about how they can help themselves and their children improve their health habits. We just need to do a better job of providing parents and children with those resources, so they feel more empowered to take ownership of their health."

In addition to sharing outcomes of four years of health assessments, the report is designed to appeal to readers who are interested in learning more about how they can make a difference.

"It should speak to business owners, policy makers, health and social welfare advocates and experts – those individuals who are identifying disparities in access to care and working to overcome them," Campbell said.

# Reveals Child Health Trends



"The report provides support for initiatives aimed at overcoming gaps in health-care knowledge, improving access to health services and identifying individuals' motivations for making positive lifestyle changes."

While Score 1 for Health has received many accolades for its work, Campbell is working to extend the reach of the program in the coming years. Score 1 for Health represents one of the primary ways KCUMB is fulfilling its mission of "improving the well-being of the communities we serve."

"I am proud of what KCUMB and Score 1 for Health have built," she said. "Yet, I'm not satisfied nor comfortable. There is so much work still to be done."

"We're fortunate to be part of an institution that places great value and responsibility on sharing its resources and contributing to improving the health of the surrounding communities."

## *Notable Observations from the 2008-2012 Score 1 for Health Community Report*

- Score 1 for Health conducted more than 76,000 health assessments on approximately 30,000 school-aged children during the four-year span.
- Of all children screened, more than 1,900 were screened each year during the four-year period, providing valuable longitudinal data that can be used to improve child health.
- Overall, data revealed that children screened by Score 1 for Health are more at risk for obesity and ranking in the highest Body Mass Index category than their counterparts nationally. Breaking the cycle of childhood obesity is an important step in reducing the negative long-term consequences on individuals and our community as a whole.
- When Score 1 for Health followed the same group of children over four years who were not originally obese, the percentage of Hispanics and African-Americans becoming obese was more than twice that as compared with non-Hispanic white children.
- Score 1 for Health found that among children with persistent elevated blood pressure, there is a dramatic rise in the incidence of high blood pressure in the overweight and obese categories at older grade levels.



View the 2008-2012 Score 1 for Health Community Report at [www.kcumb.edu/Score1](http://www.kcumb.edu/Score1) or request a printed copy by contacting Score 1 for Health at 816-654-7960 or [score1@kcumb.edu](mailto:score1@kcumb.edu).



# A PERPLEXING

## *No Simple Solution for Looming Shortage of Primary Care Physicians*

*By Christopher Ryan*

**T**his is not a story about the Patient Protection and Affordable Care Act, the federal health-care legislation most commonly known as Obamacare. It is about the impending shortage of primary care physicians in the United States. It's an important distinction because it appears that Obamacare plays a relatively minor role in a much more complicated problem.

The numbers tell the story. According to a study by Stephen Petterson, Ph.D., et al., published in the *Annals of Family Medicine* in 2012, about 209,000 primary care physicians were practicing in the United States in 2010. The country will need close to 52,000 more of them by 2025. In other words, the number of primary care physicians has to grow by nearly 25 percent during the next 12 years.

Using less conservative figures, such as those Joel Feder, D.O. (COM '75) cites, the situation could be much worse. Dr. Feder, who currently serves as president of the Kansas Society of the American College of Osteopathic Family Physicians, says the nation could need more like 130,000 additional primary care providers by 2025. That means a 62 percent increase in 12 years.

For the sake of preventing outright panic, it might be better to stick with the conservative estimates. They still pose a monumental challenge.

But here's the thing: Using Dr. Petterson's figures, the 30 million or so people newly eligible for health insurance under Obamacare will create the need for only about 8,000 more primary care physicians. An aging population will require around 10,000. Demand for the biggest bump will come because there will be more people. Population growth alone will force the need for approximately 33,000 more primary care physicians. That makes the score 63 percent population growth, 19 percent aging and 15 percent people newly insured under Obamacare.

# PREDICAMENT

## A Fine Mess

With the most obvious political piñata out of the way, what is to be done about this dearth of doctors? The quick answer, unfortunately, is one no politician wants to give. “It’s complicated” doesn’t make a good sound bite. It also threatens to turn an important story into a soporific bedtime tale.

It is a complicated story that involves physician reimbursement, the Balanced Budget Act of 1997, the focus and cost of medical education, approaches to primary health-care delivery, and on and on. And time to find an adequate solution is running out.

Pulling apart the tangled threads of this knotty mess and reweaving them into a workable system will take a kind of cooperation and willingness to compromise that seems impossible in the current divisive political and social climate. However, more than a few people are willing to face the issues, think about them with cool heads and take action based on reason as well as emotion.

These strategists seem to agree on at least three approaches to solving the impending shortage of family physicians, internists and other primary care providers:

- First, the cap on primary care residencies set in the Balanced Budget Act of 1997 must be modified to allow more medical school graduates to enter the programs.
- Second, primary care must be made more financially attractive, for both medical students and practicing physicians.
- Third, the structure and focus of the primary care practice must change to accommodate a shift away from disease management and toward prevention.

One, two, three – problem solved. Sound simple? It isn’t.

## Just Pop the Cap?

What a difference a couple of decades make. Back in the mid-1990s, policymakers in Washington, D.C., worried about a growing glut of physicians. They also fretted about an out-of-balance federal budget. The two lines of concern crossed in the Balanced Budget Act of 1997.

In that act, lawmakers put a cap on the number of residency slots available at hospitals across the nation. Two birds, one stone. No more worries about too many

physicians. One more step toward a balanced budget because the Medicare program helps fund graduate medical education. Instantly, spending on residency programs came under control.

Ten years later, however, the picture changed. The American Association of Colleges of Osteopathic Medicine, the Association of American Medical Colleges and other physician associations warned about a growing physician shortage. They called for increases in medical school enrollments and for raising the resident cap.

The number of medical students went up. The cap stayed the same. Hospitals were locked into the number of residency slots they had as of January 1, 1997. Hospitals built after the cap snapped shut could not start residency programs. And so it goes today.

Dr. Feder graduated with a medical school class of 125 in 1975. During KCUMB’s 2013 White Coating Ceremony, the University welcomed approximately 270 incoming first-year osteopathic medical students. Soon, he worries that there will be no place for many of these students to go once they graduate. They could be forced to wait a year or two for a residency slot to open up.

The delay means they will be that much further behind when it comes to honing their medical skills and paying off debt. Financial concerns are already a major issue for medical school graduates. A year’s delay in training

*continued on page 22*

“You expect, when you put in all this time on the front end, that on the back end you’re going to enjoy your life a little bit more. And if you can’t, then what’s the point? There are some real quality of life issues that enter into that equation.”

*Joel Feder, D.O. (COM ’75)*



could push more of them away from primary care and into more lucrative specialties.

Attempts have been made to pop the cap, but so far they have failed. John Dougherty, D.O. (COM '92), senior associate dean for clinical affairs, professor of family and community medicine at KCUMB, cites lawmakers' belief that government should not be in the business of financing professional education.

What these policymakers fail to understand, Dr. Dougherty said, is that, although many other professionals – lawyers, for example – are eligible to practice almost as soon as they graduate, physicians are not. They have to go through much more training before they can see patients on their own, thus delaying their opportunities to begin earning a living and paying off debt.

### Just Put a Damp on Debt?

Debt too often dissuades medical students from choosing a career in primary care.

Add the sorry story of inadequate and shrinking reimbursement rates for practicing physicians to the money owed for educational loans and the plot thickens.

Many physicians leave medical school with \$300,000 to \$500,000 in debt, Dr. Feder said. These students compare primary care with other specialties, and primary care just isn't as attractive. Economics drives medical students away from primary care.

For those who do choose primary care for a career, they find themselves doing more work for less money, to

*While the number of medical school graduates continues to rise, the cap on residency slots created by the Balanced Budget Act of 1997 means those graduates have a more difficult time finding training opportunities.*

a large extent because of current reimbursement practices. Compared to other kinds of medical practice, primary care simply does not pay well.

Slipping for a moment into oversimplification, it could be said that primary care physicians think; many other specialists do. But, under present reimbursement rules, procedures – doing things – get the money.

As Dr. Feder sees it, “Cognitive skills” – interacting with and treating primary care patients – get the shaft.

Dr. Dougherty believes the federal government needs to stop cutting reimbursement levels. Every year, it takes passage of an emergency bill just to keep reimbursements at their already inadequate levels.

Dr. Feder would add that Medicare has to revise the reimbursement rules to provide higher payments. Otherwise, primary care physicians will stop seeing Medicare patients, and safety net facilities will be overwhelmed.

As for the student loan debt challenge, Dr. Feder said, “The federal government and state governments need to get more active in this because it costs a lot of money to educate these kids.”

Governments need to provide incentives to lure students into primary care, and an important enticement is help with the cost of going through medical school.

“You expect, when you put in all this time on the front end, that on the back end you’re going to enjoy your life a little bit more,” Dr. Feder said. “And if you can’t, then what’s the point? There are some real quality of life issues that enter into that equation.”

## The Phoenix Rises

Kevin Hubbard, D.O. (COM ’86), professor and chair of internal medicine at KCUMB, coauthored one of a number of papers outlining Phoenix Physicians, a program operating through the American College of Osteopathic Internists. It’s designed to help turn out physicians who see themselves as team leaders and act accordingly.

In the near future, Dr. Hubbard said, “There will actually be a need for physicians either to retrain themselves or train to develop additional skills to be a team leader as part of a patient-centered medical home, and that’s not something physicians historically have really gotten in their training.”

Basically, Dr. Hubbard believes, the health-care system needs more well-trained support staff with more physicians who know how to manage them. And that’s where nurse practitioners and primary care physicians have to get together.

A well-managed team of well-trained professionals who know their roles and know how to fulfill them can take a great deal of the care delivery and cost pressures off the health-care system. But it will happen only if primary care shifts from a focus on disease management to concentrate on prevention. Healthier people need less care and cost less to care for.

Of course, the success of this refocusing depends on a significant change in reimbursement practices that establishes fair payment for preventive care. Although the team approach might somewhat reduce the numbers of new primary care physicians needed, thousands more must be added, so more physicians have to be trained, and the resident cap still has to change. It’s complicated.

In the meantime, Dr. Hubbard said, to make the Phoenix fly, nurse practitioners and primary care physicians have to find a way to stop competing for patients and find their appropriate roles within a professional team. The goal is not to replace physicians but to extend their reach through collaboration with nurse practitioners and other professionals.

Efforts like Phoenix Physicians and the U.S. Health Resources and Services Administration’s Teaching Health Center GME Program, which supports primary care medical residents in underserved communities without funding from the Centers for Medicare & Medicaid Services, could provide critical innovations. Programs such as the HRSA’s could increase primary care residency opportunities even as programs like Phoenix Physicians help train medical students for a more team-oriented approach to primary care and reduce the pressure to find spots for more residents.

Even if these creative approaches prove effective, is it possible to make all the necessary changes and have enough primary care physicians to meet the vastly expanding demand? The jury is still out.

**FEEDBACK:** Send comments on this article to [editor@kcumb.edu](mailto:editor@kcumb.edu).



*Dr. Hubbard believes physicians must be willing to collaborate more with nurse practitioners and others to address the physician workforce shortage.*



## After Four Decades at KCUMB, Rushing Prepares for a New Chapter

**I**t's a simple concept, really: If you are proud of where you work, you will do a better job.

"If you have a chance to educate people who are going to go out into the world and make the world a better place, you can take satisfaction from that," said Douglas Rushing, Ph.D., who after nearly 42 years has worked at KCUMB longer than almost everyone else. Dr. Rushing stepped down as dean of the College of Biosciences on June 30.

"This is a much better place to work today than when I came here," he said. "There is a greater sense of pride in the institution now than when I started in 1972 – and not just because the buildings look better. It's the people inside the buildings that ultimately make the difference."

Despite relinquishing his position as dean, Dr. Rushing remains a full-time professor of biochemistry through the end of 2014. At that time, he will transition to a part-time faculty member, with his primary responsibility being his work overseeing the University's recently formed strategic leadership teams.

"There comes a point in everyone's life," he said, noting that he plans to find more time for the things he loves outside of teaching – reading, theater, film, music and his family. "I've done this for 10 years now (as dean). Age is speaking to me."

Marc B. Hahn, president and chief executive officer, said Dr. Rushing's work over the past four decades at KCUMB has left an indelible mark on the institution.

"It is truly remarkable to realize the expansive impact one individual has had on so many aspects of our University," said Marc B. Hahn, D.O., president and chief executive officer. "We are thankful to have had Dr. Rushing as professor, chair and dean, and wish him well in this next phase of his life."

Dr. Rushing's journey to KCUMB began after earning a bachelor's degree in chemistry from Knox College in 1962, completing a doctorate in biochemistry at the University of Missouri in 1967 and post-doctoral training in biochemical genetics through the University of North Carolina-Chapel Hill. He was in his third year of teaching at Concord College, a small state college in Athens, W.Va., when he saw an employment ad that led him to KCUMB.

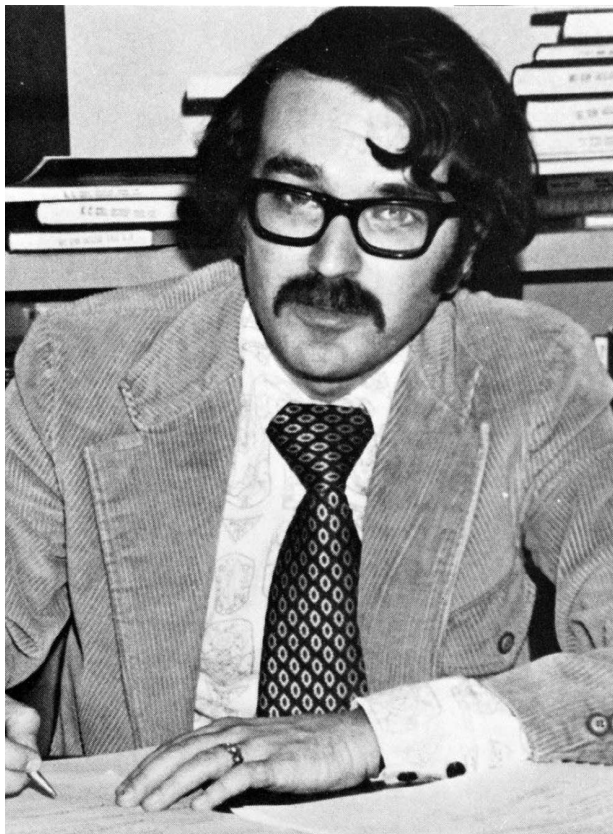
"I was not aware that there was an osteopathic medical school in Kansas City until I saw the ad in Science," he explained. "I hadn't really thought about teaching in a medical school, but I applied and got the job here."

Teaching was difficult in the beginning, he said.

"Teaching at this level is different from teaching at an undergraduate level," Dr. Rushing said. "I lost track

"No matter the circumstances, the faculty have always done the best they could to assure a quality education for our students. I'm most proud to have been a part of that."

*Douglas Rushing, Ph.D.*



of how many times I said, 'I don't know,' in response to students' questions my first year here. They were asking clinically-related questions. After about three years, I learned what I needed to know to be able to answer most of the questions."

Dr. Rushing was named dean of the College of Biosciences in July 2004 and the first class of students began in August 2005. This year, both the master of science in biomedical sciences program and the master of arts in bioethics program have seen record numbers of applicants. He is thrilled with the success graduates of the two programs have had in medical school and other pursuits.

"They didn't just succeed, but they were outstanding," he said. "That made me feel like we were doing something right. And it's still getting better."

He is proud not only of the efforts put forth by fellow faculty members and students, but also of all KCUMB has achieved over the past several decades.

"No matter the circumstances, the faculty have always done the best they could to assure a quality education for our students," Dr. Rushing said. "I'm most proud to have been a part of that."

**FEEDBACK:** Send comments on this article to [editor@kcumb.edu](mailto:editor@kcumb.edu).

*Dr. Rushing appears in a yearbook photo from 1975.*

# Tackling Obesity

By Christopher Ryan  
Photography by Bob Greenspan



# One Physician is up to the Challenge of Helping Patients Melt Away the Pounds

**I**n June 2013, the American Medical Association added another disease to its official roster of human afflictions, and Laura Voss, D.O. (COM '97), couldn't have been happier. As far as she's concerned, it's about time obesity received the recognition it so richly deserves.

It's easy to see the reasons for Dr. Voss's concern. The Centers for Disease Control and Prevention has concluded that "obesity is common, serious and costly." For example, according to the CDC, about 36 percent of U.S. adults and 15 percent of U.S. children are obese.

Conditions related to obesity include some of the leading causes of preventable death, such as type 2 diabetes, certain cancers, heart disease and stroke. Then, there are the costs associated with obesity: \$190 billion a year, according to a report in the *Journal of Health Economics* in 2012.

Obesity meets the criteria for a disease, Dr. Voss said, because the condition is highly complex, and genetic, metabolic and environmental factors play a part in its development and progression. She's not alone in her support. The AMA's decision has earned the applause of the obesity research and treatment communities.

However, the kudos are hardly universal. In an opinion piece in *Forbes* magazine the week the AMA's decision came down, Hank Cardello, a senior fellow at the Hudson Institute, wrote:

*"The American Medical Association's announcement ... is terrible news for food companies, public health advocates, and, most of all, the very people it tries to help, obese Americans ... In short, calling obesity a disease gives a hall pass to many who either don't care or who struggle with their food and lifestyle choices. It could cause even more of them to backslide into obesity."*

## Fat Doesn't Mean Lazy and Dumb

To Dr. Voss, who has struggled with her weight most of her life and has dropped from about 250 pounds to around 160 pounds over the past 10 years, Cardello is really saying that overweight and obese people are just too lazy to exercise and too stupid to eat right. She believes

Cardello is not only greatly oversimplifying the problem, but that he's also just wrong.

"Telling an overweight person to eat less and exercise more is (like) telling a person with chronic migraines they have headaches," said Dr. Voss, who practices family medicine at the Pleasant Hill Medical Clinic in Pleasant Hill, Mo. "We know that. That falls into the category of 'duh.'"

"But the issue is why do we eat the way we eat? How do we get through those stressful times? How do we get through cravings? What are they? Where do they come from?"

She hopes to help patients answer these questions for themselves through a weight-loss program she is helping build in cooperation with bariatric surgeons at Cass Regional Medical Center in Harrisonville, Mo.

Two of Dr. Voss's patients serve, at least anecdotally, to support her position and highlight the errors of a simplistic – dare one say, moralistic – approach to obesity. Elizabeth Romine, 40, works for the American Academy of Family Physicians. Andy Yohnka, 51, is a corporate quality assurance advisor. Each of them has fought weight issues since graduating from high school. Andy has diabetes, just one of many possible consequences of obesity. Elizabeth is pre-diabetic.

Elizabeth's and Andy's stories, although different, have much in common with each other and with those of many overweight and obese people. They illustrate the complexities of the condition, the effects of genetic and metabolic factors, and the role of environment.

*continued on page 28*

"I'm not just doing this for myself. I'm doing it for (Dr. Voss) because I want to show her what I can do."

*Andy Yohnka, one of Dr. Voss's patients*



*Elizabeth Romine, left, has lost nearly 100 pounds since she started working with Dr. Voss to address her weight. With the help of Dr. Voss, an exercise physiologist and a nutritionist, she hopes to lose another 100 pounds.*

### “I’m Never Going to be that Skinny Person”

A brief conversation with her 10-year-old daughter some months ago still causes a catch in Elizabeth’s voice. She asked her child, “Does it embarrass you that Mommy is overweight?” Her daughter responded, without any hint of meanness, “Only when you’re the biggest person in the room.”

Then, on April Fool’s Day 2013, she found herself badly short of breath just walking from her bed to her bathroom. She immediately signed up for circuit training at a Curves weight loss center. Later that month, at her mother’s strong urging, she attended a seminar about weight-loss options. The seminar leader was Dr. Voss.

Elizabeth brought some extra baggage to that meeting. She had always seen herself as fat, even when she was a normal-weight child. She realizes now that her weight problem did not begin until she started college, but she thought she looked like a “cow” long before that. She said she started to find comfort in food after suffering severe emotional trauma in her early teens.

As she listened to Dr. Voss, something clicked. Her response had more to do with Dr. Voss as a person than what she was saying about weight loss.

“Dr. Voss is very engaging because she’s been there,” Elizabeth said. “She’s lost nearly 100 pounds. So having someone who’s kind of climbed that mountain and overcame it was really meaningful to me.”

She made an appointment, and she has never looked back. At the weight-loss center, Elizabeth meets weekly with Dr. Voss, an exercise physiologist and a nutritionist.

“It’s just a way to keep you accountable, kind of, but without guilt,” she said. “If I have a bad week, I can go in and say, ‘I didn’t do so great.’ We find out what I did wrong and what to do about it. There’s no shaming. I don’t feel like I’m being judged for being overweight.”

Elizabeth is considering bariatric surgery, but she is not married to the idea. Her program includes a minimum of six months of weekly meetings with her team and getting counseling. Then, if she is eligible for surgery and wants it, she can look at her options.

In the meantime, Dr. Voss has determined that Elizabeth has metabolic syndrome. When she eats carbohydrates, they turn into fat. Now she avoids them, but she still has a lot of flexibility in her diet. The wiggle room is important, Dr. Voss told her, because skinless chicken and raw carrots is not the way she’s going to eat for the rest of her life. She needs a diet she can truly live with.

Elizabeth hopes to lose 200 pounds in about 24 months. “I’m hoping in two years I’ll be down to a size I want to be, and it’s not an unrealistic size,” she said. “It’s not a model size. It’s just something I think will be healthy, that will make me happy, that won’t make me emaciated. I’m never going to get down to be thin because my body’s not made to be thin.”

### “I Have a Little More Pep in my Step”

After work, Andy spends three hours at the gym, working out. He runs about four miles on Mondays, Wednesdays and Fridays. On Saturday, he runs five or six miles. He plans to run a half marathon later this year.

Andy weighs 340 pounds, down from 400 pounds since March 2013. He gives Dr. Voss full credit for helping him find his way back from a downward spiral that began with a bad hip and got worse as the amount of injectable insulin he was taking approached 80 units, twice a day. He gained weight and felt sluggish.

Hip replacement surgery allowed him to take up walking, something he has happy to do because he wanted to drop the weight. He could not get rid of it. His doctor told him just to keep on taking his insulin.

Then one day Andy’s girlfriend spotted an article in the newspaper about Dr. Voss, who specialized in weight loss. The office was close to Andy’s home, so he went in.

Like Elizabeth, Andy responded as much to Dr. Voss’s demeanor as her medical expertise. Admittedly, the bar had not been set terribly high. His previous physician had not only told him nothing about the medication he was on but also, during office visits, sat with his back to his patient, typing on a computer.

"I didn't feel comfortable with him," Andy said.

Dr. Voss was different. She talked to him about everything, face to face, Andy said. She got to know him. Soon, the relationship with his doctor became Andy's motivation.

"I'm not just doing this for myself," he said of his weight-loss effort. "I'm doing it for her because I want to show her what I can do."

One of the first things Dr. Voss did was change Andy's insulin. One of the side effects of the medication he had been taking was weight gain. She also advised Andy to watch his sugars. Now, he avoids bread after noon because it turns into sugar and eats fish every day. He might splurge with a bun-less burger on the weekend. Instead of 80 units of insulin twice a day, he now injects 10 units once a day.

Andy's weight goal is 300 pounds, but he said he feels good now, and Dr. Voss doesn't tell him what weight he should be. She says it's up to him and to go with how he feels. He used to feel sluggish, but now, even after his workout, he's ready to work in the yard when he gets home.

"I have lots more energy," he said. "It's just unbelievable."

### "We Need to be Fearless"

In her own life, Dr. Voss has faced ignorance and bias in her efforts to maintain a healthy weight. Too often, she believes, physicians know too little about the causes of obesity and treat obese patients by telling them to eat less and exercise more.

In her practice, she has patients who are organic

vegetarians and still struggle with their weight. She also has people who suck down a 12-pack of Mountain Dew every day.

"I have very different sets of advice for these people," she said.

Every obese person is different, Dr. Voss said. It's necessary to look at a variety of factors that might be contributing to the condition. As a recognized disease, obesity becomes more than a side issue. It becomes the issue, something that calls for an effort to discover the root cause or causes and that needs a comprehensive treatment plan.

Because obesity is a complex problem with so many associated conditions and such high costs, physicians need to talk to their patients about it in depth, Dr. Voss believes. Patients tell her that their doctors have no problem telling them they're fat, but they offer no support, advice, follow-up, medication or referrals.

"They basically just kick them to the street and say, 'Handle it,'" she said.

The disease of obesity calls for courageous physicians, Dr. Voss said. Physicians must admit their lack of knowledge about obesity and nutrition and do something about it. They need to make an effort to model healthy behavior for their patients. They don't have to be skinny marathon runners; they can be working toward being healthier. The important thing is to be open and honest with their patients.

**FEEDBACK:** Send comments on this article to [editor@kcumb.edu](mailto:editor@kcumb.edu).





*From Sports to Science*

# **KCUMB Student Transforms Athletic Interest into Award- Winning Research**

*By Joshua Roberts*

*Photography by Cortney Christensen*

Sports have always been a big part of Eric Czer's life. He excelled in basketball, football and track, all sports where his 6-foot-8-inch height proved advantageous.

But, it wasn't an athletic scholarship the San Diego native went looking for after high school, though those opportunities existed.

Rather, with a medical history that included more than 20 broken bones, four major orthopedic surgeries and numerous interactions with trainers and physical therapists, Czer said he wanted his future to be centered on sports science.

"I felt like I'd be able to relate to patients really well," said Czer, a second-year osteopathic medical student, who is now just as passionate about sports medicine and orthopedic surgery as he once was about his exploits on the playing field. "As a future osteopathic physician, a major goal of mine is to help patients and their bodies to heal."

Through KCUMB's 2013 Summer Student Research Fellowship Program, Czer was able to complete an original research project and publish an abstract, "The Unexpected Anatomical Variations of the Anterior Talofibular Ligament."

His work was recognized as the recipient of the Betty Jo White, D.O., FACOS, Prize for Research during KCUMB's annual Research Symposium. He also earned an overall second-place finish for his poster presentation.

Czer said his research sought "to expand upon existing knowledge of anatomical variations of the ATFL, while evaluating statistics on toughness and stiffness among the band types in order to determine injury predisposition."

More simply, he said, "by knowing that you, in particular, based on radiologic findings, are more likely to experience an ankle sprain – and, therefore, an array of subsequent issues – that allows for more effective preventive medicine."

His research included removing and examining ligaments from cadavers, a prospect he first found uncomfortable, but for which he later became accustomed.

Czer credits KCUMB's Summer Student Research Fellowship Program and the guidance he received from Barth Wright, Ph.D., associate professor of anatomy, for the success of his work.

"He helped me turn this idea into an actual project," Czer said of Wright, who provided necessary guidance, equipment and resources.

The ATFL is among the most commonly torn ligaments, Czer said, and represents one of the most frequent orthopedic injuries.

Each day in the United States, roughly 25,000 people sprain their ankle, and 1 million people visit emergency rooms annually due to ankle injuries.

Czer's research reached several conclusions, such as finding band variations in similar proportions to previous studies, and determining there are no statistically significant differences among the strengths of band forms. He also determined that men and women have comparable ligament mechanics, and ligament bands were comparably "stiff and tough."

"Coupling our findings with historical analysis of ATFL tissues may better identify injury predisposition," he wrote in his research abstract.

However, his research also found a discrepancy between the relationship of the ligament to the joint capsule, he said. Various photos accompanying his research show the ligament at times flush with the capsule, and the ligament on top of the capsule and vice versa.

"Not only was this unexpected, to say the least, but as far as we know, this hadn't yet been detailed in prior literature," Czer wrote. "(It) may even support further research into the effects of these forms on ankle stability."

Czer's research also found a discrepancy between ligamentous and non-supporting tissues, and other variations.

"Our most significant findings may have been anatomical," he said. "What we found most significant was not even in our minds (at the start of the project)."

Czer came to KCUMB from the University of San Diego, where he earned a bachelor's degree in biochemistry.

While at USD, he was invited to compete on the school's rowing team. His participation ended when he suffered a "nasty" knee injury during practice, tearing his Meniscus and ACL. The injury helped him reset his priorities.

"It was a reminder: 'You came here with a goal, and you should stick with it,'" he said. "Not long after that, I noticed a huge difference in my studies."

He researched numerous medical schools after graduating from USD, and KCUMB stood out, particularly during his interview.

"It all just kind of came together here, and I felt KCUMB was the best option for my education," he said.

Czer said the findings from his ATFL project "beg" for additional research, and he might write a proposal this summer for more study.

"I think the scope of the research now has to be a lot more broad," he said. "But, I think it's still a very worthy idea to look into."

**FEEDBACK:** Send comments on this article to [editor@kcumb.edu](mailto:editor@kcumb.edu).

# 'Wartime' at Fort Hood

**A KCUMB Alum Shares his Unique Perspective  
on the Most Deadly Shooting  
at a U.S. Military Base in History**

*By Joshua Roberts*

*Photography by Destry Jaimes*



**T**hirteen people killed, 32 more wounded. It happened Nov. 5, 2009, at Fort Hood, Texas.

What has since become known as the worst shooting at a military base in U.S. history began in the early afternoon at the base's Soldier Processing Center.

The gunman, Nidal Malik Hasan, a U.S. Army major and psychiatrist, was convicted in August 2013 and sentenced to death for his actions.

Joe Jeanette, D.O. (COM '02), an Omaha, Neb., native, was assigned to Fort Hood's Carl R. Darnall Army Medical Center just a few months before the base erupted in gunfire.

He was part of the surgical team that immediately began treating the wounded that day. Darnall Army Medical Center admitted 19 patients, all victims of Hasan's rampage.

"We all seemed filled with a vast array of emotions – anger toward whoever did this, confusion as to what really happened, and concern for all of the victims and their families," Dr. Jeanette recalled.

Once the patients were stabilized, the surgical team went home for a few hours of rest.

For Dr. Jeanette, the reprieve from the day's traumatic events would be brief. The following day, he relived it all again by documenting his account of events that occurred as part of the hospital's response.

"It was kind of a historical thing, unfortunately, so I started to write it down," he said.

The thoughts and feelings gushing from his head eventually morphed into "Mass Casualty Incident at Fort Hood: A Surgeon's Perspective." The account spans nine pages and more than 5,000 words.

The hospital commander requested that surgeons not publicly describe events of the day until FBI and Army Criminal Investigation Command probes had concluded.

Once Dr. Jeanette had permission, he emailed his account of events that day to various colleagues. One of them was John Ryan, M.D., a longtime surgeon at Virginia Mason Medical Center in Seattle, where Dr. Jeanette had completed his residency. Dr. Jeanette describes Dr. Ryan as one of his mentors.



## American Hero

Hero.

That's the word Dr. Ryan uses most frequently when reacting to Dr. Jeanette's actions on Nov. 5, 2009.

"You can see his heroism, his concern for his patients and his humanity," said Dr. Ryan, 70, now retired. "All of it came through in that letter.

"It was just a tremendous response. There's nothing that can prepare you for something like that. I thought Joe acted heroically."

Dr. Jeanette did his general surgery residency under Dr. Ryan from 2003-2009 at Virginia Mason. Dr. Ryan watched Dr. Jeanette evolve as a person and as a physician throughout those residency years.

"He was a man who had a lot of strength," Dr. Ryan said. "He had a very strong will about him, he worked extremely hard and became a very good communicator."

Dr. Jeanette, Dr. Ryan recalled, returned to Virginia Mason not long ago to give a seminar on his experiences treating the Fort Hood victims, and elaborating on his two deployments to Afghanistan.

"You could hear a pin drop," Dr. Ryan said. "The audience was stunned. Everyone was spellbound by his presentation."

It's apparent there's a mutual affection between Dr. Jeanette and Virginia Mason.

Dr. Ryan said Dr. Jeanette arranged to have an American flag flown on a helicopter during one of his Afghanistan deployments.

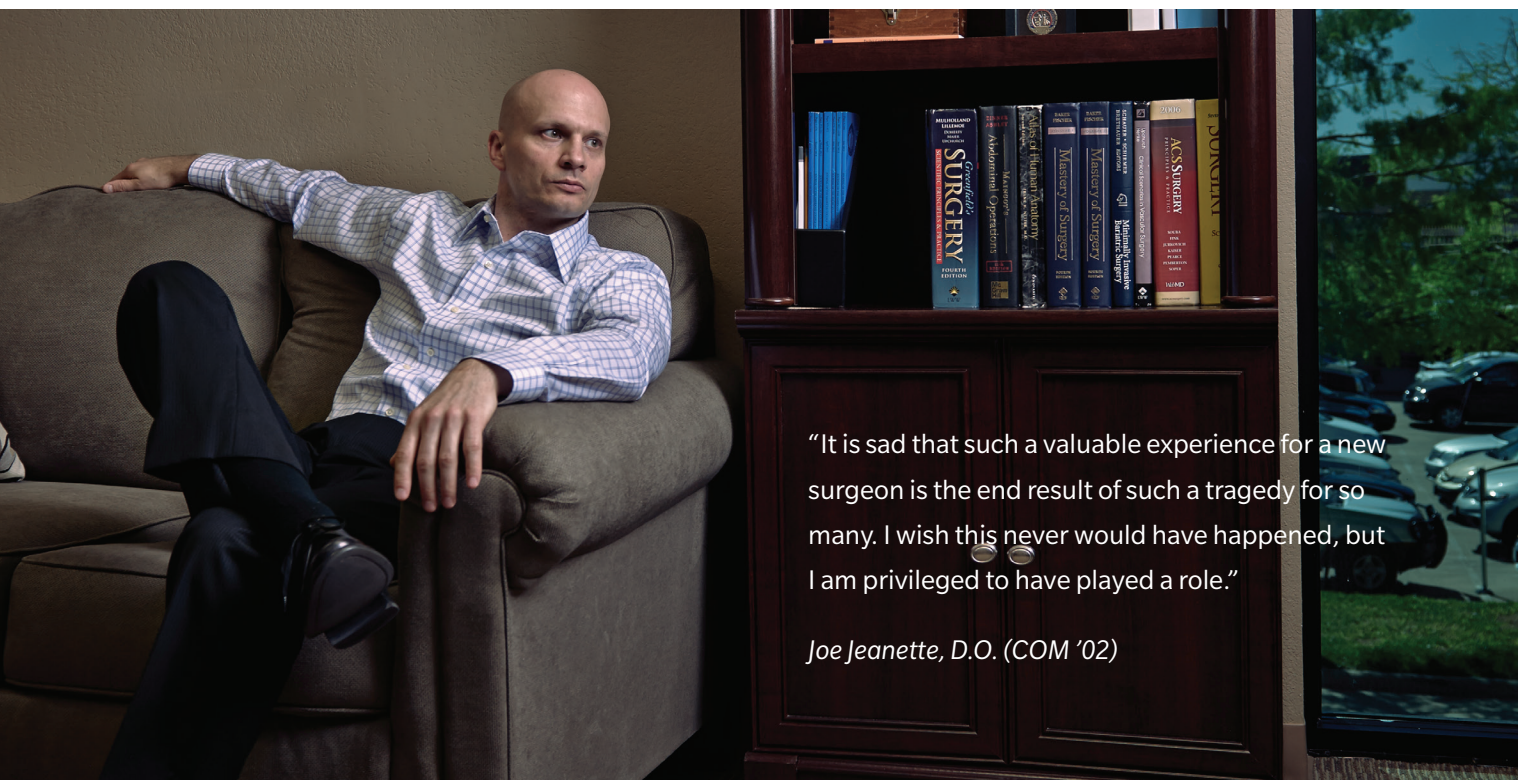
The flag that flew overseas was sent to the hospital and is currently displayed in the lobby of the general surgery section.

"I'm very proud of him," Dr. Ryan said. "I'm proud of the progress he's made and extremely proud of what he's done the last three or four years."

### Editor's Note

*This article is about the Nov. 5, 2009, shooting at Fort Hood, Texas. After this article was written, but before it could be published, a second mass shooting occurred at the same military base on April 2, 2014. Four people, including the gunman, were killed, and 16 more were injured.*

*continued on page 34*



"It is sad that such a valuable experience for a new surgeon is the end result of such a tragedy for so many. I wish this never would have happened, but I am privileged to have played a role."

*Joe Jeanette, D.O. (COM '02)*

Granted, a primary source of that pride stems from Dr. Jeanette's actions in response to the shooting.

Dr. Ryan said his work that day was beyond impressive.

"He did everything possible," the mentor said. "He pulled everything together.

"This young surgeon ... had to face one of the most alarming incidents, casualties (and victims) arriving all at once, and he handled it beautifully."

The one drawback Dr. Ryan sees to Dr. Jeanette's efforts? The Army's oversight in recognizing his work.

"Somehow, he should be made a hero, that's what I have to say," he said. "He was the person in the ER that day, and what he did was unbelievable."

### **Victims' Appreciation Means More Than a Medal**

Dr. Jeanette was, in fact, formally recognized by the military – he received the Army Achievement Medal for "meritorious achievement and exceptional performance" in response to the mass casualty incident – though it came nine months following the shooting and without ceremony.

The surgeon isn't upset about what some might consider an oversight.

He said he received a more rewarding recognition following Hasan's trial.

"Two of the survivors that I treated that day called me after they had testified at trial," he said. "They called me via the prosecuting attorney and thanked me for treating

them that day and were grateful that they had survived.

"I had seen them in clinic following their discharges from the hospital, but had not spoken with either of them since January 2010. It was very emotional. I wasn't expecting their phone calls. I was so glad to hear from them."

Dr. Jeanette, too, was slated to testify at Hasan's trial, but that testimony was eventually canceled.

Nonetheless, he followed the legal proceedings in the news. Hasan, who represented himself at trial, was sentenced to death.

When asked his response to the verdict, Dr. Jeanette is diplomatic, professional and compartmentalized.

"It was just one of those things," he said. "I definitely followed it closely. I was fine with (the sentence). You never wish death on anyone, but he caused so much pain for so many families.

"It makes you shake your head. It's like, 'Why?'"

Christine Anderson, Dr. Jeanette's wife of six years, said she was relieved her husband didn't have to testify, though she thinks he wanted to take the stand and confront Hasan with the horrors and tragic realities of his actions.

Asked whether she was worried about her husband having to testify, Anderson said, "I was. I had mixed emotions about him testifying. I think, also, he was getting a little worked up about it.

"But, at the same time, I think he wanted to say his peace," added Anderson, an anesthesiologist and intervention pain management specialist at Austin Pain Associates.

## A Spouse's Stressful Days

Anderson lived through her own trauma, of sorts, during that deadly day almost four years ago.

After learning of the shooting, there was a six-hour communication blackout between her and her husband.

"I was freaking out," she said. "I didn't know where he was. I just kept calling and calling."

One of the first things she learned was the shooting occurred at the Processing Center, a facility Dr. Jeanette had been visiting in preparation for his first overseas deployment.

Dr. Jeanette, busy treating a surge of patients at the hospital, sneaked away to call Anderson early that evening. The call was "fast, really brief," Anderson said, but she was relieved to learn he was safe and working hard to save lives.

"I was – and still am – overwhelmingly proud of him, that in a traumatic situation, he can think quickly and react and keep his cool," she said.

Dr. Jeanette made it home early the next morning. Anderson said she could tell the day previous had taken a physical and emotional toll.

"He was just ... he looked awful, worn down and exhausted," she said. "He didn't really talk about it for a few days."

Over time, however, he began discussing the hospital's response. At first, Anderson said, his words, explanations and descriptions were scientific, but after a while "he brought emotion into it.

"More came out as he got closer to trial," she said, adding that her husband didn't necessarily wish Hasan ill.

"He was basically just thinking ... 'I think this guy is going to get what he deserves,'" she said.

Anderson's worry for her husband's safety didn't start and stop with the day of the shooting.

About three months later, he was deployed as the staff general surgeon with the 541st Forward Surgical Team to Qalat, Khilagay, and Pol-e-Khomri, Afghanistan.

He was sent back to Afghanistan in 2011-2012 for another six months as the chief medical officer for the 772nd Forward Surgical Team and the director of a surgery mentorship program at Jalalabad Public Hospital.

Communication, Anderson said, was often brief and sporadic. Her husband, she learned later, usually downplayed the dangers of being in a hostile country.

"I was always just a constant ball of stress for six months at a time," Anderson said.

He came home safely after both deployments.

"I'm always impressed and incredibly proud of him," Anderson said.

## Time, Reflection and Perspective

Fort Hood is the largest active duty, armored post in the U.S. military, covering 340 square miles in central Texas, between Killeen and Copperas Cove, about 60 miles north of Austin.

Darnall Army Medical Center is a Level III trauma center, with approximately 140 beds serving 52,000 soldiers, 60,000 family members and 50,000 retirees associated with the base.

Being busy was the norm for Dr. Jeanette. He managed a "fair amount" of serious trauma at the hospital, mostly from vehicle and motorcycle crashes, and incidents at the local knife and gun club.

Nothing like Nov. 5, 2009, the day of the shooting. Not even close.

His day began about 1:15 p.m., when the chief of staff hurriedly relayed the news: "We have a mass casualty incident shooting."

"There were no other surgeons available at the time," Dr. Jeanette wrote. His jog to the ER turned into a sprint. He passed soldiers in bloodied uniforms and the injured were all over the place.

"All that we knew was there was a mass shooting," according to his narrative.

"There were some confusing reports ... that there may be multiple shooters at different locations throughout the base. There was such hysteria and conflicting reports. I do not think we knew the number of locations and shooters there truly were until several hours into treating the victims in the ER."

*continued on page 36*



*Dr. Jeanette poses for a picture after returning from a visit to a local hospital in Pol-e-Khomri, Afghanistan, during his first deployment with the 541st Forward Surgical Team.*

“Somehow, he should be made a hero, that’s what I have to say. He was the person in the ER that day, and what he did was unbelievable.”

*John Ryan, M.D.*

The first victim he treated was a young soldier with a gunshot wound to the back of the head.

The next was a young soldier with a gunshot wound to the neck.

And so it went, triaging, treating and operating for the next 14 hours.

“This was a true mass casualty, wartime situation, where we were inundated with gunshot wounds and most of our assessments/decisions had to be made based on vital signs, physical exam and maybe a chest X-ray,” he wrote. “Luckily, we were in the United States and not directly under fire.”

Two patients died at the hospital, and one of them was Dr. Jeanette’s. The surgeon took the loss hard.

“I know that, given the severity of his injuries, even at the best Level I trauma center, with the most experienced trauma surgeons, the patient would probably still not have survived,” he said. “But, it still tears me up inside.”

Though many of the day’s circumstances were chaotic, disjointed and tragic, Dr. Jeanette said time and reflection have allowed him to appreciate the hospital’s response.

The injury patterns that physicians and medical personnel faced that day were more unique, he said, than mass casualty incidents in Iraq or Afghanistan. In those countries, mass casualties are typically three to five soldiers, civilians or enemies at a time reporting with shrapnel and blast injuries, rather than gunshot wounds.

“We had (more than) 20 patients with gunshot wounds arrive to the ER at about the same time,” he said.

“This was a Level III trauma center with one CT scan, no interventional radiology, limited vascular surgical tools/supplies and a limited supply of blood products,” he wrote.

*Dr. Jeanette, fifth from the right, and other members of the Fort Hood medical team received a special visit from President Barack Obama and first lady Michelle Obama in the days following the shooting.*

“The way the whole staff came together from all sections of the hospital and outlying clinics to respond to this horrific event was truly a sight to behold.

“The performance was outstanding – everyone was sort of ‘in the zone.’”

Time has also provided Dr. Jeanette with perspective.

“It was truly an exhausting and exhilarating experience,” he wrote. “I feel guilty for saying that, as it is sad that such a valuable experience for a new surgeon is the end result of such a tragedy for so many. I wish this never would have happened, but I am privileged to have played a role.”

As for Hasan, Dr. Jeanette had his own experience with him weeks before the shooting. Dr. Jeanette had a run-in with the psychiatrist about 10 days earlier, when he recommended a patient for a psychiatric evaluation.

Hasan berated the patient and criticized Dr. Jeanette for suggesting the consult.

“I couldn’t believe he wrote this note in the chart,” he said. “It was so unprofessional and something you don’t do.

“That really struck me, and angered me even more,” Dr. Jeanette added. “He was never a good physician.”

Dr. Jeanette left the military in March. He’s now the general/bariatric surgeon at Metroplex Clinic Physicians, Metroplex Adventist Hospital in Killeen.

The day of the shooting will always be etched in the young surgeon’s memory – for the experience, for the tragedy and for the seeming pointlessness of it all.

“You think about it every day,” he said. “Little things remind you of it.”

Dr. Jeanette’s hope is that Hasan’s victims and their families got at least some small measure of justice and sense of closure with the shooter’s death sentence.

He said he’s satisfied Hasan will never again be in a position to hurt someone.

“He’s kind of in his own hell,” Dr. Jeanette said.

**FEEDBACK:** Send comments on this article to [editor@kcumb.edu](mailto:editor@kcumb.edu).



# CLIMBING THE LADDER to success

*Tiffany Lewis, D.O. (COM '09)*

Necessity and proximity were two of the main factors that prompted Tiffany Lewis, D.O. (COM '09), to enroll at Kansas City University of Medicine and Biosciences nearly a decade ago, following her graduation from Washington University in St. Louis.

She always had a desire to help others. The realization that she could potentially put herself in a better position to care for her own family is what eventually drew her to radiology.

It couldn't have worked out better, said Dr. Lewis, a 32-year-old native of Fort Scott, Kan.

"Going to KCUMB has led me to a path of getting into the places I really wanted to, places where I had my focus," said Dr. Lewis, who recently completed a residency in diagnostic radiology at Kansas University Medical Center in Kansas City, Kan.

After interviewing with Stanford, Harvard, Yale and others, Dr. Lewis earned a one-year fellowship at the Mayo Clinic's satellite campus in Scottsdale, Ariz., where she is honing her skills in women's imaging. She began the fellowship July 1.

Part of her work at the Mayo Clinic involves breast cancer imaging, which holds special significance for Dr. Lewis, since her mother, Kitty Lewis, was diagnosed with breast cancer years ago. Kitty is one of seven women in her family, three of whom have developed breast cancer.

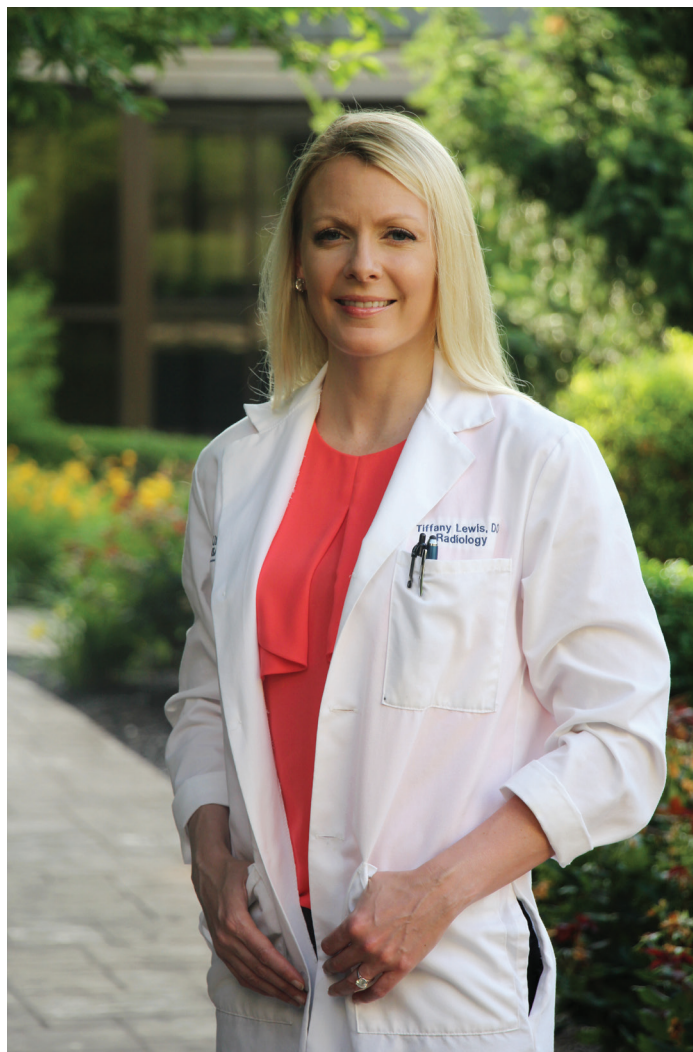
Dr. Lewis is one of four women in her family, and she said there's a chance she and her sisters may one day face the same disease her mother once did.

"That was a big push for me," she said. "I specifically wanted to go into breast cancer imaging, not only because it's something I'm passionate about, but because it's something I could help make advances with, to help other people and maybe save my life or the life of one of my sisters."

"I definitely have a lot of drive to do well and go far in the field."

Dr. Lewis knew early in life – by age 5, in fact – that she wanted to be a physician. Her studies have always been tailored toward becoming a doctor.

She grew up on a farm in Fort Scott, where her family raised cattle and grew corn, soybeans and milo. It was a



childhood, Dr. Lewis said, "where hard work, honesty and dedication meant everything – values that have really helped carry me through."

"I always wanted to be a doctor," she added. "I liked it because it was challenging, and it was a lifelong-learning profession. It's hard not to be happy at the end of the day when you know what kind of difference you're making in someone's life."

That enthusiasm for the profession hasn't waned. Dr. Lewis plans to return to Kansas City, following completion of the Mayo Clinic fellowship.

She credits the opportunities she's had – and those she will have in the future – to the values she learned growing up, hard work and her time at KCUMB.

"I've found (through KCUMB) I have a lot bigger network and support system, and I'm in tune with patients' needs," Dr. Lewis said. "KCUMB helped me make all of those connections."

*Do you know of a KCUMB graduate who is accomplishing great things? Let us know his or her story by emailing [editor@kcumb.edu](mailto:editor@kcumb.edu).*

## Experienced Advancement Professional Chosen to Lead KCUMB's Development Efforts

Jane Lampo, Ed.D., CFRE, joined KCUMB April 23 as vice president for advancement.

"Dr. Lampo's combined experience with both educational and health-care fundraising will be an excellent fit for KCUMB," said Marc B. Hahn, D.O., president and chief executive officer. "She has demonstrated a successful track record and strategic approach for securing gifts at Children's Mercy Hospital in Kansas City. Her ability to build and maintain a portfolio of major gift and planned gift prospects and donors will be an asset to our own development and fundraising efforts, especially as we approach our centennial anniversary in 2016."



Lampo

Lampo previously served as managing director of philanthropic gift planning and regional giving for Children's Mercy Hospital in Kansas City, Mo. During the last two decades, she has initiated and implemented planned giving programs that have increased Children's Mercy Hospital's donor base, as well as major and expected future gifts.

In her new role as vice president of advancement for KCUMB, Lampo will supervise the alumni relations and advancement staff, as well as work closely with the president, Board of Trustees and senior leadership to maximize the success of all university fundraising initiatives and campaigns and promote the University's mission to improve the well-being of the diverse communities it serves.

"I am very enthusiastic about this opportunity to join KCUMB and lead its advancement team, especially as the University approaches its centennial anniversary," Lampo said. "It is an exciting time for the University as it celebrates its history and looks forward to a strong and vibrant future led by Dr. Hahn. My tenure at Children's Mercy has been tremendously rewarding, and I believe that the many connections between KCUMB and Children's Mercy will serve me well in my new role."

Lampo has also served as vice president for university advancement at Rockhurst University, Kansas City, Mo. In that capacity, she led an extensive advancement staff and was instrumental in the development and redesign of Rockhurst's annual giving program that increased philanthropic revenue and alumni participation.

Lampo earned a master of science in international relations from Johns Hopkins School of Advanced International Studies in Washington, D.C., and a doctorate in higher education administration from the University of Kansas.

## Submit Your Nomination Now for the 2014 Alumni Awards

Active members of KCUMB's Alumni Association are eligible to submit nominations for the Alumni Awards, which are presented annually.

Awards that may be presented are:

- Alumnus of the Year Award
- Alumni Achievement Award
- Young Alumni Achievement Award
- Alumni Service Award
- Distinguished Service Award
- Star-Spangled Banner Medallion

Past award recipients are not eligible to win in the same category as their previous award. Visit [www.kcumb.edu/AlumniAwards](http://www.kcumb.edu/AlumniAwards) to nominate a deserving individual today.



## Become a Part of the KCUMB-COM LEGACY FUND

### Honor the Past, Shape the Future

The Legacy Fund honors KCUMB-COM faculty, staff, alumni and physician partners, both past and present, who have left a lasting imprint on student doctors of all generations.

All gifts designated to the Legacy Fund will be directed to specific programs benefitting faculty or educational initiatives and will be dispersed annually at the Faculty Senate's discretion.

A gift of \$500 is required for inclusion in the Legacy Fund.

For more information on how you can support the KCUMB-COM Legacy Fund, please call the Advancement Office at 816-654-7280, email [alumni@kcumb.edu](mailto:alumni@kcumb.edu) or visit [www.kcumb.edu/LegacyFund](http://www.kcumb.edu/LegacyFund).

## Alumni Pledge More Than \$19,000 During Spring Phone-a-Thon

Did you answer the call?

More than 100 KCUMB alumni did, generously pledging \$19,246 of support for the University and its students March 11-13 during the annual spring phone-a-thon.

Alumni were asked to consider making a gift of at least \$122 each. While that might seem strange, \$122 is the cost of one day's tuition for a student to attend KCUMB. As it turns out, nearly 26 percent of donors gave that amount. Overall, 81 percent of donors gave more than \$100.

If you are interested in contributing to KCUMB's Annual Fund, please contact the Advancement Office at 816-654-7280 or email [alumni@kcumb.edu](mailto:alumni@kcumb.edu). You may also donate online at [www.kcumb.edu/Give](http://www.kcumb.edu/Give).

## Faculty, Staff Donate More Than \$48,000 During Annual MyKCUMB Fund-Raising Campaign

Faculty and staff at KCUMB showed their support for the University's mission by opening their own pocketbooks during the annual myKCUMB fund-raising campaign. Overall, 64 percent of faculty and staff participated in the effort, pledging more than \$48,000 of support over the coming year.

"It's important that faculty and staff show their strong dedication to KCUMB," said Jane Lampo, vice president for advancement. "External donors and organizations want to know that our University family is committed and wants to support KCUMB, just as we are inviting them to do."



## Join KCUMB for the 2014 American Osteopathic Association Conference in Seattle

Make plans now to join other osteopathic physicians from across the country Oct. 25-29 during the 119th Osteopathic Medical Conference and Exposition in Seattle.

OMED is the year's premier osteopathic event, offering continuing medical education opportunities, professional development sessions and plenty of time for networking with fellow osteopathic physicians from across the country.

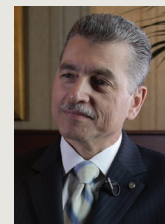
While there, be sure to attend a special reception for KCUMB alumni at 7 p.m. Oct. 27 at Chihuly Garden and Glass in Seattle. Watch for more details coming soon.

## KCUMB Alum Takes the Reins as AOA President for 2014-2015

As late New York Yankees great Yogi Berra might say, "It's like déjà vu all over again."

That's because when Robert Juhasz, D.O. (COM '81), was officially installed as president of the American Osteopathic Association on July 19, he became the seventh AOA president from KCUMB during the past 15 years – the second from his class, even.

Dr. Juhasz serves as president of South Pointe Hospital, a Cleveland Clinic Hospital in Warrensville Heights, Ohio, and as associate dean of the Ohio University Heritage College of Osteopathic Medicine's Cleveland Clinic Extension Campus.



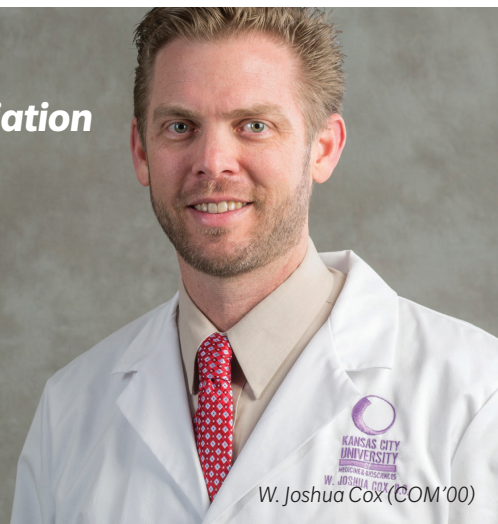
Dr. Juhasz

## Join Dr. Cox and Thousands of Fellow Alumni as Proud Members of the KCUMB Alumni Association

Stay connected with your alma mater and former classmates as a member of the KCUMB Alumni Association!

Your \$50 membership dues support many activities, including alumni receptions during various professional meetings, alumni mentoring panels for current students and University-sponsored continuing medical education programs.

Join today by visiting [www.kcumb.edu/AlumniDues](http://www.kcumb.edu/AlumniDues), by calling 800-234-4847 ext. 7284, or mailing your payment to KCUMB, Attn: Advancement Office, P.O. Box 843836, Kansas City, MO 64184-3836.



W. Joshua Cox (COM '00)

# CLASSnotes

## 1968

Robert George, D.O. (COM '68), was honored March 15 as the American College of Osteopathic Family Physicians' Physician of the Year during the organization's President's Banquet. Dr. George currently serves as associate dean of academic affairs at the Lake Erie College of Osteopathic Medicine – Bradenton Campus in Florida.

Anthony Ottaviani, D.O. (COM '68), was recently named president of the American Osteopathic

Foundation. Dr. Ottaviani has served as a member of the AOF's Board of Directors since 2009. He currently serves as the chief academic officer at Largo Medical Center in Largo, Fla., where he also directs the center's pulmonary and critical care fellowship.

## 1973

Ray Stowers, D.O. (COM '73), was among the authors of an article, "Is the Osteopathic Medical Profession Prepared for a Radiologic or Nuclear Incident?" which was published in the March issue

of the *Journal of the American Osteopathic Association*.

## 1980

Richard Magie, D.O. (COM '80), associate professor and chair of pediatrics, and Jan Talley, Ph.D., assistant professor of pediatrics and research analyst, co-authored an article, "The Integration of the 'Spirituality in Medicine' Curriculum into the Osteopathic Communication Curriculum at Kansas City University of Medicine and Biosciences," which was published in the January issue of *Academic Medicine*, the Journal of the Association of American Medical Colleges.

## 1981

Thomas Myers, D.O. (COM '81), recently opened Summit Dermatology in Stow, Ohio. Dr. Myers, who has practiced for more than 30 years, previously worked at Dermatology Clinics of Southwest Virginia.

## 1982

Alan Lagnas, D.O. (COM '82), was recently nominated by both the American Osteopathic Association and the American Association of Colleges of Osteopathic Medicine for a position on the U.S. Health Resources and Services Administration's Advisory Committee on Organ Transplantation. Dr. Lagnas

currently serves as a professor of surgery and director of transplantation at the University of Nebraska Medical Center.

## 1986

Denise Bratcher, D.O. (COM '86), currently serves as director of the pediatric residency program at the Children's Mercy Hospital and Clinics in Kansas City, Mo. Dr. Bratcher, who also serves as a professor of pediatrics for the University of Missouri-Kansas City School of Medicine, specializes in pediatric infectious diseases.

## 1987

Kevin Treffer, D.O. (COM '87), was among the co-authors of an article, "Somatic Dysfunction and Use of Osteopathic Manual Treatment Techniques During Ambulatory Medical Care Visits: A CONCORD-PBRN Study," which was published in the May issue of the *Journal of the American Osteopathic Association*. Dr. Treffer is an associate professor of family and community medicine, and discipline coordinator for OMM at KCUMB.

## 1988

Michael Cook, D.O. (COM '88), was recently honored with the 2014 Professional of the Year Award by the Federal Executive Board of Metropolitan Northern New Jersey. The mission of the

## WE'VE GOT JOBS



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Kansas City University of Medicine and Biosciences currently has faculty positions available in the following areas:

- Family Medicine / Sports Medicine
- Internal Medicine

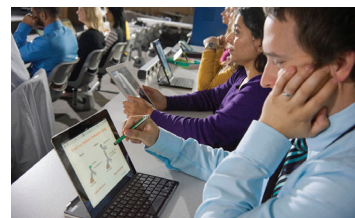
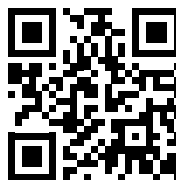
KCUMB is always looking for talented individuals to add to our team. KCUMB offers an outstanding salary and benefits package.

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**Scholarships. Programs. Facilities.**

Federal Executive Board is to foster communication and collaboration among federal, state and local government agencies.

### 1989

Lynne Stockman, D.O. (COM '89), was recently honored by Hampton Roads Physician Magazine for her good deeds and volunteer service. Dr. Stockman was also recognized as the 2014 Medical Professional Volunteer of the Year for the Western Tidewater Free Clinic. Dr. Stockman is a family physician at Bayview Physicians Group in Newport News, Va.

### 1990

Donald Kube, Jr., D.O. (COM '90), was recently re-elected for a fourth term as chief of staff for Dickinson County Healthcare System in Iron Mountain, Mich. Dr. Kube currently serves as medical director and chair of the Anesthesia Department at DCHS.

### 1991

Jonelle Dutton-Gaddis, D.O. (COM '91), was recently recognized as a member of America's Registry of Outstanding Professionals. Dr. Dutton-Gaddis practices at Warren Clinic in Tulsa, Okla.

Mark Pinsky, D.O. (COM '91), recently wrote an article, entitled "Modern Wheat vs. Ancient Wheat," which was published on *SpaceCoastDaily.com*, an online publication based in Brevard County, Fla. Dr. Pinsky is a family physician and a partner at Medical Associates of Brevard.

### 1992

John Dougherty, D.O. (COM '92), was recognized as an "Unsung Hero" in November by the American Osteopathic Association. The award honors Dr. Dougherty for enhancing the image of osteopathic medicine and instilling pride in being a D.O.

### 1995

David Lang, D.O. (COM '95), recently joined Providence Medical Group in Kansas City, Kan. Dr. Lang specializes in obstetrics and gynecology and previously practiced in Overland Park, Kan.

### 1997

Andrew Dennis, D.O. (COM '97), recently appeared in "Chicago-land," a documentary-style TV series on CNN. Dr. Dennis is the senior attending trauma and burn surgeon at John H. Stronger, Jr., Hospital of Cook County in Chi-



*KCUMB hosted more than 60 students from area high schools Feb. 21 as part of its special "Medical Student for a Day" program. Above, students got a hands-on lesson in osteopathic manipulative treatment.*

cago, where he often treats victims of violent crime. Watch for more on Dr. Dennis in the next issue of *KCUMB Magazine*.

John Scott, D.O. (COM '97), was recently named as director of emergency medicine at Fairfield Medical Center in Lancaster, Ohio. Dr. Scott is board-certified in emergency medicine and has worked at Fairfield Medical Center for 12 years.

### 1998

Timothy Jones, D.O. (COM '98), recently was appointed as chairman of the Joint Operations Committee at Cox Health, where he has practiced family medicine for 16 years.

### 2000

J. Scott Holliday, D.O. (COM '00), played a significant role in the recent merger of three of the country's largest anesthesia groups. Dr. Holliday, vice chairman of Pinnacle Anesthesia's Board of Directors, helped facilitate the merger of Pinnacle with Greater

Houston Anesthesiology and JLR Medical Group. The three organizations, which will continue to operate under their own brands, will jointly be known as U.S. Anesthesia Partners.

### 2002

Gina DeFranco, D.O. (COM '02), was recently elected as president of the Tennessee Osteopathic Medical Association. Dr. DeFranco serves as an associate professor of family medicine at Lincoln Memorial University-DeBusk College of Osteopathic Medicine in Harrogate, Tenn., where she has worked since 2009.

### 2004

Kelly Cushing, D.O. (COM '04), recently joined Providence Seaside Hospital in Seaside, Ore., where she serves as a hospitalist. Dr. Cushing previously completed a residency in family medicine through the Family Medicine Residency of Idaho, University of Washington Rural Training Track in Boise, Idaho.



[www.facebook.com/KCUMB](http://www.facebook.com/KCUMB)

[www.twitter.com/KCUMB](http://www.twitter.com/KCUMB)

Jason McAllaster, D.O. (COM '04), was the featured speaker April 10 at Dine with a Doc, an educational event for seniors, in Effingham, Ill. Dr. McAllaster practices at Bella Vein Medical Spa in Effingham, as well as serving as a general surgeon at Marshall Clinic and a wound care specialist at St. Anthony's Memorial Hospital.

## 2005

Karen Truitt, D.O. (COM '05), recently joined Mayo Clinic Health System in Red Wing, Minn., where she practices neurology.

## 2006

Carey Andreoiu, D.O. (COM '06), recently joined Cooper Clinic in Fort Smith, Ark. Dr. Andreoiu previously completed a residency

in obstetrics and gynecology through the University of Cincinnati in Cincinnati, Ohio, and a three-year urogynecology fellowship through Cleveland Clinic Florida in Weston, Fla.

Amish Patel, D.O. (COM '06), recently partnered with Prairie Manor Nursing and Rehab in Chicago Heights, Ill., where he specializes in physical medicine and rehabilitation. Dr. Patel is the founder and CEO of Integrated Rehab Consultants.

## 2007

Christie Brock, D.O. (COM '07), of Advanced Surgical Associates, recently partnered with Truman Medical Center Lakewood in Lee's Summit, Mo., where she will have surgical privileges. Dr. Brock previously completed a critical care fellowship at the University of Missouri-Columbia and a general surgery residency in Brooklyn, N.Y.

Elizabeth Herrington, D.O. (COM '07), recently joined the Singing River Health System, where she practices at the Regional Cancer Center in Pascagoula, Miss., and Ocean Springs, Miss. Dr. Herrington, an oncologist, previously completed an internal medicine residency at the University of Mississippi Medical Center in Jackson, Miss., and a hematology/oncology fellowship at the University of Mississippi.

Nicole Walton, D.O. (COM '07), recently joined the Singing River Health System in Ocean Springs, Miss. Dr. Walton, a rheumatologist, previously completed an internal medicine residency at the Medical College of Georgia and a fellowship at Wake Forest Baptist Medical Center in Winston Salem, N.C.

## 2008

Cathleen (Davignon) Adams, D.O. (COM '08), recently completed a fellowship in neurovas-



*KCUMB students take advantage of unusually cool summer weather to toss a Frisbee with classmates in the University's Community Garden and Park.*

cular disease after her neurology residency. Dr. Adams is now an attending physician in the Department of Neurology at Penn State Milton S. Hershey Medical Center in Hershey, Penn., where she specializes in stroke.

Austin Bancroft, D.O. (COM '08), recently joined Indiana University Health La Porte Physicians in La Porte, Ind. Dr. Bancroft is an ear, nose and throat specialist and previously completed a residency at Metro Health Hospital in Wyoming, Mich.

Christopher Nelson, D.O. (COM '08), was promoted May 19 to the rank of major in the U.S. Air Force. Dr. Nelson currently serves as the critical care air transport team leader in Okinawa, Japan.

## 2009

Josh Brickner, D.O. (COM '09), earned board certification by the American Board of Internal Medicine. Dr. Brickner is a hospitalist at Lake Regional Hospital in Osage Beach, Mo. He previously completed a residency in internal medicine and pediatrics at the University of Missouri.

Rachel Knudson, D.O. (COM '09), recently joined the staff at Skiff Medical Center in Newton, Iowa. Dr. Knudson, a general surgeon, previously completed a surgical residency at Mercy Medical Center in Des Moines, Iowa.

Cody Mead, D.O. (COM '09), recently was awarded the Bronze Star for meritorious service in Afghanistan, where he spent sev-

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en months. Dr. Mead, a captain in the 2nd Black Jack Brigade of the 1st Cavalry Division, serves as brigade surgeon. During non-war operations, he oversees seven physician assistants, a psychologist, a social worker and a dentist at Fort Hood, Texas.

Brett Nedich, D.O. (COM '09), recently joined the Medical Plaza of Hillsboro, which opened Dec. 9 in Hillsboro, Kan. Dr. Nedich, who is board certified in internal medicine, serves as the clinic's primary physician.

## 2010

Marianna Zelenak, D.O. (COM '10), currently practices at The Buena Vida Wellness Resource Center in West Melbourne, Fla. Dr. Zelenak specializes in internal medicine and geriatrics.

## 2012

Chris Paynter, D.O. (COM '12), was recently named as a chief resident for the 2014-2015 academic year in the University of Missouri-Kansas City Family Medicine Residency Program at Truman Medical Center-Lakewood in Kansas City, Mo. Dr. Paynter will facilitate communication between residents and faculty, as well as provide

leadership for other residents in the program.

Ben Reine, D.O. (COM '12), was recently named as a chief resident for the 2014-2015 academic year in the University of Missouri-Kansas City Family Medicine Residency Program at Truman Medical Center-Lakewood in Kansas City, Mo. Dr. Paynter will facilitate communication between residents and faculty, as well as provide leadership for other residents in the program.

## Got News? We Want to Know!

Did a professional organization recently honor your work? Maybe you are on the move, thanks to a new job?

Send any recent professional accomplishments – awards, fellowships, new jobs, published research articles or other noteworthy achievements – by email to [editor@kcumb.edu](mailto:editor@kcumb.edu). Be sure to include pertinent details, such as dates and locations.

We cannot guarantee that your submission will be published. Submissions may be edited for length, style and clarity.

## Previous Pop Quiz

In the previous issue, we challenged you to write captions for the photo shown below. Carolyn Primm submitted the winning caption, below, and won a \$25 Starbucks gift card.



*"Wait Lifting"*

## In memoriam

KCUMB remembers the following alumni and friends:

**H. Max Benefield, D.O.**  
(COM '43), Nov. 6, 2013

**Morris S. Couch, D.O.**  
(COM '44), Jan. 13, 2014

**Mary M. Burnett, D.O.**  
(COM '49), June 1, 2014

**Charles R. Holman, D.O.**  
(COM '49), Feb. 27, 2014

**Harold L. Lasswell, D.O.**  
(COM '52), March 17

**Eugene W. St. Marie, D.O.**  
(COM '54), Jan. 27, 2014

**Richard J. Tamez, D.O.**  
(COM '54), March 22, 2014

**Michael R. Durishin, D.O.**  
(COM '55), Nov. 22, 2013

**Dalrie H. Berg, D.O.**  
(COM '56), Dec. 1, 2013

**Robert O. Thiele, D.O.**  
(COM '58), Dec. 5, 2013

**John F. Hanley, D.O., M.D.**  
(COM '59), Jan. 27, 2014

**Rudi O. Wadle, D.O.**  
(COM '59), April 9, 2014

**Melvin L. Jackson, D.O.**  
(COM '60), March 23, 2014

**Clayton E. Whetmore, D.O.**  
(COM '60), May 28, 2014

**Vergil D. Smith, D.O.**  
(COM '61), Dec. 9, 2013

**Jay C. Surratt, D.O.**  
(COM '64), Oct. 10, 2013

**Wilbur V. Cole, D.O.**  
(COM '65), Feb. 17, 2014

**Jerry A. Nelms, D.O.**  
(COM '65), Jan. 2, 2013

**Stuart F. Ballengee, D.O.**  
(COM '66), Feb. 20, 2013

**Burton D. Cox, Sr., D.O.**  
(COM '68), Oct. 11, 2013

**Gary S. Wasserman, D.O.**  
(COM '71), March 26, 2014

**William E. Good, D.O.**  
(COM '80), May 6, 2013

**John M. Bondy, D.O.**  
(COM '81), Jan. 16, 2014

**William F. Siebert, Jr., D.O.**  
(COM '81), Dec. 12, 2013

**Randall W. Lewis, D.O.**  
(COM '82), April 8, 2014

**Howard J. Hammett, D.O.**  
(COM '87), June 5, 2013

**E. Scott Carroll, D.O.**  
(COM '91), Dec. 4, 2013

**Henry "Hank" Lipps, D.O.**  
(COM '97), June 23, 2014

**Carla D. Waller-Schauberger, D.O.**  
(COM '98), April 4, 2013

**Joseph J. Zarlengo, D.O.**  
(COM '99), Feb. 12, 2014

**Michael L. Kooiker Brostoski, D.O.**  
(COM '06), May 29, 2014

**Timothy A. King**, a third-year osteopathic medical student, March 6, 2014

If you know of a KCUMB graduate or former faculty member who has passed away, please email his or her information to [editor@kcumb.edu](mailto:editor@kcumb.edu). Be sure to include the person's full name, class year and date of death, if possible.

We hear that you can solve a crossword puzzle in your sleep. We've got just one thing to say about that ... Prove it.

Email your answers to [editor@kcumb.edu](mailto:editor@kcumb.edu). If your puzzle has the most correct answers, you will win a \$25 Starbucks gift card and the notoriety that comes with having your name printed in the next issue of *KCUMB Magazine*.

*Required disclaimer: In the event that more than one person – say, 137 people – answers the puzzle correctly, we will not be awarding 137 Starbucks gift cards. We will draw one winner of a \$25 gift card.*

# POPquiz

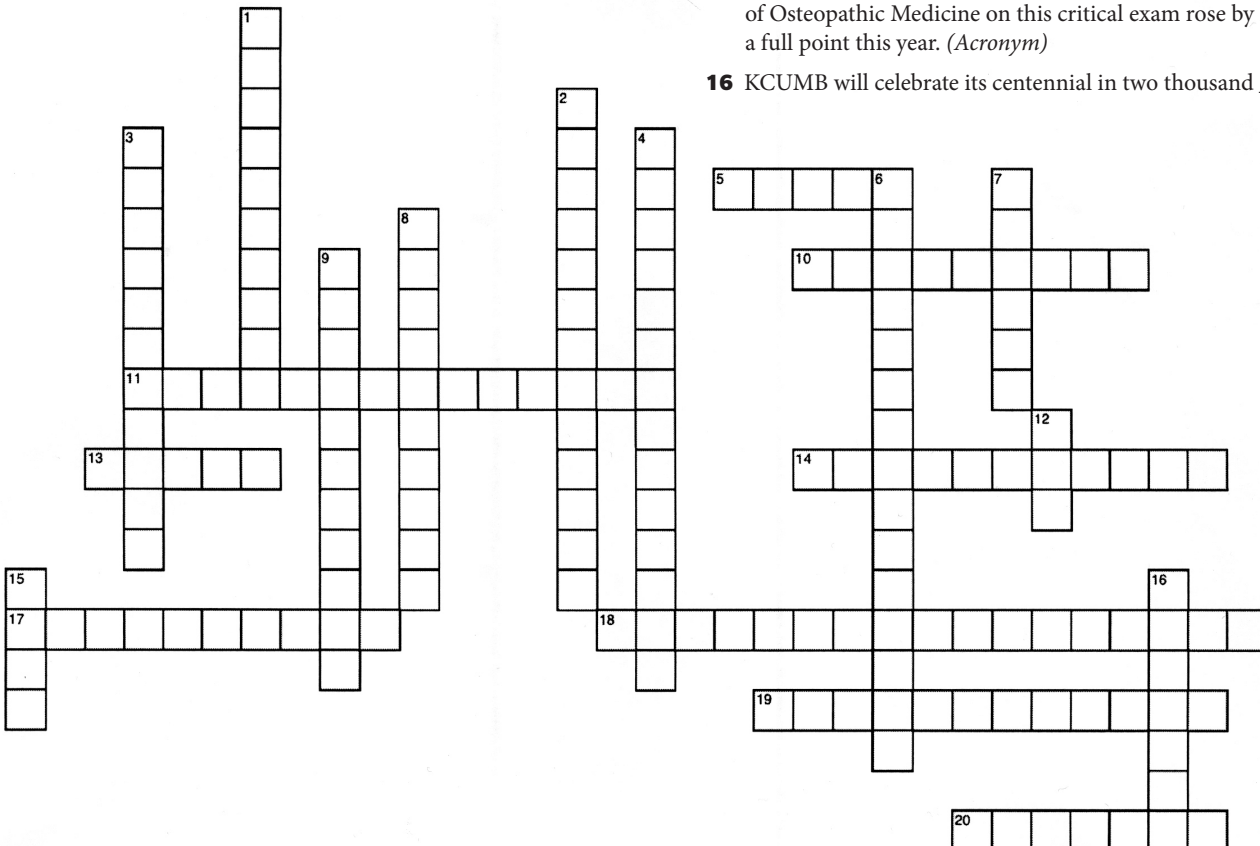
## KCUMB Crossword Conundrum

### Across

- 10 KCUMB currently offers degrees in osteopathic medicine, biomedical sciences and \_\_\_\_\_.
- 11 On Aug. 2, KCUMB will mark the official opening of this new facility. (*Two words*)
- 13 This organization recently honored both KCUMB Magazine and the University's website, [www.kcumb.edu](http://www.kcumb.edu), with first-place awards. (*Acronym*)
- 14 KCUMB has two colleges, the College of Osteopathic Medicine and the College of \_\_\_\_\_.
- 17 The campus icon that sits atop Smith Hall.
- 18 The person who said, "Let us not be governed today by what we did yesterday, not tomorrow by what we do today, for day by day we must show progress." (*Full name*)
- 19 Full name of the Class of 1963 alumna whose name adorns KCUMB's Prize for Research.
- 20 Last name of a well-known KCUMB biochemistry professor who will soon transition to a part-time role after more than four decades of teaching.

### Down

- 1 The theme of KCUMB's 2014 Homecoming celebration is "Beneath the \_\_\_\_\_."
- 2 KCUMB recently shifted its research focus to this type of research.
- 3 Verner Ames, D.O. (COM '50), examined this boxing legend in Kansas City in 1974.
- 4 Follow KCUMB's leader on Twitter @\_\_\_\_\_.
- 6 A KCUMB program that provides free health screenings to children in the Kansas City area.
- 7 Last name of the Class of 1981 alum who was installed as president of the American Osteopathic Association on July 19.
- 8 The annual celebration that will take place Sept. 18-20 on the KCUMB campus.
- 9 KCUMB is dedicated to its mission of "Improving the Well-Being of the \_\_\_\_\_ We Serve."
- 12 KCUMB's College of Osteopathic Medicine recently celebrated its \_\_\_\_\_ thousandth graduate. (*If you don't get this, we will be very disappointed with your reading comprehension.*)
- 15 The average score of a student accepted to KCUMB's College of Osteopathic Medicine on this critical exam rose by nearly a full point this year. (*Acronym*)
- 16 KCUMB will celebrate its centennial in two thousand \_\_\_\_\_.



# At KCUMB, We've Been "Improving the Well-Being of the Communities We Serve" for Nearly 100 Years



## We Live Our Mission

Most organizations have a mission statement. Few take that mission to heart the way that we do at Kansas City University of Medicine and Biosciences.

Our faculty members don't just show up for work; they strive to find innovative ways of preparing the next generation of physicians.

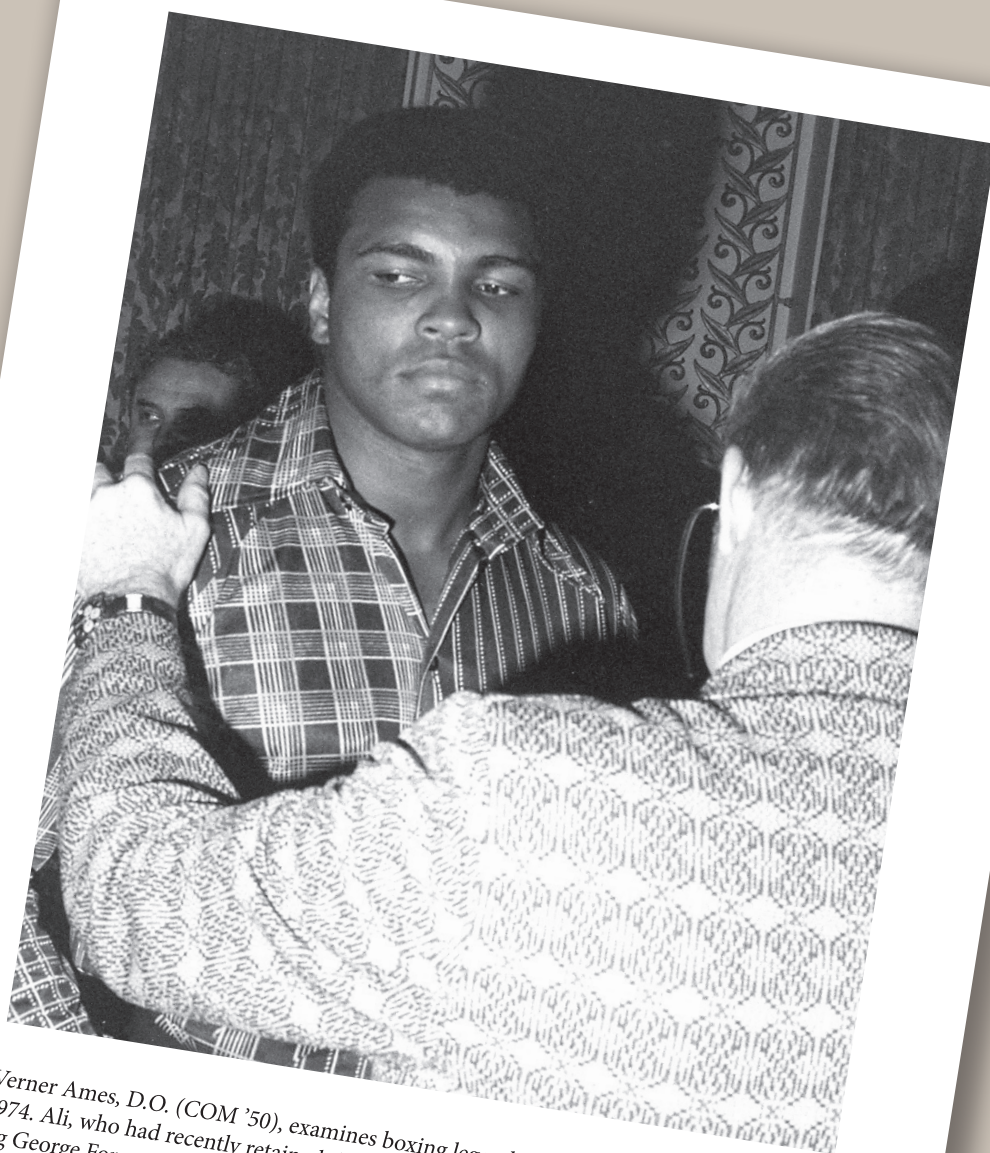
Our staff doesn't just sit behind their desks all day; they go to local elementary schools to help provide health screenings through KCUMB's Score 1 for Health program.

Our students don't spend all their time studying; they travel to remote villages in Guatemala and the Dominican Republic to offer free medical care to people who otherwise would go without.

At KCUMB, we're here for the greater good. We live our mission every day. And, that's something we can all be proud of.

# Remember When ...

What do you remember most about your time at KCUMB? If you have an interesting historical photo or simply want to share your personal memories, email [editor@kcumb.edu](mailto:editor@kcumb.edu) with a brief description. We cannot guarantee that your submission will be published.



Verner Ames, D.O. (COM '50), examines boxing legend Muhammad Ali in November 1974. Ali, who had recently retained the world heavyweight championship after defeating George Foreman in Zaire, Africa, was in Kansas City for a charitable exhibition fight at the time of his encounter with the physician. Dr. Ames was chief physician for the Kansas City chapter of the Golden Gloves. He served as a professor of internal medicine at the Kansas City College of Osteopathy and Surgery, now KCUMB, from 1955 until his retirement in 1993.