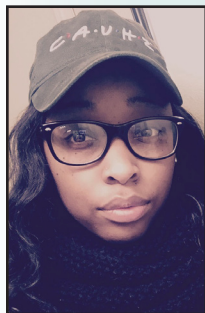


Family & Community MEDICINE

Summer 2018



"I was terrified when I first found out I was pregnant last year. Just thinking about labor and delivery scared me," says TIFFANY JOHNSON, age 19. "I didn't know anything about babies or about being a mom."

As soon as she could, Tiffany made an appointment with Sarah Calhoun, MD, her family doctor.

"My friends were shocked when I told them that my family doctor would be taking care of me during my pregnancy," Tiffany says. "But I thought it was cool to have Dr. Calhoun deliver my baby. She's my mom's doctor and has been my doctor since I moved to Columbia when I was five. I totally trust her because she listens and cares and knows me very well."

Dr. Calhoun was supportive and attentive to Tiffany throughout her pregnancy ... offering her encouragement, answering her questions, and addressing her fears at every visit. And when it came time for her baby's birth, Dr. Calhoun was there for her, too.

"I was able to stay strong during labor and delivery because Dr. Calhoun was with me. She told me what to expect, kept me focused, and helped me believe in myself," Tiffany says. "I could tell she cared, and that made my baby's birth a joyful experience for me and my boyfriend, Marcell Smith."

GISZEL LATOYA RENAI SMITH, Tiffany and Marcell's 5 lb 11 oz daughter, was born on May 7.



"Being a mom is fun and gets better every day!" says Tiffany. "I'm grateful to Dr. Calhoun for all she's done and con-

tinues to do for me, my mom, and now my beautiful baby girl. We love Dr. Calhoun and will always consider her part of our family."

DR. SARAH CALHOUN EMBRACES

the joys of family medicine

"No other specialty in medicine would offer me the same opportunities I have as a family physician. My job is amazing; I truly enjoy how different each day and every patient is!"

By the time Dr. Calhoun started medical school at the University of Missouri in 2002, she had already developed a compassion and commitment to family medicine. Growing up in a home where family members loved, cared and supported each other influenced her values, attitude and goals as an adult ... Dr. Calhoun explains:

"When I was in high school, my dad's mom moved in with us. Grandma, who was 90, had advanced Alzheimer's and didn't recognize my father. Our family doctor played a big role in providing care to my grandmother while she lived in our house. He checked on her regularly and advised us about what to do and what to expect as her disease progressed. We fully trusted him, so when he recommended we move grandma into a nursing home – after she fell and broke her foot in the middle of the night – we followed his advice.

"Grandma lived with us for two years, and even though taking care of her could be tiring and stressful, especially for my mom, no one in my family ever complained. This experience taught me so much about love and health care, and it sparked my interest in medicine. Our family doctor was a positive role model and had a major influence on my decision to pursue family medicine. He cared, served and connected with grandma and my family. As a physician I wanted to make a difference and build relationships with patients and their families throughout their lives ... just like our family doctor."

After earning her medical degree, Dr. Calhoun stayed at MU for family medicine residency training, and then accepted the invitation to join our faculty and the medical staff at the Smiley Lane Family Medicine clinic in 2009.

"Once I came to MU, I never considered

leaving. The department was top notch and the family medicine faculty were well respected by everyone in the med school," says Dr. Calhoun. "Plus I knew that as an MU family doctor, I'd be able to do full scope family medicine, including OB, and that was important to me."

She divides her time between patient care, teaching medical students, and attending for residents both in clinic and on the OB service. Dr. Calhoun considers it a privilege to be one of only a dozen family physicians who practice obstetrics at MU.

"I love taking care of moms through pregnancy and helping them prepare for this life-changing event. Sharing the birth experience with them is truly an honor. Every delivery is exciting, and every baby is special," says Dr. Calhoun. "But as a family physician, my role doesn't end with birth. I get to continue knowing and caring for mom and baby, and sometimes dad. In a few families, I take care of grandparents, too. I learn so much about patients individually by seeing them as a family. That makes my job easier in so many ways."

Dr. Calhoun's patients are all ages and both genders, and they come to her with a full range of health concerns. Even though the approach she takes in providing care may be different for each of them, her goal is the same: Dr. Calhoun wants what's best for her patients.

And for the newborn babies she delivers, Dr. Calhoun believes breastfeeding is best.

the joys of
family
medicine:
CONTINUED
ON PAGE 18



SARAH CALHOUN, MD
ASSISTANT PROFESSOR: MU FAMILY MEDICINE

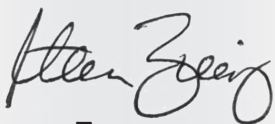
CHAIR'S MESSAGE

In reading the story about Dr. Sarah Calhoun and her patients, I am reminded of the special role of the family physician in maternity care. We are the only physicians who follow women during pregnancy, deliver babies, and subsequently care for them as members of a family. What a value to our patients and a tremendously rewarding experience for family physicians!

Increasingly maternity care is not available to women who live in rural communities. Those who are poor, cannot leave their jobs, or have insufficient transportation may have difficulty travelling long distances for prenatal care. Women who live in rural communities without hospitals and who don't have access to care, have worse outcomes, including prematurity and increased perinatal mortality. Without a local family physician, rural persons are also not likely to have available care for their children.

It is important for family physicians – particularly in rural communities – to provide prenatal care even if they need to refer their patients for delivery to larger sites with the appropriate hospital resources. We have committed to do this in our own rural practices in Fulton, Fayette, and Ashland – with the deliveries managed by our own family physicians – including Dr. Calhoun – in Columbia. At discharge, mom and baby return to their hometown family physician reinforcing the care relationship that has served them well.

**What defines family medicine?
We provide the care patients and communities need!**



STEVEN ZWIG, MD, MSPH
PROFESSOR AND CHAIR

JACK & WINIFRED COLWILL ENDOWED CHAIR

2

MU FAMILY AND COMMUNITY MEDICINE

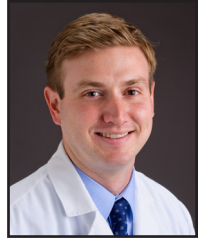
FACULTY FOCUS

welcome

ALEX ZWIG, MD, assistant professor, has returned home to Missouri to join the faculty here at MU Family Medicine. Dr. Zweig will be practicing at two clinics, South Providence Family Medicine and Ashland Family Medicine, a rural clinic located 15 miles south of Columbia. He will also do inpatient and outpatient attending for MU Family Medicine residents.

Dr. Zweig graduated from MU's School of Medicine in 2014 and completed Oregon Health and Science University's four-year Family Medicine Residency this summer.

A lifelong Missourian, Alex is the son of MU Family and Community Medicine Chair Dr. Steve Zweig and MU Student Health Center Executive Director Dr. Susan Even. He is excited about moving back to Columbia and starting his career at MU. He is also excited about the birth of his first child. Alex and his wife, Lacy, are expecting a son this fall.



congrats

RICHELLE KOOPMAN, MD, MS, professor and director of research, completed the Hedwig van Ameringen Executive Leadership in Academic Medicine (ELAM) Fellowship. Established in 1995 by the Institute for Women's Health and Leadership at Drexel University College of Medicine in Philadelphia, ELAM promotes the advancement of women in medicine.

"We are proud, but not surprised, that Dr. Koopman was selected for this very competitive program," says Professor and Chair Steve Zweig, MD, MSPH. "She is a phenomenal mentor and role model who is committed to promoting the careers of women faculty members throughout our health system."

In July, the AAMC Group on Women in Medicine and Science elected Dr. Koopman to serve on its National Steering Committee. Her three-year term starts in November.



DEBRA HOWENSTINE, MD, associate professor, was selected to receive a Leonard Tow Humanism in Medicine Award this year by MU's School of Medicine. Sponsored by the Arnold Gold Foundation, this award recognizes faculty members who demonstrate clinical excellence and outstanding compassion in patient care and who also show respect for patients, their families and health care colleagues. Dr. Howenstine was invited to deliver the keynote at the 2018 MU School of Medicine Commencement ceremony. In her address, she spoke about the value of interacting with individuals from diverse backgrounds and perspectives ... personally and professionally.



DEBRA PARKER-OLIVER, PhD, MSW, professor, was invited to present at the National Academy of Medicine's Integrating Health and Care and Social Services for People with Serious Illness: A Workshop, held July 19 in Washington DC. Her topic was, *Providing Supportive Services: Exploring the Key Role and Unique Needs of Caregivers*. Following this workshop, Dr. Oliver delivered the closing plenary, *The Invisible Transitions Inside the Labyrinth of Caregiving*, at the National Hospice and Palliative Care Organization's 2018 Virtual Conference: Turning Points: Mastering Transitions in Care.



DAVID MEHR, MD, MS, professor, co-authored an invited commentary, *Hip Fractures in Patients With Advanced Dementia: What Treatment Provides the Best Palliation?* published in *JAMA Internal Medicine*. Dr. Mehr says, "Primary care or nursing home physicians need to be having goals-of-care discussions with families/decision makers for patients with advanced dementia who fracture their hip as mortality is so significant in this group." David Mehr, Paul Tatum, Brett Crist: *JAMA Intern Med.* 2018;178(6):780-781



ROBIN BLAKE, MD, professor emeritus, MU Family and Community Medicine, published the second edition of his book, *From Here to There and Back*, a collection of 16 short stories and 16 works of nonfiction. Many pieces are based on Robin's experiences practicing medicine in rural Appalachia during the 1970s. This book is available on Amazon.





BRIAN DUFF, MD
FAMILY PHYSICIAN: NIXA, MO

BRIAN DUFF, MD

FAMILY PHYSICIAN & TEACHER

BRIAN DUFF, MD, graduated from MU's School of Medicine in 2008; completed his residency at Halifax Family Medicine, Daytona Beach, FL, then headed back home to Springfield, MO, to practice at Cox Health in 2011. From the start of his career, Dr. Duff knew he wanted to teach. Initially he taught Cox Family Medicine Residents, and a year later he decided to mentor MU medical students in his clinic. Since then, Dr. Duff has earned strong words of praise from those who have worked and learned alongside him:

“DR. DUFF is a great physician and terrific teacher. While working with him, I saw a wide range of problems, from well exams and chronic pain management to glycogen storage diseases and Langerhans cell histiocytosis. This experience strengthened my interest in family medicine.”

“DR. DUFF was always approachable, attentive and interested in my education. He gave me opportunities to work on my history-taking and physical exam skills. When I was in the exam room, it was obvious to me that patients truly trusted and connected with Dr. Duff. He is an excellent role model of patient-centered care.”

“DR. DUFF communicates well and treats everyone – patients, learners and staff – with respect. His positive attitude makes the clinic a comfortable place to learn, work and be cared for. I enjoyed my time in Nixa.”

Why medicine ... why family medicine?

DR. DUFF: As the son of an internal medicine physician, I witnessed experiences of my dad helping people outside of clinic throughout my childhood. Whether it was a person who collapsed at a local restaurant or a child who got injured at the neighborhood park, my dad was the go-to person when unexpected medical problems developed. He was always happy to help – inside and outside of clinic, and his patients respected him for this. I was proud of my dad and grateful to him for showing me that medicine is a meaningful and rewarding profession.

I wanted a career that let me use my knowledge and skills to help people and make a positive difference in their lives. During med school, I realized that I enjoyed kids and adults and didn't want to limit my practice to either of those patient populations. I like problem solving, learning people's stories and treating the whole family; family medicine was the perfect fit for me!

I grew up in Springfield, MO, and my goal was to practice there after med school. However, as a child, I always thought that living by a beach would be fun. By moving to Florida for residency training – Halifax Family Medicine, Daytona Beach, I was able to experience and enjoy 'beach life' before I began my career.

How would you describe your practice?

DR. DUFF: I practice outpatient family medicine with two other physicians and a nurse practitioner at CoxHealth, Nixa, MO, a small town of 10,000 located 15 miles south of Springfield. Our patient population is both rural and urban, all ages, and socio-economically diverse. Since 2016, I've served as medical director of Hospice Compassus in Springfield.

When/why did you start teaching?

DR. DUFF: In 2012, I began teaching residents at Cox Family Medicine Residency, soon after I joined the Nixa Family Medicine clinic. A year later, when MU called and asked me about precepting medical students, I said sure! I learned so much from the preceptors I had as a student, so today, in my role as preceptor, I have opportunities to show my appreciation by giving back

to my school and my profession. I mentor students for selfish reasons, too. They keep me on my toes by asking questions and keeping me current with the latest in medical research. Mentoring students in clinic, where they can witness patient care first-hand, benefits not just the students, but me and my patients as well! It's a learning experience for all of us.

Describe the doctor/student experience?

DR. DUFF: When a student is with me in the exam room, I take time to explain things differently, and I ask the student questions about what they know and what they would do if they were the doctor. Patients are prepared that their visit will be longer but don't mind being a participant in the learning process. Sometimes I let students see a patient on their own and give them time to do the exam, interview and history taking. After that, we talk about their experience before I go in to see the patient. Patients enjoy the extra time and attention. They are receptive and welcome seeing/learning the academic side of medical practice.

What's the most rewarding part of your job?

DR. DUFF: I enjoy taking care of entire family ... cradle to grave. I like clinical decision making, problem solving and the cognitive side of medicine. But more than anything else, it's the opportunities to make a difference in my patients' lives that bring joy to me in my role as family physician.

Family/hobbies?

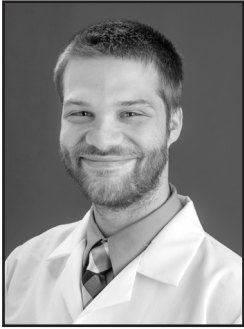
DR. DUFF: My wife, Marta, and I have four young children: Elsie, 8, Nolan, 6, Robbie, 4, and Ivy, 20 months. Spending time with family is extremely important to me. I am fortunate to have a job that allows me to have work-life balance. When I'm not in clinic or with my kids, I like to fly fish, read and exercise.



BRIAN AND MARTA DUFF
AND THEIR FOUR CHILDREN

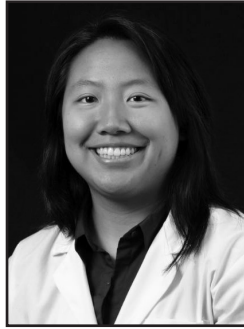
CONGRATULATIONS TO OUR RESIDENCY GRADUATES

CLASS OF 2018



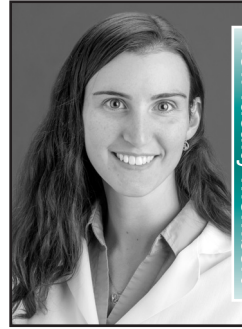
Chase Beliles, MD

Chase and his wife, Lindsay, are moving back home to Kentucky, where Chase will practice family medicine at the Graves-Gilbert Clinic in Bowling Green.



Shari Chang, MD

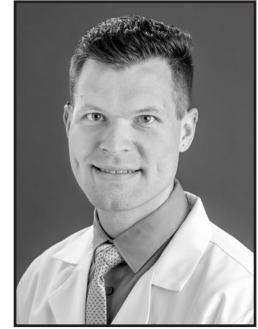
Shari is returning to south-west Missouri, not far from where she grew up. She will be practicing family medicine at CoxHealth Center Chesterfield in Springfield.



welcome
new faculty member!

Krystal Foster, MD

Krystal has joined our faculty and will practice at South Providence Family Medicine. She, her husband, Chris, and their son, Oliver, are glad to make Columbia their home.



Patrick Granneman, DO

Patrick, his wife, Alyssa, and their daughter, Ariana, are moving to Nixa, Missouri. Patrick will be practicing at Mercy Clinic Family Medicine in Ozark.



Andrew Hinojosa, MD

Andrew and his wife, Cassidy, are moving to Texas. Andrew will be doing a hospice and palliative medicine fellowship at the University of Texas-San Antonio.



Rebecca Hogg, MD

Becca, her husband, Kevin, and daughters, Kate and Emma, are staying in mid-Missouri. Becca will practice family medicine at the Jefferson City Medical Group.



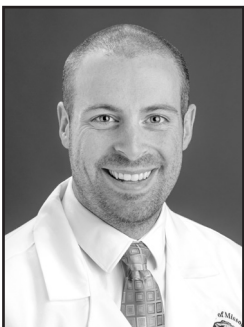
Sarah Kirchhoff, MD

Sarah will be moving back home to Concordia, Missouri, with her husband, Ryan. Sarah will be practicing at Western Missouri Family Healthcare.



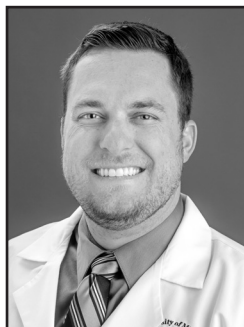
Katie Martinez, MD

Katie, her husband, Cristian, and children, Giovan, Gian and Alondra, will be moving back to Aberdeen, South Dakota. Katie is joining Avera Aberdeen Family Physicians.



Andrew Peterson, MD

Andy and his wife, Hayley, will be practicing family medicine at OSF St. Luke's Clinic, Kewanee, Illinois. They had their first child, a daughter, Ayla Mae, this summer.



Timothy Ratliff, DO

Tim is doing a Primary Care Sports Medicine Fellowship at the University of Arkansas. After he completes his training, he plans to practice in Phoenix, Arizona.



Drew Satterfield, DO

Drew and his wife, Emily, are moving back to southeast Missouri, where Drew will practice at Southeast Health and see patients in Cape Girardeau and Dexter.



James Tucker, DO

James, his wife, Bobbi Jo, and children, Azariah, Alice, William and Breck, are moving to Hannibal, Missouri, where he will practice at Hannibal Region Medical Group.

A NEW CLASS OF FAMILY MEDICINE RESIDENTS

WE ARE PLEASED TO PRESENT OUR FIRST-YEAR AND INTEGRATED RESIDENTS

RESIDENT

PICTURED LEFT TO RIGHT

MEDICAL SCHOOL

ROW 1	Laquita Brown, MD	Loyola University
	Miles Crowley, MD	University of Kansas-Kansas City
	Alyssa Emery, MD	University of Illinois
	Savannah Ericksen, DO	AT Still University-Kirksville, MO
ROW 2	Alexander Finck, MD	University of Missouri
	Rose Glastetter, DO	AT Still University-Kirksville, MO
	Kyle Hadden, MD	University of Illinois
	Ethan Jaeger, DO	AT Still University-Kirksville, MO
ROW 3	Colin McDonald, MD	University of Missouri
	Matthew Roehrs, DO	AT Still University-Kirksville, MO
	Jessica Snyder, MD	University of Missouri
	Zachary Treat, MD	University of Missouri



INTEGRATED RESIDENTS:

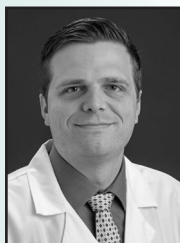
FOURTH-YEAR MU MEDICAL STUDENTS ... PICTURED LEFT TO RIGHT

Cody Holmes
Brea Lombardo
Marc Propst



CONGRATULATIONS TO TAYLOR CORDONNIER, MD 2018 HOSPICE AND PALLIATIVE MEDICINE FELLOW

Taylor, who earned his medical degree from Ross University and completed his internal medicine residency at Brookdale Hospital in Brooklyn, NY, is moving to Fort Myers, FL, to serve as associate medical director at Hope Hospice.



WELCOME TO ABDUL HANNAN, MD 2019 HOSPICE AND PALLIATIVE MEDICINE FELLOW

Abdul, who earned his MD from King Edward Medical University, Pakistan, just completed his internal medicine residency at East Tennessee State University, Johnson City. He and his wife, Sadia, have two children, son Aayan, 8, and daughter Rameen, 6.



CONGRATULATIONS TO AMELIA FRANK, MD, MSPH 2018 ACADEMIC PRIMARY CARE FELLOW

Amelia is joining our faculty and will practice at South Providence Family Medicine. Amelia, her husband, Bryan, and dog, Frankie, are excited to stay in mid-Missouri and make Columbia their home.

CONGRATULATIONS TO ALICIA LUDDEN-SCHLATTER, MD, MSPH 2018 ACADEMIC PRIMARY CARE FELLOW

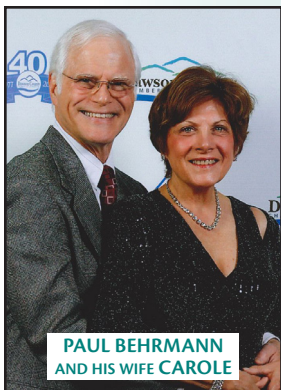
Alicia is joining our faculty and will practice at South Providence Family Medicine. Alicia and her husband, Nate, are the proud parents of their first baby, daughter Avery, born earlier this summer.



MU FAMILY MEDICINE GRADUATES:

Alums not included in our 2018 ASK FOR ADVICE (pgs 6-17)

Reginald Dusing, MD.....	1978 RESIDENT
George Carr, MD	1988 RESIDENT
Ellen McQuie, MD	1988 RESIDENT
Andrew Nelson, MD.....	1988 RESIDENT
David Ringdahl, MD.....	1988 RESIDENT
Caroliese Schmidt, MD	1988 RESIDENT
Joseph Valley, MD.....	1988 RESIDENT
Jim Elam, MD	1998 RESIDENT
Scott Kimber, MD	1998 RESIDENT
Mark Schabbing, MD	1998 RESIDENT
Jana Brock, MD	2008 RESIDENT
Scott Dudley, DO.....	2008 RESIDENT
Eugene Freund Jr., MD, MSPH.....	1988 FELLOW
Eva Rabuy Del Rosario, MD	2008 FELLOW



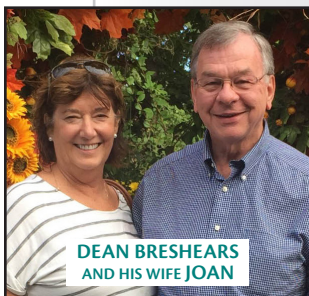
PAUL BEHRMANN
AND HIS WIFE CAROLE

“Find a location and a community that you think would be a great place for you and your family to live for a long time. The rewards of having long-lasting relationships with your patients are invaluable. Choose a work situation attentive to helping you avoid physician burnout.”

Paul Behrmann, MD
RESIDENCY CLASS OF **1978**

DR. BEHRMANN: “I’ve just completed 40 years of family medicine practice in the same community I moved to when I finished residency in 1978 – Dawson County, GA – where

the Appalachia Trail begins in the southern United States. I am retiring on October 1 and will continue living here. In retirement, I plan to join the Friends of the Trail volunteers who help maintain the Appalachia Trail, and I will volunteer at the Good Shepherd free medical clinic in our community.”



DEAN BRESHEARS
AND HIS WIFE JOAN

“Be sure to find your niche, so going to work is enjoyable. You will be happiest if you keep your priorities: God first, family second and work third. Delving into the social/family histories of your patients will always improve the rapport and overall value of your care. Let Dave Ramsey rule your finances.”

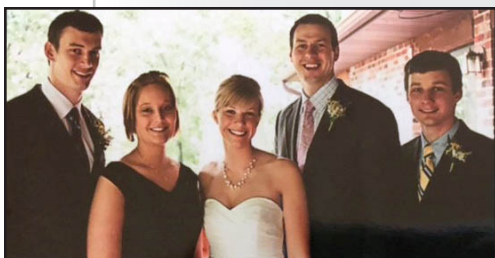
Dean Breshears, MD
RESIDENCY CLASS OF **1978**

DR. BRESHEARS: “For the past four years, I’ve been working full-time in urgent care. After residency, I practiced family medicine four years and then did emergency medicine in Jefferson City, MO, for 32 years.

Outside of work, my activities are focused on family. My wife of 38 years, Joan, and I have five children (who are all married and make us proud): Jamie is an accountant in Dallas; Jonathan is a neurosurgery resident at UCSF; Matthew is an engineer in Columbia, MO; Sarah Beth is a nurse in Kansas City, and Rachel is an engineer at the Callaway Power Plant, near Fulton, MO. And we have three grandsons: Luke, Casen and Ira.

We travel some, but spend most of our free time on our 240-acre cattle farm in Fulton ... a great stress reliever for me.”

DEAN BRESHEARS CHILDREN AND GRANDCHILDREN



“ 1. Go for walks and talks with your partner. It strengthens the relationship. Seriously.

2. Listen more. I’ve reflected a lot on ways I was a good physician and on ways I was not. These people, your patients, have stories. In my writer’s groups I’ve learned that there’s a novel to be found in every person’s life if we listen to them deeply. As a patient, increasingly, I’ve learned that physicians tend to ‘process’ patients and tend to not understand what motivates them to come in. We are trained to be efficient; we are not trained to be particularly understanding or curious. As such, we miss a lot.

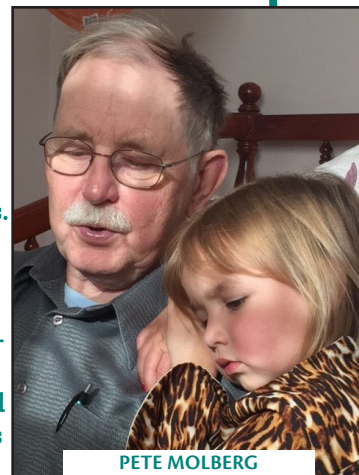
3. Don’t worry about the money. Just do the old-fashioned thing: live within your means and save. Compared to almost everyone else, you are wealthy.

4. When you get tired and cranky, think about changing what you are doing as a physician. When I moved from private practice to CDC, then to teaching, then to the Foreign Service, I got re-energized each time. My crankiness lifted, and I began to look forward to going to work each day again. There are options out there for those of you who feel like you are on a treadmill. In spite of how you might feel, you are NEVER trapped!”

Pete Molberg, MD
RESIDENCY CLASS OF **1978**

DR. MOLBERG: “The final decade of my career was with the US Dept of State Foreign Service, working in a variety of countries across the globe. It was a fascinating and exciting experience. Since the Foreign Service has a policy of mandatory retirement at age 65, I retired five years ago, feeling uninspired to re-enter the ‘business’ of US medicine.

I now live close to my daughter in the DC area and spend time being grandpa to granddaughters, ages 1 and 5. Nazeema and I are both healthy and happy. We take a one-hour walk each day and spend a fair amount of time with the kids. I participate in a writer’s group and a book club, and I take adult ed classes. We feel very lucky.”



PETE MOLBERG
AND HIS GRANDDAUGHTER

“Recognize that your graduation doesn’t end the hard work ... as Winston Churchill once observed, it rather represents the ‘end of the beginning’ of your professional development. Now comes the hard part: Independent practice and assuming personal responsibility for your continuing growth as a physician.

However, be sure to do something you enjoy every day: play with your kids, read something other than a medical journal, write a real letter to a friend.

Participate in medicine’s professional organizations; they sorely need the leadership and perspectives you can provide as a well-trained family physician.

Be willing to teach the next generation of family doctors; our undergraduate and graduate training programs desperately need your service.

Be willing to accept modest incomes in order to spend more time with those whom you love.

And, as Bob and Ray used to say on their old radio show, ‘write if you get work!’”

Mike Hagen, MD
RESIDENCY CLASS OF 1978

DR. HAGEN: “I retired January 2018 from my position as senior vice president of the ABFM, a role I served since 2007. I continue to serve as a part-time professor at University of Kentucky Family and Community Medicine and still precept on an as-needed basis.

I now spend most of my time gardening, reading, working on my 120-acre farm, hunting, fishing and doing ham radio. We have two grandkids in Cleveland, so I try to get up there as often as possible.

I recently started reading for the Radio Eye (radioeye.org), a voluntary audio broadcasting service that provides daily on-air readings of local newspapers, magazines, books and short stories for sightless individuals throughout Kentucky.

I also remain active with the American Chestnut Foundation’s efforts to restore the American chestnut to its native range (read about the greatest ecological disaster of the 20th century that most people have never heard of at acf.org.)

I also continue service on the AHRQ Health Information Technology Research study section, and the Clinical Informatics Examination Committee of the American Board of Preventive Medicine.

Amazingly, every day with a little of this and little of that, all of a sudden it’s bedtime!”



MIKE HAGEN FAMILY



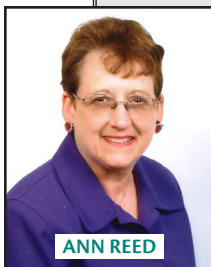
RICH ROSEN FAMILY

- “
1. Take time for family and friends.
 2. Laugh.
 3. Exercise regularly.
 4. Eat a good diet – less carbs, less sugar.
 5. Get enough sleep.
 6. Don’t be a slave to your smart phone.
 7. Read. My favorite books include: *The Kite Runner*, *Cutting for Stone*, *Mountains Beyond Mountains*, *The Water is Wide*, *The Woman in White*, *Pride and Prejudice*, *Born a Crime: Stories from a South African Childhood*, *The Nightingale*, *Into Thin Air: A Personal Account of the Mt. Everest Disaster*, *Being Mortal: Medicine and What Matters in the End*, *Calypso*, *Where the Sidewalk Ends*, *When Breath Becomes Air*.
 8. Really listen to what your patient tells you. What are your patient’s main concerns?
 9. If you are simultaneously talking to a patient and working on the EMR, look up frequently at your patient. Eye contact and body language are extremely important.
 10. Treat staff members with kindness and respect.
 11. A good medical assistant who works well with you is invaluable.
 12. Don’t be afraid to ask for help from family members, colleagues, other co-workers or counselors.
 13. Start saving for retirement now.
 14. If you have children, start saving for college early.
 15. Be sure to do estate planning.
 16. Work with a good financial planner re: investments, taxes, retirement planning.
 17. Don’t worry about certification for the American Board of Family Medicine. After all, you have completed your residency at the University of Missouri!”

Rich Rosen, MD
RESIDENCY CLASS OF 1978

DR. ROSEN: “I worked for 16 years in a group practice in Amherst, MA. I then worked four years at a community health clinic that served an indigent population in Holyoke, MA. After that, I worked at University of Massachusetts Health Services for 19 years, seeing faculty, staff and students.

I retired from UMass one year ago and have been working about 10 hours/week as medical director of a hospice in Amherst. I am really enjoying semi-retirement.”



ANN REED

“Love and spend time with your family. Life is short.

Always do your best for your patients. It’s important to listen to them as they will usually tell you what is wrong.

Trust yourself and your judgement. Technology is helpful, but sometimes your gut feeling may be right, even if it disagrees with lab evidence.

Remember that being seriously ill is frightening for patients, and most patients feel overwhelmed by the health system. You can help just by being there for them.

If your diagnosis is wrong, but your patients know you care about them, most will be forgiving.

Keep a sense of humor; be willing to laugh at yourself.”

Ann Reed, MD

RESIDENCY CLASS OF 1978

DR. REED: “I retired in January 2016, after working 19 years at the Texas A&M Student Health Center. I’ve been doing volunteer work, including bringing communion to elderly folks in an assisted-living center. I joined a book club, belong to a Bible study group and sing in the church choir.

I meet my five sisters and their families for celebrations regularly. Last year I had surgery for cervical and lumbar stenosis and have since recovered. I continue to look ahead to new challenges and plan to tour the Holy Land later this year.”

“The only constant is change. Never lose your flexibility. Never stop learning. Keep a firm grip on the joy found in serving others.”

Jim Turner, MD

RESIDENCY CLASS OF 1978

DR. TURNER: “After three years on the faculty at ole Mizzou, I left the comfortable confines of academia for the real world of private practice. For the next 30 years, Tim, Kim and Jim continued in a family medicine practice, Washington, MO, that grew from three to a multispecialty group of 90. In 2012, the group was sold to Mercy health system, and since that time I’ve enjoyed a slower pace as a full-time family physician caring for the same patient population I’ve served for the past 37 years. The absence of administrative responsibility has come as a pleasant change.

My wife and best friend, Michelle, and I remain adrenaline junkies and enjoy traveling and visiting our three children and our three grandchildren. We’ve been blessed to remain remarkably healthy, and I haven’t found the offramp to retirement yet. It occasionally appears in the high beams, but so far I’m having too much fun to stop.”



JIM TURNER
AND HIS WIFE MICHELLE



ABBE SUDVARG IN HONDURAS

“Keep following your passion! Don’t let the regulatory, financial, electronic demands of health care get in the way of the joys of caring for patients.

Keep learning. I finished medical school in 1985 – so much of the learned methods and ‘expert opinion’ of my education are now irrelevant (or just

plain wrong). Don’t allow yourself to become obsolete.”

Abbe Sudvarg, MD

RESIDENCY CLASS OF 1988

DR. SUDVARG: “I’m still doing the full scope of family medicine, both inpatient and outpatient. I deliver babies; I round on adults and pediatrics, and I have an outpatient clinical practice that spans the life spectrum – including some families of four generations – at Family Care Health Center, a federally qualified health clinic in St. Louis, MO.

I’m a teacher of family medicine – both with medical students and residents. I’m also the leader of a medical mission team that serves two remote, mountain communities in Honduras – I will be making my eighth trip to these villages in July.”

“I feel so grateful for the broad and deep background we received as family docs. Being a family physician allows you to respond to the needs of the community that you serve, and to the epidemics of your time. Our cohort has seen epidemics of excess deaths due to HIV and opioid overdoses – we can look forward to how family physicians will respond to future epidemics and community needs. Good luck!”

Tom Huggett, MD

RESIDENCY CLASS OF 1988

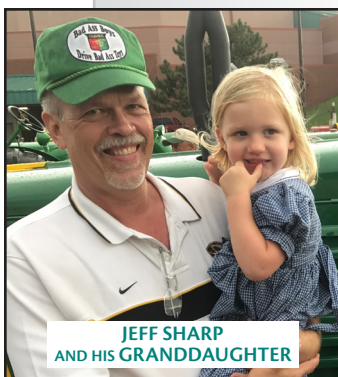
DR. HUGGETT: “I’m still working on the west side of Chicago.

After 19 years at one health center, I moved to Lawndale Christian Health Center four years ago. I continue to work with a great team serving folks in clinic and at homeless shelters. And for the last two years, I’ve been more involved with Medication Assisted Treatment, prescribing buprenorphine to those battling addiction to heroin. I continue to see infants to seniors (no OB or hospital, though), and I have a sizeable number of HIV and Hep C patients in my panel.

I joined legions of Cubs fans in celebrating our 2016 World Series victory!”



TOM HUGGETT



JEFF SHARP
AND HIS GRANDDAUGHTER

“Seriously consider a blend of outpatient and inpatient medicine. I practiced OB for four years but felt like it compromised my family life too much. I enjoy attending patients at the hospital, and I think my patients appreciate seeing a familiar face while they are there. Inpatient medicine keeps my acute care skills sharp, and interactions with colleges is always educational. I think time spent learning OB would be better

spent on subspecialty training.

Make sure you find adequate time with your spouse and children. Community service is very rewarding.”

Jeff Sharp, MD

RESIDENCY CLASS OF **1988**

DR. SHARP: “I’m finishing my 30th year at my original practice: Family Medicine Associates in Sedalia, MO. We had been in private/independent practice until May of this year, when we were acquired by the local hospital. Dr. Wilson retired from clinic last September but is working full-time in the hospital ER. Drs. Fredrickson, Wendt, Cahill, Allcorn and I are still attending at the hospital and doing the full scope of family medicine, other than OB. I also work a few days a month in the ER. My residency training prepared me well for practice in rural Missouri.

My wife, Michelle, and I have been married 33 years and have five daughters: Lauren, 30; Cristian, 26; Elena, 23; Lydia, 20, and Emma, 17. Three have graduated from college, and our two oldest girls are married. We have two grandchildren: Amelia, 4, and Clara, 17 months. Michelle works part-time as a nurse but is best described as an in-car mom and grandmother.

I enjoy bicycling, fly fishing, hobby farming, motorcycling and tractor pulling.

Probably my greatest personal satisfaction has come from my service on the Sedalia 200 School Board. I’ve already served 18 years and was just re-elected to another three-year term. I’ve been board president the last nine years. Originally, I ran because our schools were overcrowded, and our high school was very old, built in 1924. We opened a new high school in 2010, and we added 12 elementary classrooms. We’ve subsequently built a new stadium and completed a \$5 million addition to the high school. Student population has grown from 4,800 to 5,500 in 10 years.”

“Taking care of patients is a privilege that we should not take for granted. Enjoy the practice of medicine and find balance between the time you spend inside and outside of medicine. Family and God will give you the support to enjoy life and medicine.”

Jeff Piontek, MD

RESIDENCY CLASS OF **1988**

DR. PIONTEK: “I’ve practiced with St Mary’s Health, Jefferson City, doing family medicine and hospital care, until five years ago when I went strictly outpatient care.

Jone and I have lived in Jefferson City since 1989 and have four children: Jill, Maggie, John and Stephanie. We are excited about the birth of our first grandchild this summer.”

“If medicine isn’t really your passion, and you give up what you’ve found you love doing, it’s really hard to get back to that dream. Doing medicine is an incredible opportunity, but do your best to be sure it really calls to you. Once you enter the profession, it’s really difficult to leave.

Lou Sanner once told me he felt I was hiding my light under a basket. I often reflect on that, but I think all the light in the world isn’t helpful if you’re looking in the wrong room. Medicine has fed my family, but no matter how hard I’ve tried, it has never fed my soul. That said, I’m very grateful for all of you who taught me along the way. The residency’s heart was, and I suspect still is, in the right place.”

Carl Griesser, MD

RESIDENCY CLASS OF **1988**

DR. GRIESSER: “I’m working full-time urgent care at Medford Medical Clinic in southern Oregon. I did family medicine for a year after residency, then did emergency medicine in Arizona and later Ashland, OR. I stopped practicing medicine from 2002-11 and served as executive director for The ManKind Project, an international educational nonprofit that teaches integrity and emotional literacy to men around the globe. I reluctantly returned to medicine in 2011, working at a community health center before switching to urgent care.

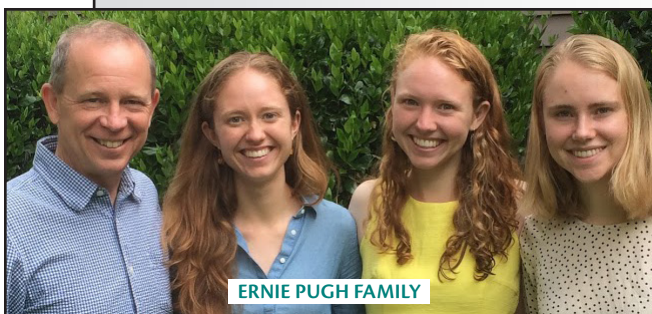
I’ve heard rumors that cutting back to half-time, or actually retiring, may be an option in a couple years, but so far, those rumors are unconfirmed. I married Linda Green a year ago and live on the edge of a beautiful canyon in Ashland, OR. I’m still passionate about skiing, canoeing and kayaking. My daughter Lia, who some of you remember we delivered at home while I was completing an OB rotation, is living in Albuquerque sorting out how to combine a fine arts degree with a passion for environmental activism and social justice.”



CARL GRIESSER FAMILY



JEFF PIONTEK FAMILY



ERNIE PUGH FAMILY

“Stop and let it sink in, when patients express their gratitude; and be content with a very average income.”

Ernie Pugh, MD
RESIDENCY CLASS OF **1988**

DR. PUGH: “Life is great in my family medicine world. Year 13 in my two-doctor group, and 27th year in Charlottesville, VA. I still like coming to work, but at 60, I am enjoying a few more vacations away, too.

My youngest daughter finished at UVA, and is working in her field (YES!). My older two are in medical school, so I hope they can team up to take good care of me into my dementia years!”

“Do what you love. Medicine is a passion for all of us, but finding your niche may take some additional time and effort. Don’t be afraid to explore new paths and ways to use your skills to leverage the things you love most about your career and life. Sometimes an avocation can become part of your vocation, increasing your career satisfaction. Also, make time for your family, especially when your children are young. Don’t let pressure to see more patients or work longer hours rob you of that time – it really does go by quickly!”

Jason Mitchell, MD
RESIDENCY CLASS OF **1998**

DR. MITCHELL: “I practiced family medicine for nine years with SSM Health Medical Group in St. Charles, MO. During that time, I developed a keen interest in health information technology and health informatics. In 2007, I became assistant director of the American Academy of Family Physicians’ Center for Health Information Technology and became director in 2012. In 2014, I joined Cerner Corporation where I serve as a senior physician executive, working with physicians across the country to help optimize their use of health information technology and improve workflows.

I earned a master’s degree in health informatics from MU in 2015. I enjoy traveling, camping, hiking and kayaking with my family, as well as computer programming and writing and playing music.

My wife, Connie, a freelance writer, and I live in Lee’s Summit, MO. Sons, Christopher and Andrew, are MU students majoring in computer science and chemistry, respectively.”



JASON MITCHELL FAMILY

“Of the three key elements of motivation, I increasingly think that purpose is the heart of it. Forming and nurturing relationships to help achieved shared purpose is a skill that good physicians hone. Defining and holding on to purpose is hard,

and even harder when our work is filled with low-value burden. It is tempting to let go of purpose; to become callous. That is the core of burnout and, because of it, I see health care professionals willing to give away the authority and accountability that being a professional requires.

I encourage new family medicine graduates to think hard about what drew them to medicine and what they value in practicing it. I hope you will include ability to pursue purpose in addition to income and lifestyle as you make career choices. Purpose is key to my own quality of life and hatched many interesting friendships and adventures.”

Bob Phillips, MD, MSPH
RESIDENCY CLASS OF **1998**

DR. PHILLIPS: “I spent the last five years with the ABFM launching a national primary care registry and developing better measures of primary care. Thanks to generous support from the ABFM Foundation, I will next be launching the Center for Professionalism and Value in Health Care. Since helping formulate the role definition of a family physician with colleagues around the country (and foil definition), and based on research on physician burnout, I’ve grown increasingly concerned about erosion of professionalism and its impact on clinicians and patients.

I still see patients in a community-based residency program, which is respite from the work of trying to raise understanding of the value of primary care in policy circles. The relationships there are tremendously satisfying.

Kathy and I just celebrated our 28th anniversary and have enjoyed the last 18 years in northern Virginia. We continue to try to think purposefully about next adventures. We have one child in college, one preparing for college in a year, and one looking forward to 5th grade.”



BOB PHILLIPS FAMILY



“In an era when we are often told to follow our passion, I have come more often to appreciate the times in my life when I did not make it all about me. Life offers us many surprises and opportunities to serve others, and those moments, at least to me, have turned out to be the most gratifying and heartening.”

I encourage people to, of course, pursue what interests them, but to also be open to the challenges offered by others. Supporting a family member or spouse, backing a student project, or tackling a nagging community problem, even if you are not sure where it will lead, might present you with insights, experiences and rewards you might never have imagined.”

Greg Schneider, MD
RESIDENCY CLASS OF **1998**

DR. SCHNEIDER: “After a wandering journey that has included work at a community health center, practicing student health, teaching college literature and philosophy, and even film school, I have now returned to academic medicine. In 2016, my wife, Arcelia, and I moved to Miami, FL, where she is in law school, headed to a career in public interest law.

I, meanwhile, work at Florida International University, as a faculty member in the Department of Humanities, Health, and Society. All of our core faculty do weekly home visits in underserved communities, and I practice primary care on a mobile health clinic for the uninsured. As course director for a class called *Foundations for the Community Engaged Physician*, I introduce students to the social determinants of health and to strategies for treating underserved and vulnerable populations.

Ending up here has been extremely rewarding and eye opening (and helped my Spanish tremendously). After living 10 years in Santa Fe, NM, I’ve had to adjust to the flatness of Florida, but I’ve enjoyed replacing my skis with bikes and kayaks. Arcelia and I (and our neurotic dog, Ella) are happy to host anyone interested in grabbing a Cuban coffee along the beach.”

“Learn how to develop a good work/personal life balance. If you completely dive into your job when you’re starting your practice, it will be easy for you to feel overloaded at work, with little time left for your personal life. It is better for you to develop work/life balance from the beginning of your career.”

Scott Griswold, MD
RESIDENCY CLASS OF **1998**

DR. GRISWOLD: “I continue to practice in Eldon, MO, where I started after finishing my residency training.

My wife, Michele, has worked five years as a healthy community coordinator for Capital Region Medical Center; her job is funded through a grant from the Missouri Foundation for Health and designed to prevent childhood obesity in Eldon. Michele and I enjoy spending time with family and traveling.

Both of our children have graduated from college. Our son, Trever, is married and works for Veterans United, Columbia, MO. His wife, Rachel, is a pharmacist for HyVee in Columbia. Emery, our daughter, begins her job as a speech language pathologist for Fulton public schools this fall. Her fiancé, Cody, is a cattle farmer; they are getting married next summer.”



SCOTT GRISWOLD FAMILY



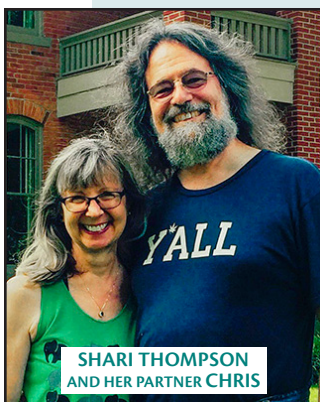
JENNIFER KOENIG FAMILY

“One of the good things about family medicine is that it lends itself to many paths and destinations. Choose work that is fulfilling and enjoyable for you, and be open to change, if the job you have doesn’t bring you joy. Most important, make time for yourself and your family!”

Jennifer Hetrick Koenig, MD
RESIDENCY CLASS OF **1998**

DR. KOENIG: “My husband, Clint, enjoys his role as medical director for the Ohio Department of Health. We live in Worthington, OH, with our daughters Ellie, 14, and Alex, 13.

For the past few years, I’ve been medical director of a private urgent care. Our clinic was just taken over by a corporate health system, so I’m exploring new employment options. I’ve gotten several job offers, but what I’d like to do most is open an independent family medicine practice, with a focus on culinary and lifestyle medicine. Life circumstances may make it more important for me to be an employee, which is why I’m still undecided. Never thought at this age that I’d be trying to figure out what I want to be when I grow up!”

SHARI THOMPSON
AND HER PARTNER CHRIS

“Life is a great adventure! We work hard and struggle with many frustrations as family docs, yet being able to connect face-to-face with people and hear their stories and hold space for them is such a blessing. The things I’ve learned in my work and from my patients have helped me live my life with more appreciation and empathy, and helped me develop better communication and relationship skills.

You can do anything you set your mind to do. Life is a precious gift so

make good use of it. I recommend regular vacations and traveling to new places. Exercise keeps you feeling good and dealing much better with a demanding job and stressful life.

Most importantly, prioritize the people you love and who are there supporting you, primarily your spouse and your children. In the grand scheme of things, faith will carry you through anything.”

Shari Thompson, MD

RESIDENCY CLASS OF **1998**

DR. THOMPSON: “Since last November, I’ve been employed at Katy Trail Community Health in Marshall, MO, a federally funded health care facility. I came to Marshall in 1998, right out of residency and did OB, hospital medicine and a clinical practice for the first six years, then stopped doing OB. When hospitalists were hired at Fitzgibbon, I transitioned to clinic medicine only. I left my practice to care for my husband at home who died in 2016. I worked 18 months doing long-term care only, as a traveling doctor, then transitioned to Katy Trail.

I feel fortunate to have built my practice over time and get to know my patients well. Many of them feel like family to me. I’ve also enjoyed working with medical students and appreciate the opportunities I’ve had to help them learn and succeed.

Personally, I’ve seen many transitions and much growth. I started painting in 2013 and connected with my love of art. I do art workshops called *Intentional Creativity*, a process that combines creative expression and mindfulness to promote healing. I’m writing a book, *Caring for my Commander*, which is about caring for my husband and the struggles, gifts and insights I experienced during his illness. I live in an old plantation with my new partner, Chris, and we have fun and laugh every day.”

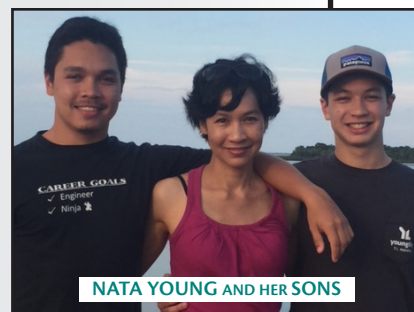
“So many opportunities abound in family medicine, despite all the changes and big data and EHRs, when you take it back to the relationships, it’s a joy to do what we do.”

Nata Young, MD

RESIDENCY CLASS OF **1998**

DR. YOUNG: “I am still on faculty at AnMed Health Family Medicine Residency in Anderson, SC. I still teach full spectrum family medicine, and I love it! I have also learned acupuncture and am starting to learn POCUS.

My sons are doing wonderfully! Joe, 22, is about to graduate from Embry-Riddle Aeronautical University. He will be joining the Navy after graduation to fulfill his ROTC commitment and hopes to fly. Ben, 20, attends Clemson University. He is pursuing a biochemistry degree and hopes to apply to medical school.”



NATA YOUNG AND HER SONS

“Avoid controlled substance prescriptions as much as possible. Although it’s rewarding to help crippled people to continue functioning, there is much abuse. Having to renew the darned scripts every month becomes a huge burden and takes away from the enjoyment of the practice of medicine.”

John Sears, MD

RESIDENCY CLASS OF **1998**

DR. SEARS: “I’m now working ¾ time in Winslow, AZ. At 67, I continue to enjoy my contact with patients who have known me more than 12 years in Winslow. I still see a few who came to me in Tuba City, where I practiced after residency.

My wife of nearly 42 years, Judy, went to Heaven in March, after a short illness. My oldest granddaughter, Lacey, has moved in with me and is preparing to enter nursing school.”



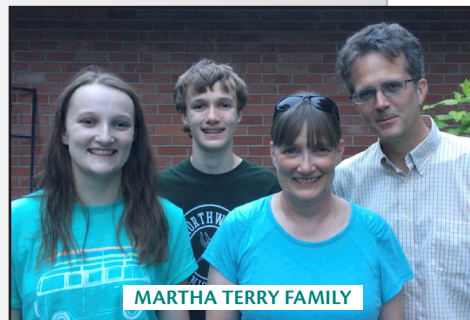
JOHN SEARS

“Make time for your family, and also for yourself. Exercise regularly. Seek out new interests and ideas. Read. Volunteer in your community. Stay connected to family and friends. Look for the sources of joy in your work. Most importantly – don’t wait until ‘tomorrow’ to get started!”

Martha Terry, MD

RESIDENCY CLASS OF **1998**

DR. TERRY: “I live in Iowa City, IA, with my husband, Mike Ohl, an infectious disease physician and researcher, and our children, Aidan (9th grade) and Madeline (12th grade). I’ve taken time off from practice but expect to return to work in the future. For now, I’m staying busy with lots of volunteering, playing in an orchestra, keeping bees, birdwatching and other projects.”



MARTHA TERRY FAMILY



DENISE BARBA-BASILAN FAMILY

- “ 1. Find out what truly matters to you, what your priorities are.
2. Learn to deal with patients, especially the ‘difficult’ ones, with grace and humility.
3. LISTEN to what your patients are saying ... and what they aren’t saying.
4. Work efficiently.
5. The first few years of practice after residency, you might feel like a fraud – this is normal. Pick a mentor; ask questions; learn from your patients and your colleagues.
6. Take care of yourself.”

Denise Barba-Basilan, MD

RESIDENCY CLASS OF 2008

DR. BARBA-BASILAN: “After residency, I worked three years at the Family Health Center in Columbia; then we moved to Salem, OR, where my husband, Richard, accepted a job.

Initially I intended to stay at home with Naya and Joaquin (at that time, 4 and 2 years old) for a few months while we got settled. Well, life had other plans, because we had Noah shortly after we moved, and lo and behold, I’ve been a stay-at-home mom since then. I’m currently preparing to return to outpatient medicine in Oregon next year. I am both excited and terrified!

We love traveling, especially to the Philippines, to visit family and friends. Our favorite place is the beach!”



MYRA AGUIRRE-CARLOS FAMILY

“Always strive for a good balance with work and personal life.”

Myra Aguirre-Carlos, MD

RESIDENCY CLASS OF 2008

DR. AGUIRRE-CARLOS: “Ten years have really gone by quickly!

After residency, my family went back to California to be close to our relatives. I’ve been working with the same multispecialty group based in San Bernardino, CA, for the past 10 years. For the first eight years, I’ve been one of the primary care providers (FP without OB) at a satellite

clinic; last year I began practicing at our main clinic. I admit that building the practice was very challenging during the first few years. I now see a good mix of younger working families with managed care insurance, and I see older Medicare patients.

There has not been a day since I completed residency that I’ve not been grateful to MU Family Medicine for preparing me well and giving me the opportunity to take care of people.”

“Enjoy the journey. Be thoughtful, kind and humble. If (or really when) you feel burned out, remember that family medicine is versatile. Use your many skills to figure out how to change things up to diversify your days.

Find your community – the partners, colleagues, and friends who can help you re-set.

I hope each of you finds the joy I have in the humbling and gratifying experience of bearing witness to patients (even generations) facing unthinkable joys and sorrows with grace and strength. What an amazing honor and gift!”

Elizabeth Keegan-Garrett, MD

RESIDENCY CLASS OF 2008

DR. KEEGAN-GARRETT: “I’ve been working at Family Care Health Center, a federally qualified health center in St. Louis, MO, since I graduated from residency. I am grateful that I found my work ‘home’ right away and have spent the last 10 years continuing my growing and learning here.

In March 2017, I joined the St. Louis University Family Medicine faculty and now function as the clinical director for the residency’s continuity clinic at Family Care. Being a teacher-healer is a great gig!

As I write this, my husband, Kelly, and I are headed to Italy!! He runs a charter school system in St. Louis city, and together we try to capture as many wonderful moments as we are able with Silas (age 13) and Sam (age 9) whom we couldn’t love more.”



ELIZABETH KEEGAN-GARRETT FAMILY



JANICE LEGASPI FAMILY

“In 2017, I was diagnosed with breast cancer. This experience reinforced what I’ve always believed, which is that our time here is limited, so we need to always focus on what is most important and what will make the most difference in eternity. I believe the most important thing in my life is my relationship with God, and this trickles

down and affects my other relationships and also the way I work. My advice is to remember what is central in your life and live for that. Psalm 90:12 ‘Teach us to number our days that we may gain a heart of wisdom.’”

Janice Legaspi, MD
RESIDENCY CLASS OF **2008**

DR. LEGASPI: “After training at MU and working a few years in Quincy, MA, we decided to go back to the Philippines (where we are originally from) in 2012. Today, I am practicing part-time, mainly private geriatric medicine. There are less than 200 geriatricians in our country of more than five million seniors. I see patients in the outpatient setting and occasionally get inpatient referrals. I do a lot of home and nursing home visits.

I am also homeschooling my two boys (Kael, 8, and Lean, 3) and trying to be a supportive wife to my artist husband, Eric.”



NEHA MAHESHWARI
AND HER HUSBAND PANKAJ CHOPRA

“Life is beautiful. There will be ups and downs, but just go at it. We all are hard-working and persistent people; that’s why we are where we are. Just be humble and thankful and take life with grace. Humbleness is the key in the practice of medicine. If you be humble, you will be fine.”

Neha Maheshwari, MD
RESIDENCY CLASS OF **2008**

DR. MAHESHWARI: “My husband, Pankaj Chopra, and I are proud

owners of two primary care/urgent care combo clinics here in Arizona. Also we have been teaching family medicine to multiple medical students, physician assistant students and nurse practitioner students.

We have two children who were both born during our residency. They are ages 12 and 10 now, preteens.

The journey in life has been amazing these past 10 years. Thanks to our residency program for shaping us into better people and better professionals. You don’t realize it when you are a resident; it is only after you graduate and have been out 10 years that you can look back and realize the incredible importance of your family medicine residency experience.”

“Try and get out of debt ASAP; live like a resident for at least a few years after residency. I would recommend everyone read this book, *Poor Charles Almanack*. It has helped me with my decision-making in practice and in life.”

Paresh Ghodge, MD
RESIDENCY CLASS OF **2008**

DR. GHODGE: “I’m working in an outpatient setting, 100 percent sports medicine, in Minneapolis, MN. I got married last year. I like to stay fit doing a variety of activities that include running, biking, volleyball and cross-country skiing.”



PARESH GHODGE
AND HIS WIFE GJENIFER

“Your practice should make you happy. There are a lot of hard things about medicine, and a lot of stuff that isn’t fun. However, the balance sheet at the end of the day needs to have more positives than negatives. So if you find yourself in the negative, do something about it!

Don’t be afraid to change jobs or to ask for changes at your current job. Try new things, consider practice situations you haven’t before, and just be flexible until you find a situation that you consider personally and professionally rewarding.”

Jamie Ogden, MD
RESIDENCY CLASS OF **2008**

DR. OGDEN: “I’m back in Columbia, MO. After residency I moved to southwest Missouri for about three years – but couldn’t resist the lure of Tiger football!

I currently practice at MU’s Smiley Lane Family Medicine clinic. My main responsibilities are outpatient medicine, but I have a small nursing home practice. I also have outpatient attending and teaching responsibilities for MU Family Medicine residents and MU medical students.

Jason, my husband, is a hospitalist with the VA here in Columbia, and we have a son, Calvin, who turns six and starts kindergarten in August.”



JAMIE OGDEN FAMILY



KYLIE VANNAMAN FAMILY

“Life is too short for mediocrity. Don’t settle.”

Kylie Vannaman, MD
RESIDENCY CLASS OF **2008**

DR. VANNAMAN: “After residency, I traveled with my young family and worked in New Zealand for 3.5 years before moving back to Kansas City in 2012. I then joined a hospital-owned primary care practice, but soon realized this was not going to be sustainable for me in the long run. After 20 months, I left with a

vague idea of what I’d like to do next.

During my one-year, non-compete, aka ‘sabbatical,’ I worked at a clinical research trial facility while planning the opening of my Direct Primary Care practice. With grace, luck and amazing support from my family and new partner, Dr. Haseeb Ahmed, we opened Health Suite 110 in Overland Park, KS, in 2015. We have grown from a two-physician practice to a three-physician, two-nurse practice and will be celebrating our 3rd anniversary this July. This change has allowed me to get back to the heart of family medicine and truly LOVE my work again.

I’m also happy to report that we welcomed a baby girl into our family in February 2016. Rehn Moxie is an absolute delight ... I can’t imagine our family without her.”

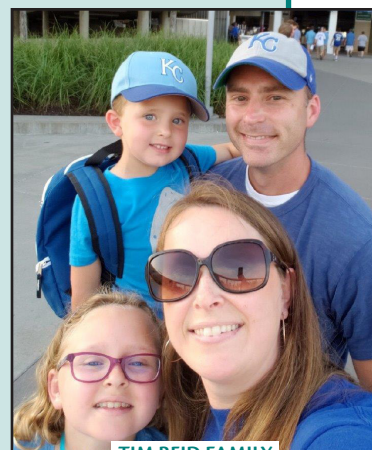
“My best advice is to cultivate and pursue interests outside of work because all work and no play is never healthy. Schedule time off to get away, but more importantly, schedule time with your family to enjoy them. At the end of our lives, very few people wished they had worked more.”

Tim Reid, MD
RESIDENCY CLASS OF **2008**

DR. REID: “Professionally, I continue to practice ‘old school’ rural family medicine doing inpatient, outpatient clinic, nursing home, and ER coverage in my hometown of Carrollton, MO.

Personally, I continue to be very happy that my wife, Gina, and children, Gwen and Gabe, tolerate me, and overjoyed that they enjoy spending time with me. We are preparing to build a house outside of town, with Kylie’s husband, Kipp, graciously being our architect.

I keep busy with three different gardens and various sport activities. Gina continues to run our home and our social time with friends and family, helping to keep us sane. Gwen, age 8, is preparing for 3rd grade and enjoying swim team this summer. Gabe, age 4, is prepping for a 2nd year of preschool and loves playing tee ball and antagonizing his sister.”



TIM REID FAMILY

“Never take for granted the tremendous privilege it is to be a family physician. I believe we receive more than we ever give as long as we are open to the lessons taught to us by our patients and their families and maintain our humility.

Take good care of yourself – caregivers need care and you are clearly one of those. Laugh often, surround yourself with good people who support and challenge you, and remember there are mentors and dementors out there. Avoid those people or situations that seem to suck the life out of you and make you feel like you will never be happy again. Choose to be with those people who care about you and your most deep and true values.”

Betsy Garrett, MD, MSPH
FELLOWSHIP CLASS OF **1988**

DR. GARRETT: “I have retired and no longer do clinical work here at MU Family and Community Medicine. I am an emerita professor and still involved in teaching medical students in the clerkship, and in interviewing basics. I get to be the champion for the MU original Legacy Teachers program, which is in its 14th year. It’s a really wonderful program, and we are slowly helping it spread to other medical schools across the country. Learn more by viewing a few short videos at <http://umhssomlegacyteach@health.missouri.edu>. Donations welcome!

I am becoming a more serious birder (birdwatching) with trips to Costa Rica, Ecuador, and planned trips to South Africa and Belize. I’m also on a steep learning curve as a hooker (rug hooking). Church, photography, Master Naturalists and several other organizations keep me busy. I also have aspirational goals to complete a history of the department and to fish.”



BETSY GARRETT

“Don’t sacrifice yourself for an institution. Institutions have no memory.’ Gerald Perkoff.”

Patty McGann, MD, MSPH
FELLOWSHIP CLASS OF **1988**

DR. MCGANN: “I’m currently retired and still living in Palo Alto, CA, where I practiced before retiring. Pursuing my interests in wildlife photography, with a focus on birds, has prompted me to do a fair amount of international travel. Most of my trips have been to national parks and rural areas where I can experience life in the country side and close contact with local naturalists. I must say this has been a ton of fun.”



PATTY MCGANN



LOU SANNER

“Stay aware of what you really enjoy doing professionally and do more of that! Stop typing for a minute and just hang out with your patients who are actually interesting people and not just problems to solve. Find great colleagues – including nurses and the rest of the team. Support each other. It’s a corporate mess that we all work for now in the chronically dysfunctional US health care system. Buddies matter a lot. Be a buddy. Advocate for real change. Be a ‘trouble maker.’ Everybody has a hard job – including your health care leaders who are, for the most part, way over their skis heading downhill fast. Remember that most of your patients have much harder jobs than you do. Let your experience of personal stress deepen your compassion for your patients. Don’t work too hard. We (our generation) did NOT fix the health care system. Now it is on you!”

Lou Sanner, MD, MSPH
FELLOWSHIP CLASS OF **1988**

DR. SANNER: “I have been on the faculty at the University of Wisconsin-Madison Family Medicine Residency since 1988, and have been in practice and teaching at our Northeast Family Medical Center since 1992. I continue to enjoy the wide range of what I do as I contemplate retiring. Mostly I’m trying to stop running things!

I continue to be full scope with OB and inpatient care, and do and teach OB ultrasound and ALSO in the US and abroad.

I’ve also been an RPS (Residency Program Solutions) consultant since 2001. See <https://www.aafp.org/medical-school-residency/rps.html>. I enjoy traveling the US, helping new residencies (particularly rural) get started and fixing old ones.

I’m also a rabble rouser in the GME Initiative trying to overthrow the way we fund and ‘direct’ (hah!) residency training in the US. See <https://www.gmeinitiative.org/>

I enjoy my 10 grandchildren very much and should spend more time with them before they get too old to want to spend time with me!”

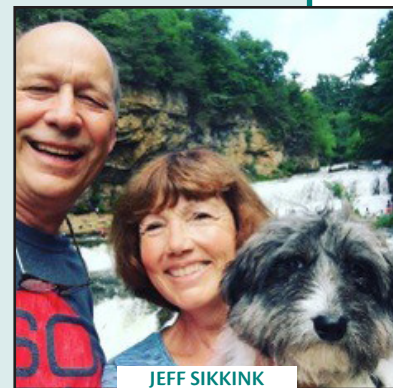


LOU SANNER GRANDCHILDREN

“Always keep an open mind when approaching any clinical problem. Help patients express what is really their concern without making assumptions. Try to stay away from the computer long enough to establish a real human relationship with your patient. Getting to know a patient personally is the most enjoyable aspect of my practice. Have a laugh with them if at all possible.”

Jeff Sikkink, MD, MSPH
FELLOWSHIP CLASS OF **1988**

DR. SIKKINK: “I’ve been working in Stillwater, MN, doing primary care with Stillwater Medical Group (now Health Partners) for the last 25+ years. I’m retiring from that job this year, but will transition to an urgent care position for a few years until I reach my full retirement age.”



JEFF SIKKINK
AND HIS WIFE DIANA

“I’ve come to enjoy the pleasure of the connection to the people I work with, teach and care for. In particular, the longitudinal relationships I have with my patients and co-workers are very important to me. Relish the opportunity physicians and teachers have in helping people on their journeys!”

Jim Stevermer, MD, MSPH
FELLOWSHIP CLASS OF **1998**

DR. STEVERMER: “I am professor of clinical family and community medicine and still practicing at Callaway Physicians in Fulton, MO. I am director of medical student education for the department, and medical director of the school’s rural track program. Consequently, I have the opportunity to teach undergraduate and medical students, as well as residents and fellows – I’m now learning the wherefores of online education!

My practice includes inpatient (but no longer at Callaway Community Hospital), outpatient, nursing home and hospice care. I am also enjoying my work on the AAFP’s Commission on Health of the Public and Science – my particular effort has been around preventive services and clinical policies.

My wife, Judy, has just taken a part-time job for the MO Department of Conservation in prairie conservation, working in seed collection around the area. Fern, our daughter, just finished her first year of a graduate degree in trombone performance; last year, she graduated from KU with a degree in music education.”



JIM STEVERMER FAMILY



BRIAN MAHAFFEY

“I have always told students and residents rotating with me to follow your passion within family medicine. Look for a niche and work hard to fill it. Put your patients first in your practice and build everything around their care. Enjoy what you do and always remember your family medicine foundation. There is no better training to be a great doctor.”

Brian Mahaffey, MD, MSPH
FELLOWSHIP CLASS OF **1998**

DR. MAHAFFEY: “20 years ... WOW!

Sandy and I have been living in St. Louis for four years now, after moving from Springfield, MO. Our daughters, Lauren and Samantha, have graduated from college and are doing well.

As medical director for Mercy Sports Medicine, I have helped build upon our success in Springfield to start a program here in St. Louis. I also serve as medical director for sports medicine throughout Mercy Health Systems, which extends from St. Louis to Oklahoma City. Our goal has been to implement a team approach at every location in the Mercy system. By using a family medicine approach to care – treating the whole person, we have seen great improvements in our overall outcomes.

After 16 years as head team physician for Missouri State University, I’m now a team physician for the St. Louis Cardinals and the coordinator of Major League Medical Services. This is my sixth year with the Cardinals.”

“Remember to always offer an exceptional patient experience in your practice. As our workload increases and reimbursements decrease, it’s easy to get caught up in the daily grind. Everyday on your way to work, try to put yourself in a positive frame of mind. If you are happy at work, you are likely to have happy staff. And if you and your staff are happy, patients will have good care experiences. Even though there are days when my mantra falls apart by 10:30 AM, I strive to start every morning with a positive attitude.”

Kristin Oliver, MD, MSPH
FELLOWSHIP CLASS OF **1998**

DR. OLIVER: “I am a physician partner at Bluetail Medical Group. We have offices in Chesterfield, MO, Columbia, MO, and Naples, FL. Alas ... I do not routinely staff the Naples office.

My sports medicine fellowship training at MU Family Medicine serves me well. Currently most of my clinical time is spent doing percutaneous orthobiologic injections for MSK injuries and disease. Our little office has become the busiest freestanding orthopedic regenerative medicine clinic in North America. I try to publish one to two articles a year on the subject.

On the homefront, I am married to Dr. Todd Oliver, an orthopedic surgeon at the Columbia Orthopedic Group. He has brought two amazing girls into my life, Erin (16) and Ava (14). I couldn’t be more blessed!”



KRISTIN OLIVER FAMILY



BJ SCHULTZ FAMILY

“Look people in the eye and see them. Discover and reveal who you are in giving yourself to them. Do this every day.”

BJ Schultz, MD, MSPH
FELLOWSHIP CLASS OF **2008**

DR. SCHULTZ: “After finishing fellowship in 2008, I was blessed with the opportunity to continue working with the great people who trained me. Half my time was spent at Columbia Orthopaedic Group (COG), and half at the Family Health Center, a federally qualified health clinic in Columbia, MO.

But life changed for me in 2017 when I responded to the call to do mission work; my first mission experience was in El Salvador. I’ve gone to other places since then and brought my family with me on some of these trips. Today, I spend most of my time at the Family Health Center, but I’ve resigned from COG in order to pursue mission opportunities. For me, mission work is important and incredibly rewarding.

Watching my children’s talents emerge and develop has been a wonderful experience. Sam (12) plays piano, swims, and is an outstanding problem solver with a sincere

personality of integrity. Joel (10) plays violin, swims, and is a skillful peacemaker with quick intuition. Leisel (7) draws, dances, and is full of light. My wife, Sue (young as ever) pours out her love, energy and intelligence into everyone around her.

My hero and most influential mentor is Jesus Christ. He said: ‘Freely you have received, freely give.’ This statement sums up my life and aspirations.”

the joys of family medicine:

CONTINUED FROM PAGE 1

"I've always known about the health benefits of breastfeeding and encouraged my patients to try it," says Dr. Calhoun. "But I didn't fully understand some of the challenges that breastfeeding moms face until years ago, when I was breastfeeding my own son. I had problems and didn't know where to go for help, so I quit earlier than I wanted to. This experience motivated me to learn more so I could be a better resource for my patients."

After completing 90 hours of coursework, 1,000 hours of hands-on training, and then passing the board exam, Dr. Calhoun earned certification as an International Lactation Consultant (IBCLC) early this year. This process was long and time-consuming, but Dr. Calhoun learned a lot and feels proud of her accomplishment.

"I found my niche. Breastfeeding medicine is rewarding and will always be part of my practice," she says. "In addition to discussing breastfeeding with my patients while they are still pregnant, I help moms and babies when I'm on OB call at the hospital. Plus moms who have a different primary care doctor come to see me at clinic specifically for breastfeeding help and advice. I think I might be the only outpatient

physician lactation consultant in town."

In 2015, Dr. Calhoun was the only family physician asked to serve on the committee charged with helping MU Health Care earn Baby-Friendly® designation from the World Health Organization and United Nations Children's Fund. Specialists across the health system, especially those from obstetrics and pediatrics, know about Dr. Calhoun's experience and commitment to breastfeeding medicine. That's why they recruited her to help in this project.

"The process was challenging and took years to complete. It required significant changes in policies, care and attitudes throughout the system," Dr. Calhoun says. "But we succeeded. Today, Women's and Children's Hospital is one of only 500 Baby-Friendly® designated facilities in the country. I continue to be involved in MU Health Care's efforts to maintain this designation."

Dr. Calhoun is also involved in research focused on breastfeeding medicine.

"Lots of moms have nipple pain caused by breastfeeding, and I want to find out which is better for treating it: lanolin or coconut oil. I could not get IRB institutional review board approval for my initial study, so I've decided to do survey research

instead," she says. "I've also reviewed the literature and plan to write the protocol for best induced lactation recommendations. I look forward to completing this and having it published in the *Academy of Breastfeeding Medicine*."

An always positive, always optimistic Dr. Calhoun looks forward to every day and her work as a researcher and teacher. But more than anything else, she values time spent caring, helping and hopefully making a difference for her patients.

Not long ago, Dr. Calhoun had a day that reminded her how very much she appreciates her role as family physician.

"One night I was at the hospital, holding the baby I had just delivered for a first-time mom. The next afternoon I was in clinic, taking care of a 100-year-old woman. The minute I walked out of that exam room, I knew why I loved my job so much," she says. "There's no other specialty in medicine that would offer me the same opportunities I have as a family physician. In less than 24 hours, I took care of two patients, one a newborn and the other a centennial, and both experiences were special. My job is amazing; I truly enjoy how different each day and every patient is!"

"Dr. Calhoun decided to become a lactation consultant so she could better serve her patients and other breastfeeding moms in our community. She worked hard to become a certified lactation consultant, while keeping a busy clinic schedule and being a mom, and since earning her IBCLC, her lactation practice has steadily grown. Now, not only does Dr. Calhoun see patients for breastfeeding consultations before and after delivery, she also helps moms who have low milk supply, moms who want to do tandem nursing, and moms who are not the biological mothers and want to induce lactation."

Dr. Calhoun is committed to educating and encouraging breastfeeding moms. Patients connect with her and benefit from her enthusiasm and support."

— Becky Weider, LPN, IBCLC

Becky, a lactation consultant at Smiley Lane Clinic, has worked with Dr. Calhoun for 10 years.

"At first, I was skeptical about breastfeeding because I didn't know if I'd have enough milk. Dr. Calhoun played a big role in my decision to give it a try. She is passionate about breastfeeding; every time she talks about it, her face lights up!"

It was complicated at first, but Dr. Calhoun was there for me, ready to help with every problem I experienced. Her coaching really made a difference. Within a couple weeks, I could tell that Giszel was growing. She was a happy baby, and I was a happy mom. Everything Dr. Calhoun told me about breastfeeding was right."

— Tiffany Johnson, 19

Tiffany, who has been Dr. Calhoun's patient since she was five, is taking online college courses and works at Woodhaven Learning Center. Dr. Calhoun delivered Tiffany's baby, Giszel, in May.

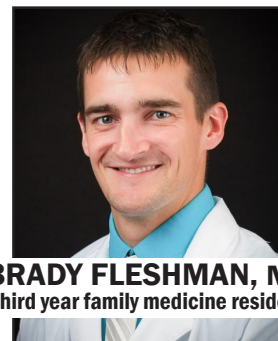


SARAH CALHOUN AND HER FAMILY

Sarah and Scott, general manager of Mercedes Benz in Columbia, have been married 16 years and have two children, Claire, 12, and Anders, 7. When Sarah's not working, she's having fun with her family!

MU FAMILY MEDICINE RESIDENT gains understanding, knowledge and skills from GLOBAL HEALTH EXPERIENCES

BRADY FLESHMAN, MD, along with seven MU medical students, one MU Medicine-Pediatrics Resident, and MU Family Medicine Associate Professor Jack Wells, MD, participated in an ASELSI-sponsored mission trip in Guatemala this spring. Brady describes his week in Guatemala as fantastic and rewarding.



BRADY FLESHMAN, MD
third year family medicine resident



Brady meets with ASELSI clinic staff

“MONDAY: On a typical day at the ASELSI clinic in Chichicastenango, physicians see more than 100 patients, providing them care and a 30-day supply of meds for a wide range of health problems. On this

day, however, our group decided to do something that had more long-term benefits for Chichi. We wanted to educate the nurses and other providers who worked at the ASELSI clinic about the most common and severe medical issues that occur in that area. We (each of the three physicians from Mizzou) taught about one of these health topics: pediatric diarrhea, pediatric pneumonia and dehydration. My topic was dehydration.

We tried to keep our presentations simple and provide a broad overview of the topic. After I finished my first teaching session, I was impressed by how educated and experienced the Chichi clinic staff was in treating dehydration. They were using triage approaches to care, had access to IV fluids, and were very aware of how to clinically assess mild, moderate or severe dehydration. They asked important and sometimes challenging questions. They wanted to talk to us about local herbal remedies and their lack of access to water. The nurses provided great feedback and appreciated these sessions.

TUESDAY AND WEDNESDAY: We

went to an outreach village approximately 60 minutes from Chichi. We set up our clinic at an elementary school, where we saw 125-150 patients



each day. The most common health problems we treated were gastritis/GERD, body pain and cough. One patient, a 10-year-old female, had an intense rash and excoriations on her arms and face, but nowhere else on her body. She truly looked miserable. Her mom told me that her daughter had developed this rash as an infant. We concluded that the patient had a sun photosensitivity, then prescribed a treatment for her. A month later, we followed up with the ASELSI clinic staff to see if the treatment we offered was helping the young girl; they told us it was.

THURSDAY AND FRIDAY: We treated patients at the ASELSI clinic/headquarters. There, we had access to a wider range of resources, including more medications, labs (glucose, Hct/Hgb), and ultrasound for prenatal visits and urinalysis. We referred patients with eye problems to the ophthalmology clinics that were available monthly at the ASELSI headquarters. While practicing in Chichi, I was able to clinically diagnose a patient with Down's Syndrome, identify a communication delay in a three-year-old patient, and perform multiple prenatal and dating ultrasounds.

This was my third mission trip to Guatemala, and every time I go there, I come back home more aware and grateful for all I have

and all I can do, personally and professionally, here in the United States. These experiences are powerful. Caring for underserved populations has made me a more skilled, knowledgeable, understanding and compassionate physician. I truly appreciate the opportunities I've had to pursue my passion for international medicine.”



Providers prepare medications for Guatemalan patients

guatemala



MU Medical School Health Care Team

Every year, one or more MU Family Medicine Residents takes a medical mission trip that is funded in part by our **GLOBAL HEALTH TRAINING FOR FAMILY MEDICINE RESIDENTS FUND.**

Donations to this fund will sustain our commitment to providing global health training opportunities to residents.

For more information or to make an online donation, please visit: fcm.missouri.edu/giving



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Steven Zweig, MD, MSPH

Vice Chair:

Michael LeFevre, MD, MSPH

Director, Dept and Clinic Operations:

Michael Anderson, MBA

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newsletter should be directed to:**

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To make an online donation to
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WORKSHOP FOR NEW FAMILY MEDICINE CHAIRS

Department chairs from across the country met at the University of Missouri for the annual New Chairs Workshop (NCW), co-sponsored by MU Family and Community Medicine and the Association of Departments of Family Medicine (ADFM). The primary goal of this three-day workshop is to prepare new chairs for the challenges, expectations and responsibilities of their role. Included in this photo are participants of the 2017 NCW, held last September:

SITTING (left to right): BELINDA VAIL, MD, *University of Kansas*; CHRISTINE JACOBS, MD, *St. Louis University*; AMY MCGAHA, MD, *Creighton University*, and AMY KEENUM, DO, PharmD, *Michigan State University*.

STANDING (left to right): ELISABETH WILSON, MD, MPH, MS-HPed, *Maine Medical Center*; CATHLEEN MORROW, MD, *Dartmouth-Hitchcock Medical Center/Geisel School of Medicine*; STACY BRUNGARDT, CAE, *Society of Teachers of Family Medicine*; MACK RUFFIN IV, MD, MPH, *Penn State University*; VALERIE GIL-CHRIST, MD, *University of Wisconsin*; STEVE ZWEIG, MD, MSPH, MIKE HOSOKAWA, EdD, and JACK COLWILL, MD, *University of Missouri*. **NOT PICTURED:** DAVID SCHMITZ, MD, MPH, *University of North Dakota*, and ARDIS DAVIS, MSW, *Association of Departments of Family Medicine*.

The 2018 New Chairs Workshop is scheduled for October 7-10.
To learn more, please contact Dr. Steve Zweig at zweigs@missouri.edu