Match Day occurred on St. Patrick’s Day this year and the news was generally better for family medicine. Our fill rate went from 78.8% last year to 82.4%, a 3.6% increase. Locally, our three family medicine residency programs did better in the match. The SLU/St. Elizabeth’s Family Medicine Residency Program matched 100% of their military slots and 66% of their civilian slots (up from 33% last year). The Forest Park Family Medicine Residency Program fully matched (8 of 8 slots), and the St. John’s Family Medicine Residency Program fully matched (5 of 5 slots, taking one outside the match).

Saint Louis University also sent slightly more of its graduates into family medicine — 10 of the 151 seniors for a 6.62% rate, up from 6% last year. Therefore, after a long period of declining interest both nationally and in the St. Louis area, hopefully we have turned a corner and the match needle has moved in our favor for once.

On a negative note, the U.S. seniors fill rate dropped from 42% to 40% indicating the U.S. medical school student interest in family medicine nationally seems to be continuing its slow decline. Over half of our residency slots are now filled by international medical graduates. This is actually one of the factors that is driving our discipline to consider increasing residency training from three to four years since many international graduates do not come to residency programs as well prepared as U.S. medical school graduates. Some training programs have taken advantage of this diversity and focused on international health which has proven popular with some students.

So, although student interest in family medicine remains a problem, we have some good news this year for a change. I think one of the reasons for this good news in the St. Louis area is the fact that we have excellent volunteer family medicine preceptors who serve as a source of encouragement and inspiration for our medical students. We continue to get rave reviews from the private practitioners who teach in our required family medicine clerkship and I sincerely appreciate their efforts.

The looming cloud on the horizon is the medical student debt issue. The recent Association of American Medical College study suggests that if student debt continues to climb at its current rate, in ten years only students going into the wealthiest medical disciplines will be able to pay off that debt in their lifetime. As you can imagine, this is a scary thought for those of us who are in the lower paying medical disciplines. If the recent Council on Graduate Medical Education report is correct, by 2010 there will be a shortage of physicians, including family physicians. Then the increasing student debt issue may intersect with the increasing demand for medical and family medicine services by the population and create the perfect storm and a true shortage of family physicians in the community. So much for retirement at age 65!

Thanks to support from the federal government, we have been successful in encouraging our school to expand its required family medicine clerkship from 4 to 6 weeks next year. We will pilot two cycles of this expanded clerkship and see how it is received by the students. Literature does suggest that an expanded clerkship experience may encourage more students to go into family medicine. More importantly, it will cause them to learn more about our field, particularly chronic illness management and continuity of care which is lacking in our current four-week clerkship. Since the strength of our discipline is the longterm relationships we establish with patients, having our students view this continuity, I feel, is important. We are searching for ways to build in continuity experiences for our students in the medical school. To this end, we are currently exploring a second year elective in which students are matched with family physicians and other primary care providers over a semester.

Once again, I want to thank our volunteer family physician preceptors for their excellent work in encouraging our students to consider family medicine as a career and providing an excellent educational experience for them in their offices.

- Mark Mengel, MD. MPH
Six-Week Clerkship
In response to repeated requests from students and in recognition of the quality of the teaching program in our clerkship, our department will be piloting two six-week clerkship rotations next year: October 24th through December 3rd and January 2nd through February 11th. We have been negotiating with the Office of Curricular Affairs and the Phase III Coordinating Committee to expand the clerkship and we have won their support. In the six-week rotations, content will be added to provide more in-depth and varied didactic sessions and allow students an opportunity to experience continuity of care. In addition, the extended curriculum will allow us to provide:

- Certification in BLS/ACLS
- Further training in procedures (aspirations and injections, punch biopsy) and dermatology
- Extended ECG reading
- An OSCE which will allow students to receive specific feedback regarding their clinical and communication skills to assist them in the USMLE, Step 2 clinical skills exam

This is an exciting opportunity to increase the amount of primary care our medical students are exposed to, hopefully increasing their interest in the specialty of family medicine. We will need participation from a large number of our volunteer preceptors in these rotations in order to demonstrate to the medical school administration the efficacy and benefits of a six-week clerkship. Invitations to participate have recently gone out to our preceptors and responses are due back by April 22nd.

New Courses
In attempting to meet student interest which has been moving steadily toward more clinically-oriented electives, several new courses have been developed this spring and for the upcoming academic year.

Summer Preceptorship Program. This program pairs a rising second year medical student with a family medicine physician in a community setting. The student will spend approximately forty hours per week for eight weeks divided between a practice setting and either a clinical research or service learning site. The goals of the program are many, among them to help the students develop and improve their patient interviewing, culturally competent communication and physical examination skills through observation and direct experience. In addition, we expect that students will have the opportunity to observe the social, mental health and ethical dimensions of patient care in the family medicine setting. Those students who have chosen the research component will design and complete a project related to one public health problem observed in the clinical setting or participate in an ongoing project directed by a clinical researcher. Students involved in the service learning component will, at a minimum, design and participate in a project serving underserved patients which pays particular attention to the patient’s cultural beliefs and values. These sites may be located anywhere in the U.S. Ten students have already committed to the program and three have chosen sites in Oregon, Texas and Nebraska. Dr. Richard Schamp is leading this effort.

Differential Diagnosis in Medicine. The Department is offering an elective for second year students entitled, “Differential Diagnosis in Medicine”. This course is intended to boost students’ clinical knowledge by helping them develop the ability to formulate multiple hypotheses in the context of a differential diagnosis. Multiple faculty and volunteer faculty are participating in this elective by writing up patient cases which the students research. In class the following week, students return to present their own differential diagnoses which become the subject of discussion and are evaluated by the faculty member who wrote the cases.

Primary Care Clinical Experience. Another new elective we are offering to first year students is “Primary Care Clinical Experience”. In this course, students are introduced to their role in primary care. They learn to write SOAP notes and how best to “present” their patients. They work on developing their history and physical exam skills and earn BLS certification at our SLU/St. Elizabeth’s Hospital Family Medicine Residency Program. Again, faculty from the department, as well as others from outside (e.g., Sarah Cole, DO, Mercy Family Medicine resident, and Laura Frankenstein, MD), are participating in this elective.

Clinical Nutrition. A new elective, entitled “Clinical Nutrition”, created by James Deckert, MD, has been approved for our third and fourth year students for next year. This elective will provide the student with current evidence-based training in preventive, pediatric, geriatric, and sports nutrition, disease specific diets and obesity management. It will be offered during just one 2-week period in February.

Rodney M. Coe Distinction in Community Service
The Coe Distinction recognizes student participation in healthcare-related community service throughout the students’ medical school careers. Students are assigned a preceptor from the department who mentors them throughout the process. The final step to earning the distinction requires a formal service project in the student’s 4th year. We currently have 85 students, a record number, from all four years enrolled in the Coe program. Historically, only about five percent of students in a class have earned this distinction. Over seventy Coe students and their mentors came together on February 28th at a Department-sponsored dinner which honored the 4th year students who will earn the distinction this year. The honorees spoke about their years of service and senior projects and their presentations were impressive and moving. The seniors who will earn the distinction this year are: Sonia Chaudhry, Tracy Hagerty, Eddie Hamamura, Shannon Johnson, Sunil Kamath, Tina Kearney, Navin Pinto, Renee M. Poole, Kenyon Railey and Julie Riley. Congratulations and thanks to all of them for their commitment to community service and the inspiration they provide to all of us who have worked with them over years.
Rob Nicholson, PhD, has been awarded a grant from the National Headache Foundation for a project entitled, “A randomized controlled trial evaluating the impact of a behavioral intervention using tailored messages among primary episodic migraine sufferers”. Dr. Nicholson has also had a manuscript on “Evaluating the effectiveness of a self-directed treatment for headache utilizing tailored messaging” accepted for publication in *Headache*. Congratulations to Rob for all his hard work!

Matthew Ulven, MD, will present a paper on “Rural Family Physician Preference in a Computer-assisted Learning Tool for their Patients with Type 2 Diabetes” in April at the Rural Health Association Meeting.

Richard Schamp, MD, Capt. Shelley Harkins, MD, Bill Manard, MD, and Dan Merenstein, MD, have been funded by the research division to conduct a pilot study that compares five different internet-based reference systems to determine if they are equal in their validity and utility. The databases that they will be examining are DynaMed, Clinical Evidence, First Consult, InfoRetriever and Up-to-Date.

Leigh Tenkku, MPH, with Cynthia Cook, PhD, Louis Flick, DrPH, Sharon Homan, PhD, Claudia Campell, PhD, and Maryellen McSweeney, PhD, will present, “Unintended Pregnancy and Current Psychiatric Disorders”, in April at the 5th Annual Southern States Knowledge in Nursing Conference in San Antonio, Texas.

This case presented quite a challenge for our second year family medicine resident, Anne Nash, MD.

A 20-year-old, G-3 P-2, presented to the SLU/St. Elizabeth’s Hospital Family Medicine Residency Clinic for her initial prenatal exam at 33 weeks gestation. She was found to have a blood pressure of 194/132. The initial lab was drawn and plans were made to admit the patient to labor and delivery for monitoring, blood pressure control and potential delivery. The patient refused treatment and left the clinic against medical advice. Over the next few days she refused several attempts to encourage her to seek treatment. At 35 weeks she presented to labor and delivery with severe continuous abdominal pain and vaginal bleeding. Fetal heart tones were 80 and non-reactive. The cervix was completely dilated and within 15 minutes of arrival she vaginally delivered a 2200 gm newborn with Apgars of 0 at one minute, 2 at five minutes and 3 at 10 minutes.

Placental Abruption occurs in one to two percent of pregnancies. Risk factors include hypertension, smoking, drug use, and trauma. The primary symptoms of abruption are pain and bleeding. Many patients with small abruptions can be treated conservatively.

This patient had a Grade II abruption and required expeditious delivery. Once delivered, patients need to be treated for the hypertension and monitored for coagulopathies. This patient had a significant post-partum hemorrhage which was treated successfully with oxytocin and carboprost. In addition, the patient’s blood pressure remained high and she was treated with hydralazine intravenously and subsequently sent home on oral hypertensive medication. The newborn was managed in the special care nurse and subsequently transferred to a tertiary care nursery on the fourth day.

How Do You Rate As A Student’s Ideal Teacher?

A new article in the January issue of *Family Medicine* looks at this issue. According to students, the top five descriptors of an ideal teacher are: (1) stimulating, (2) encouraging, (3) competent, (4) communicates, and (5) well-read.

This is quite different from what a sample of clinical teachers from a wide variety of specialties thought were characteristics of a good preceptor. The teachers listed these as the top five descriptors: (1) encouraging, (2) practical, (3) open-minded, (4) communicates, and (5) competent.

As you can see #1 on the students’ list - “stimulating” - did not even make the top 5 or the top ten of the teachers’ list (it was actually #12). The authors of the article have developed a Clinical Teaching Inventory that measures your comfort with teaching and gives you personalized feedback on your teaching style. You can see how you measure up and get tips on how to improve your teaching at their free website, [http://www.ucimc.netouch.com/intro.htm](http://www.ucimc.netouch.com/intro.htm). The test takes about 20 minutes to complete. Give it a try!
Virginia Westermeyer, MBA, joined the Department in January as Financial Coordinator. She has a Bachelors degree in Business Administration with an emphasis in Accounting, and a Masters in Business with an emphasis in marketing. Both degrees were earned from the University of Missouri-St. Louis. Her previous career in the cable television industry included positions held in Accounting, Marketing, Customer Service and Fiscal Operations. Virginia is a native St. Louisan who is thrilled to have become a part of Saint Louis University. She enjoys history, traveling, volunteering with her church, and spending time with her husband, Tim, and three children, John, Anne and Matt.

Daniel Morris, MS, is the Department’s new biostatistician. Originally from Portland, OR, he majored in physics at Colby College in Waterville, ME and received a Masters in physics from the University of Michigan. While in Michigan, he worked in a laser lab performing experiments to control molecular dynamics. After moving to St. Louis with his wife, Jill, who is in law school at SLU, he participated in research on the growth of nerve cells in a neurobiology lab at the Washington University School of Medicine. Away from SLU, he enjoys restoring his old house in Maplewood where he and Jill live with their dog, Louie. Daniel is a stained glass hobbyist who also enjoys brewing and distilling alcohol in his basement.

David Pole, MPH, now leads the AHEC Program Office as Deputy Director. His journey to SLU took him on many interesting twists and turns. His Bachelors degree in kinesiology and physiological science led him to the Pritikin Longevity Center in California where he served in a variety of roles working with physicians, health educators and behavioral specialists to treat and prevent cardiovascular disease, hypertension and diabetes through a combination of exercise, nutrition and medical management. In 1994, while continuing to teach for Pritikin, he also assisted in the development of a graduate school program at Soka University of America whose focus was the formation of students who have the capacity to create value and serve others with the knowledge they have gained. He received a Masters in Public Health from UCLA and became the Director of Health Services for a non-profit agency serving the American Indian community in Los Angeles. As Director, he coordinated access to care agreements, developed educational programs in nutrition, diabetes management and prevention, immunizations, HIV/AIDS prevention and managed healthcare and social service staff. In 2003, David and his wife, Julie, moved with their daughter, Maggie, to St. Louis where he continued his work with the Los Angeles American Indian Agency on a diabetes program and also worked as a health educator with youth for the St. Louis County Department of Health. In January, he came to SLU. He is excited to have the opportunity to work with AHEC – a program that he believes matches his personal beliefs and goals, and represents the ideals of service that inspired him to go into community health.

News from the department’s maternity ward!
Luke Ryan Byrd made an auspicious entrance into the world at 2:55 a.m. on March 4th (03-04-05)! He weighed in at 7 lbs. and was 20-1/4” long. His proud parents, Carrie Venable-Byrd, Department Education Coordinator, and Dr. Chad Byrd, are thrilled with the latest addition to their busy household, as are his helpful siblings, Trey, Meghan, and Abby. He has already visited the department twice and, as the youngest of four, will no doubt become an expert at sleeping anywhere!

Within the next several months, we will celebrate the births of Lisa and Jim Payne’s #1 son and Drs. Kim and Imran Zoberi’s second child!

Caution to all: Don’t drink the water!
East Central Missouri Area Health Education Center (ECMO AHEC) and the AHEC Program Office sponsored their second annual workshop entitled, “Health Careers 101: Explore, Experience, Expose” on Friday, February 18, 2005 at the Doisy School of Allied Health Professions on the Saint Louis University Medical Center Campus.

The goals of the workshop were to inform the audience about the array of health career options, as well as to provide an opportunity for participants to engage in hands-on demonstrations led by health care professionals to illustrate a service that their discipline might perform. The workshop was attended by middle and high school area guidance counselors, math and science teachers and administrators from St. Louis City, St. Louis, Jefferson, St. Charles, and Franklin Counties.

Workshop participants each received a copy of ECMO AHEC’s Health Careers 101 Health Professions Manual. This manual was developed as a resource and provides answers to many of the initial questions and concerns students have about health care professions (i.e., a description of various health care professions, earning potential, job trends, education required as well as schools and universities across the state of Missouri that offer each program of study).

Another highlight of the workshop was the opportunity to:

- **EXPLORE** some of the more than 300 health professions opportunities. Some of the professions participating in the workshop included: family physician, social worker, public health professional, physician’s assistant, physical therapist, occupational therapist, clinical laboratory scientist, dietician, nurse, nurse practitioner and pharmacist. These individuals attended as representatives of various schools, programs, and departments at Saint Louis University as well as St. Louis College of Pharmacy.

- **EXPERIENCE** fields of healthcare directly from the experts who work and teach in the specialties and be better prepared to **EXPOSE** their students to in-depth knowledge of a variety of common and not so commonly known health professions options available within healthcare.

Workshop participants most enjoyed the “interactions with the health care professionals and students”, “learning about a variety of medical careers,” and getting “valuable information in the form of the Health Professions Manual.” Participants felt the workshop was “well organized, informative and well worth the time.”
Tuesday, April 19th – “Using ‘Quality’ as a North Star for Behavioral Science Training in Family Medicine” by Larry Mauksch, M.Ed., Department of Family Medicine, University of Washington School of Medicine

Tuesday, May 17th – “Medical Humanities As a Portal to the Doctor-Patient Relationship” by Howard F. Stein, Ph.D. (Professor, Department of Family and Preventive Medicine, University of Oklahoma Health Science)

Tuesday, June 21st – “Type 2 Diabetes in Adolescents and Childhood Obesity” by Sherida E. Tollefsen, M.D. (Associate Professor, Department of Pediatrics, Saint Louis University)