NO HURRICANE LAPPING OUR SHORES

This Update reports events that occurred in our environment in the summer to autumn time frame. Weather wise, we initially lived in an extended light of the day wonderment that was relatively cool and wet. We transitioned in July and August through a brutally hot, humid and bone dry sequence. We are currently 5 to 6 inches short of expectation this year in rain fall. So far there has been no moisture from heaven that cancelled our open window days of autumn. None of the hurricanes to date have lapped our shores.

Professionally in this writing we will look back to when our minds were on graduation, golf and in gathering modes of late June. We will bring you up to speed on happenings during these cooler days.

GRADUATION HIGH

In June, we all once again climbed the ground-to-roof express elevators in celebration of another graduating class. We were strong in numbers and fully occupied the main venue of the Racquet Club. We were strong in spirit and had much family support. See JB’s report for his take on events.
AND WHEN SHE WAS BAD....

She was very bad off the tee box, but when she was good, she was very, very good. So good on the contest hole for the woman’s longest drive, Alaine White beat everybody except Mark Shepherd. That confused boy did in fact strike the longest balls on both the woman’s and men’s longest drive contest hole! For the unjustified and justified shooters, these forces among us were rewarded with a gift certificate to either Dicks or Coldstone. Other certificate winners included John-Adam Bonk, Matt Freyhoff, and Zack Holt for the longest putt and closest to the pin contest holes. Dave Carter, Steve Dixon, Linda Bailey, and Matt Dixon were low score at -13 below par. Andre Castelbuono, John-Adam and Zack were second at 6 under. Deann Allbee, Meaghen Keville and Kate Racicot, newbies to our residency and the game of golf surrendered with high score of the day.

The unsung hero of the day award goes to Greg Kohls who along with Gene Corson organized the Annual Departmental Golf Outing (The Sam Finn Classic). Greg was in attendance at the birthing of his daughter rather than hanging out at Moss Creek Golf Club in Clayton.

Thanks also go to the Big Guy and his relative, Mother Nature who made sure the skies were blue, the humidity low and the beer lady’s cart was well-stocked.

Shirley Foreman wishes to advise attendants at the next year’s event (date currently in limbo) you’ll have to eat the cost of club rental. The steak and baked potato cost will remain as part of the registration fee.
A PICNIC TO REMEMBER
The Janz’ hosted a marvelous affair in June that served to introduce the entering residents’ families to us all. The tent served only to shade the gustatory offerings. No umbrella was needed to protect us from ultraviolet rays or clouds bursts. The weather and company were appealing.

I enjoyed watching two pairs of twins getting fed. I took some lessons regarding concurrent grazing that will aide in my future grandparenting of a boy and girl in utero (Chicago). Children of all ages were in abundance and all were mysteriously on good behavior.

I enjoyed pitching for the interns versus the rest of us softball game. After all these years I’ve learned how to place a ball so that it hits the bat, even in individuals who are unlikely to connect. We engaged in a reasonably competitive game for a few innings. Ultimately the interns went down to defeat. A more important milestone or success was secured: we had only one fractured extremity during a six inning affair.

FRIENDS
The most important aspects of our orientation events are the socialization issues. Being able to share the early medical instruction and administrative education has its purpose, but they will be forgotten. In contrast, we’ll all remember the handshakes and intimate moments forever.

As we hold events at national meetings and gather we have an opportunity to renew contacts. Our newsletter is an opportunity as well to spread the word. Much, if not all of what we have said and what we will continue to report is the joy of contacts and the knowledge that everyone is doing ok. Sadly, I relate what I believe is a first. Debby Barrett Dodge passed away in July. She left three loving children, a husband and a tight group of graduates who will mourn her loss.
CONGRATULATIONS

Congrats to Jill & Scott Aston.
Grant Aston was born on August 10, 2010 at 7:20am. He weighed 8lbs. and 8 oz. and was 22 inches long.

Congratulations Ben & Stephanie Barlow
Matthew Douglas Barlow was born on August 2, 2010 at 2:43 am. He weighed 7 lbs. 1 oz. and was 19.5 inches long.

Congratulations Adam & Angel Bromberg
Luke Tyler was born September 20th. He was 6lbs. and 11oz. and was 19 inches long.

And now a word from the rest of the gang...
Update from the Center for Immersive Medical Education and Research (CIMER)
- Ray Ten Eyck, M.D.

**JULY SIMULATION SESSIONS**
We welcomed our incoming first-year resident class in July with a series of simulation sessions throughout the orientation month. They did an outstanding job and by the end of the month they were well prepared for the training opportunities and challenges they would face at our clinical sites. The Grandview emergency medicine residents visited the lab for a day of simulation at the end of the month under the supervision of their new program director, Dr. Michael Pallaci. This initial venture was very successful and we look forward to an ongoing relationship between the two EM programs in Dayton.

**CORE PLUS ADDITIONS**
With the start of the new academic year we resumed our core programs including the monthly ICU simulations for our second-year EM residents, the monthly class-specific EM resident simulations, the fourth-year medical student curriculum, the Air Force medical student curriculum, the surgery intern orientation simulations, and the resuscitation simulations for the Kettering internal medicine residents. In addition, we implemented the programmed growth of the simulation curriculum for our first and second-year EM residents by adding monthly resuscitation sessions for both classes and individual case-based series for the R-1s. These additions to our other core resident programs are aimed at providing more deliberate practice with detailed feedback early in the program.

**EMS SIMULATIONS**
The EMS simulations were the largest new project for the summer. Thanks to a grant from Good Samaritan Hospital, training was completed by over 280 EMS personnel in our simulation ambulance at each individual unit’s station or training center. We anticipate additional opportunities to work with the EMS personnel who are such a key component of our emergency care system. Dr. JR Pickett incorporated the special considerations for SWAT medics into an all-day training session in the lab in August.

**TEACHING ASSESSMENT SIMULATIONS**
We finished this quarter with clinical teaching scenarios which featured pairs of first and third-year residents. The first-year residents worked on their approach to the patient with an undifferentiated chief complaint in the emergency department and each third-year resident practiced his/her skills as a clinical teacher. Thanks to tremendous support from Dr. Singer, Dr. Hamilton, Dr. Heitz and Dr. Wightman, each resident received detailed feedback along with a few pearls regarding both clinical care and teaching in a clinical setting.
Another class graduated and another class initiated! The July orientation month was once again a success this year. Not much was changed from last year, since previous groups have felt that it has been a good mix of small-group discussions and hands-on skill practice. Informal feedback from the new R1s was uniformly positive.

Following the first six weeks of the Core Clinical Concepts series, the curriculum has been focusing on ECG interpretation and the management of non-orthopedic trauma. Visiting specialists in September added discussions on burn trauma and military assistance in disaster relief. Readers interested in the latter can find information related to overseas operations in the following article, which is still required reading in Air War College.


Series lectures have included related topics such as trauma center capabilities, primary and secondary trauma triage, and employment of air ambulance services. Additionally, I presented my experiences with wilderness orthopedics, and JB discussed the ethics family-witnessed resuscitation.

The characters representing a teacher, dào shī, imply guiding and leadership, dào, as well as being the model of behavior, shī. Opening the eyes of students and residents and guiding them to new conclusions is the best part of the job.

Building on prior novel ideas by Mike Ballester and Ray Ten Eyck regarding the integration of small-group discussions and high-fidelity simulation, Corey Heitz has made improvements in both content and efficiency of these didactic components of the rotation for medical students. The next phase is creating a better end-of-month examination on which a portion of the students’ grades are based. The improved use of faculty time for medical students has allowed us to increase high-quality simulation experiences for R1s and R2s doing ED rotations in a given month.

Students of Chinese martial arts learn the title of shī fǔ, which can mean teacher, but also can be interpreted as a partner in learning. That’s the manner I like to view everything we do as faculty for the students, the residents, and each other.
Greetings all. I hope this edition of the Update finds you well. It has been a busy summer, to say the very least. Resident orientation was once again a success, with our latest bunch being brought up to speed on core topics, skills testing, and my favorite: defensive tactics. Assisting me were John Wightman and DEM alum Rich Harover. I wish to clarify: the defensive tactics and self-defense skills we teach are NOT designed to encourage residents to punch elderly patients in the mouth or break disruptive family member’s arms. They are designed to generate a sense of awareness while working in the ED; recognizing and avoiding a dangerous situation trumps getting into a confrontation any time.

In July, Wright State University Division of Tactical Emergency Medicine jointly sponsored a tactical medicine class with Tactical Medics International, held at the Ohio Peace Officers Training Academy in London. The class was a success, with almost 30 students from around and outside the state. Physicians, EMTs, and law enforcement officers were all represented in the class, including our own Pablo Medina. Pablo’s performance was exemplary, and the instructors awarded him “top student” at graduation. It was the least they could do, after subjecting him and the class to the indignities of sleep deprivation, TASERs, OC, and CS.

In August, I attended OPOTA’s Basic SWAT School as an adjunct instructor. During the 1.5 mile run portion of physical assessment on day 1 of training, a 27-year-old officer collapsed in cardiac arrest. Through a bit of skill, some great assistance from the SWAT instructors and students, and a lot of luck, we were able to successfully resuscitate him. 24 hours after his collapse, he was extubated, awake, and calling me on the phone to say thanks. I say thanks to all who helped, particularly OPOTA instructor Jeff Frazier, Columbus MedFlight, and the ED staff at OSU.

Until the next edition…
NEW HEITZ  
- Corey Heitz, M.D.

FOURTH YEAR COURSE CHANGES
We’ve gotten the year off to a great start...two groups of students have come and gone, with more on the way! As usual, we’ve introduced a few changes to the curriculum. Our new fellow, Stacey Poznanski, has been a great help...she now opens the month with a brief bit about "The Undifferentiated Patient." Didactics have gone to one day a week, making scheduling much easier. A new evaluation form and updated grading system are helping distribute the grades slightly better (we hope!)

RECENT TRAVELS
We recently vacationed at the Outer Banks of North Carolina with friends from medical school...all of whom have rugrats...what a loud, but relaxing, week! Not sure where we will be traveling next at this point.

FUTURE TRAVELS
Erica (pediatric endocrine) and I have successfully interviewed at three programs: West Virginia University, East Carolina University, and Virginia Tech-Carilion in Roanoke, Virginia, a school which inaugurated its first class of medical students this year (graduating class 2014), and hopes to start an EM residency in 2011. We have some big decisions to make, and hope that by the next Update we’ll know where we’ll be leading.

MORE PERSONAL NEWS
And, in final news, no that picture inserted into my update is NOT from a patient-care scenario...my wife and I are expecting our first (human) child at the end of March! Charlie Brown isn’t aware yet, and we’re not so sure what he’s going to think of his new brother or sister, but we hope to devote almost as much attention to him as we do now, but it might be tough if the new addition ends up being as cute as our first (non-human) child! Judging by the amount of pictures we took of him, this new baby needs to be prepared for paparazzi-style photo ops at all times!
**Research Results**  
- Jim Olson, Ph.D.

**PAPER DRIVE**  
Dr. Olson submitted a grant to the American Diabetes Association several minutes before the deadline in July. The proposal will be reviewed in the next three months and we should have word on its chances of funding soon thereafter. In addition, a grant proposal to the Department of Defense to fund the third year of our ongoing research on the use of nano-particles for magnetic resonance imaging has been given final approval. The initial results from this ongoing investigation will be presented this fall at The Society for Neuroscience meeting in San Diego and a manuscript describing the results is currently in preparation. Finally, by the time you read this Update, a manuscript submitted by Ian Wenker, a former Masters student in our laboratory, will be submitted for review.

**SUMMER STUDENT STUDIES**  
The laboratory was full this summer. Several students who had worked with us previously returned to the laboratory and others joined us for the first time. Grant Eilers completed the development of a HPLC analysis of purine nucleotides. Sergei Robinson, currently in the Masters program in the NCBP department, developed the techniques he’ll use to examine aquaporin distribution in perivascular astrocytes during edema and following prolonged administration of antidepressant drugs. Issa Walker, a STREAMS student examined cell volume control of the same brain cell line that Brianna used in her study. Brian Tucker, another Masters student in the NCBP department, returned to complete the final data analysis and initial draft of his Master’s thesis. And finally, Amanda Freeman spent the majority of the summer preparing for her Ph.D. qualifying exam which will be completed in the next several weeks. With all of the data and results that were produced over the summer we’re now faced with the task of writing results and getting them published.

**THE BEAT GOES ON**  
In addition to the laboratory projects described above, progress was made in the BEAT (Brain Edema And Trauma) project. Drs. Dines and Aston are evaluating the significance of brain edema as a predictor of outcome in head trauma patients. Using the trauma registry at MVH, they are examining all patients who presented to the ED over a 6-year period and, in addition, are evaluating a smaller data set that follows severe head injured patients for up to 2 years. The results compiled thus far indicate that brain edema may contribute to secondary injury regardless of patient’s initial mental status or degree of injury. Having collected data from over 7,000 patients presenting to Miami Valley Hospital and the more selected set of severe head injuries (200-300) Drs. Dines and Aston are now preparing the final data analysis for manuscript preparation.

Dr. Hamilton’s ‘Second Life’ will return next issue, as he is traveling with his family on the ‘civilizations’ tour of Italy, Greece, and Turkey.

---

- Glenn Hamilton, M.D.
If I only had a brain...
the Wizarding of Dr. Poz

GETTING SETTLED

I would like to thank everyone for their assistance and very warm welcome during my transition to Dayton and into the WSU EM family. It has been great to be back home with my friends and family, having time for birthday parties and barbeques after 12 long years away for school. My husband and I have gotten as settled as we can be, even breaking down to get a puppy, Buster, who is keeping us on our toes. Together we are gearing up for Fall, finally able to spend football season in the same time zone. The University of Wisconsin is looking strong, and I look forward to the Oct 16th rivalry with the Buckeyes. It doesn’t get much better than a husband home from war, and beer and brats on Saturday. Go Badgers!

WHAT DOES A FACULTY DEVELOPMENT FELLA DO ANYWAY?

I’ll admit, when I began this fellowship the concept of faculty development (FD) was fairly foreign to me. The topic had never been discussed during medical school or residency training, and I never took the time to explore it. Yet, the more I discover now, the more I wish I knew then. We may all be better off if we learned a thing or two about learning during school.

As stated in Dr. Hamilton’s article on the subject, developing one’s faculties is literally about “expanding one’s abilities to perform new and different tasks.” This sounds familiar, right? That’s all each of us has done for the past (fill in the blank) years. At the most basic level, FD is purely the act of learning. From subject matter to procedures to resuscitations, we participate in this basic level of faculty development every day. What I am here to study is the art of learning, the successful and effective process of expanding one’s abilities and progressing forward in an area of interest.

My area of interest is of course Emergency Medicine (EM), more specifically education in EM, but as you can imagine, FD can have very broad applications. Yet, the fundamentals remain the same and are rooted in management and leadership skills. These skills include time management, decision-making, and evaluation of one’s strengths and communal contributions. Once these skills are mastered, only then can you really attempt to use them to manage or lead others. Simply put, if you can’t take care of yourself, how can you expect to take care of others? Leadership is how progress is made and how information is disseminated. If we don’t learn how to do it effectively, progress (education) is slowed.

In Medicine, we lead by lecture, publications, research, and bedside/on-shift teaching. We lead our students and residents, but we also lead our patients. The problem is that we are never taught these skills. Most people graduate one day, and are expected to be educators the next. This would explain why some people should put down the PowerPoint clicker and just step away slowly before someone gets hurt. Just as we all have to work hard to learn medicine to be a good doctor, we should have to work equally hard to learn education to be a good teacher. That is where FD comes in. It is a conscious effort to prepare one’s self to be an educator and leader in medicine.

So what does this all mean for me? (i.e. what will I be doing all year?) I’ll attend conferences on teaching and research. I’ll learn how to develop curricula, write grants, and write manuscripts. I’ll study program direction, EMS, simulation, and the clerkship from an administration perspective, and I’ll start my Masters in Medical Education. At the same time, I’ll learn how to be a good wife, mother (for Buster), daughter, sister, aunt, and doctor, in the midst of having more projects than time. In other words, I’ll learn how to take care of myself and my knowledge of emergency medicine, with the hope that one day I can pay it forward to someone else.
GRADUATION
We gathered at the Racquet Club on the evening of June 28th to see off the Class of 2010. The Racquet club, as many of you know, has been the site for graduation for many years now. We’ve needed to expand, and now we “take over the place” for the evening. It was my first time ‘hosting’ the event as Chair, which was a bit nerve wracking. Knowing that Dr. H was there made things seem more natural – although he was there as much in the role of proud parent as distinguished faculty. The class of ’10 and their destinations are:

Jackie Barnes – Greene Memorial Hospital
Carrie Arnold – Miami Valley
Chris Calvert – Elmendorf AFB, Anchorage AK
Stephanie Carrion – Elmendorf AFB, Anchorage AK
Derrick Darnsteadt – USAF SOCOM/University of Alabama, Birmingham
Sagar Doshi – Keesler AFB, Biloxi MS
James Hamilton – Miami Valley
Michael Hixson – Las Vegas
Scott Koncal – Miami Valley
Emily Maupin – Mercy Fairfield
Joey Mauro – Miami Valley
Jenny Lim Morgan – Upper Valley MC
Laura Nolting – U/S Fellowship, Columbia SC
Deron Warren – Landstuhl AFB, Germany

CLASS OF 2013
It seems that the new interns arrived almost before graduation. Our newest batch of emergency physicians is a very enthusiastic, although somewhat mischievous. They sported team shirts for the opening picnic softball game, although they were wise enough to lose the game. They performed very well during our orientation month, and have ‘gelled’ well as a group.

ALUMNI PRIDE
This may become a regular feature. I heard from a couple of other alumni since my last column and I’ll gladly include any updates you would like to send my way.

Jamie Jones (class of 1982) is currently on the Executive Finance Committee of ABEM. I’ve been told this may make him likely to be ABEM President some day.

Frank Smeeks (Class of 1998) is President-elect of the North Carolina state chapter of ACEP.

FACULTY DEVELOPMENT FELLOWSHIP
July also saw the arrival of a new faculty development ‘fella,’ Stacey Poznanski DO. Stacey grew up in Kettering and graduated from the first class produced by the University of Wisconsin, Madison program. She has already exhibited a strong interest in medical education and has really immersed herself into the program. Stacey is doing her clinical time at KMC.
Gebhart’s Runs

- Mark Gebhart, M.D.

BULLDOZERS, DUMP TRUCKS AND WRECKING BALLS!
The NCMR Tactical Laboratory at Calamityville is taking shape. The past 60 days has seen some of the most substantive progress since the official groundbreaking ceremony held in September 2009. The latest update calls for the warehouse facility to be completed on October 1 and the learning center in late December. These two dates are key dates as the center will relocate all operations to the tactical laboratory once the learning center and business complex have both been completed.

READING MATTER
NCMR publishes two documents. A larger quarterly publication is known as Coherent Strategy. A smaller publication is known as “Quick Read” and it is distributed monthly. We will shortly have both documents and all past issues archived at our website, www.medicalreadiness.org

NETWORKS
NCMR continues to work closely with our wide network of partners and supporters. Later this month another group will be traveling to Texas A & M University. NCMR has expressed interest in becoming a full member in the National Domestic Preparedness consortium. This consortium would open the opportunities to local, state and national first providers, responders and receivers. NCMR would focus on medical training and current plans call for the development of courses including confined space medicine and surgery, urban search and rescue medical specialist, medical logistics, expeditionary like medical operations and medical contingency planning.