Contents

Feature .......................................................... 2–5
Changing the Face of Emergency Medicine in China

Education ....................................................... 6–7
Yellow Springs: Teaching Family Medicine in a Small Town

Research ....................................................... 8–9
Outreach Workers Advance Research Efforts

Service .......................................................... 10–11
Medical Students Apply What They Learn

Community .................................................... 12–13
Screening for the Early Cure in Skin Cancer

Profiles .......................................................... 14–15
Student: Megan Baker
Faculty: Lawrence Prochaska, Ph.D.

Advancement .................................................. 16
Planning for the Future
Adventure Golf Scholarship Classic

Of Primary Interest and New Faces ....................... 17–19
Above: This statue of Mao Tse-tung towers over Shenyang Square.
Far right: Tiananmen Square during the ceremony for the return of Hong Kong to China.
Traffic jams and cellular phones are conspicuous signs of China’s rapid economic development. So is the need for more emergency medicine services.
Leslie Wolf, M.D., observed some significant changes in China when she made her second trip there last summer. She witnessed the nationwide celebration on July 1 marking the return of Hong Kong to Chinese sovereignty. She noticed more personal automobiles crowding the streets of Shenyang, an industrial city of six million in northeastern China. She learned that many more Chinese have telephones and that cellular phones are a conspicuous favorite in Shenyang.

The widespread availability of telephones is crucial to Dr. Wolf’s own work in China. She’s helping physicians in Shenyang establish China’s first poison control center, which is scheduled to begin answering emergency phone calls this October. The new center is the most recent achievement in a longstanding collaboration between Shenyang’s China Medical University, the China Medical Board, and the Department of Emergency Medicine at Wright State.

When Dr. Wolf visited Shenyang in 1994, she found “communication resources limited. Most people did not have phones in their homes and only a few Chinese doctors had phones. That’s changing rapidly now.”

A poison control center organized along Western lines is primarily an information resource service conducted by telephone, according to Dr. Wolf, a board-certified toxicologist and assistant professor of emergency medicine at Wright State. Getting dedicated phone lines was a necessary step in setting up the center at China Medical University’s hospital in Shenyang.

Another important step was training a professional staff. Under Dr. Wolf’s direction, two Chinese toxicologists completed a year of training here in 1996. When they returned to Shenyang, they set up China’s first poison control center. Another physician and nurse from Shenyang come to Dayton this fall for a year of clinical toxicology training.

An epidemiological study conducted by Dr. Wolf’s Chinese colleagues identified carbon monoxide as the most prevalent poison problem in Shenyang. “Most homes are heated with coal, and the ventilation isn’t good. In some rural areas, people build coal fires beneath their beds,” she explains. “The center’s first public awareness campaign will focus on preventing carbon monoxide poisoning.”

From cell phones to traffic jams, the lifestyle changes observed by Dr. Wolf reflect China’s rapid economic development during the past decade. Over the
same time span, medical educators have recognized an ever-growing need for emergency medicine services in the world’s most populous nation. Thanks to the collaboration with Wright State, Chinese physicians have begun to change the design and function of hospital emergency departments. They are developing clinical training programs following Wright State’s model. “They’re putting a Chinese face on an American concept,” explains Glenn Hamilton, M.D., professor and chair of emergency medicine at Wright State.

On his first China visit in 1989, Dr. Hamilton led a People-to-People tour of American emergency medicine specialists. He returned in 1992 to collaborate on a $1.2 million project at China Medical University. The grant was awarded by the China Medical Board, a New York-based philanthropic foundation headed by William D. Sawyer, M.D., former dean of medicine at Wright State. The grant’s purpose was establishing China’s first emergency medicine residency program.

“In addition to assembling a training program, we also introduced the Chinese to the concept of a clinical site where emergency medicine could be taught,” Dr. Hamilton explains. “Their hospitals had an emergency department, but it wasn’t organized as such. It operated more as a consulting service where patients were kept long enough to make a diagnosis so they could be admitted to the precise hospital service. The average emergency department stay was over two days.”

When the first of several groups of Chinese physicians journeyed to Dayton in 1993, they studied emergency department design as well as Wright State’s educational curriculum. During a nine-month stay, they gained firsthand experience in the emergency departments of Wright State’s community teaching hospitals, including Children’s Medical Center, Franciscan Medical Center, Good Samaritan Hospital, Kettering Medical Center, and Miami Valley Hospital. Dr. Hamilton also credits the emergency medicine practice community in Dayton for sharing their expertise with the Chinese.

After their return to Shenyang, the Chinese physicians made significant changes in the emergency department at China Medical University. They added triage stations where patients were assessed and treated according to the severity of their emergencies. Other simple changes included wheeled carts to make diagnostic equipment portable, curtains for patient privacy, better lighting, and signs that clearly identified emergency entrances.

After five years of collaboration, Wright State’s partners at China Medical University have established their own emergency medicine residency program as well as training programs for medical students and emergency department nurses. Last year Dr. Hamilton presented the American perspective on emergency medicine education to the presidents of China’s major medical universities. The presentation launched a new $400,000 project funded by the China Medical Board that will make the educational model available to medical universities throughout China, including the newest one in Tibet.

“I enjoyed visiting New York, Chicago, and San Francisco, but in terms of learning about emergency medicine, the best place to be was Dayton.”

“We’ve had the opportunity to work with capable and receptive colleagues in Shenyang. They are making very real changes in emergency medicine that have the potential to make an impact throughout China,” Dr. Hamilton says of the collaboration. “We supplied the background perspective and concepts. They are developing the way that works best for them — with a Chinese perspective.”

“I enjoyed visiting New York, Chicago, and San Francisco,” a Chinese colleague told Dr. Hamilton. “But in terms of learning about emergency medicine, the best place to be was Dayton.”

A resuscitation room at the emergency department in Shenyang.
The Yellow Springs Family Health Center looks a lot like other small-town medical practices. Its family physicians treat their share of patients with bee stings and poison ivy in the summer, sore throats and influenza in the winter, and just about everything else in between. But like the village it serves, simple comparisons stop there.

Unlike most Ohio small towns, Yellow Springs has been a racially diverse community since the days of the Underground Railroad. Surrounded by a green belt of farms and parks, the village of 4,000 has resisted the suburban sprawl overwhelming other towns its size. The home of Antioch College, Yellow Springs has a tradition of investing in high-quality education.

Hands-on education of medical students distinguishes the Yellow Springs Family Health Center from other small family practices. The health center is staffed by six full-time faculty* from the Department of Family Medicine at Wright State University School of Medicine. Nearly half of Wright State’s medical students rotate through Yellow Springs during their clinical training.

“Our practice may look conventional, but the quality of patient care, combined with our teaching mission, puts Yellow Springs Family Health Center at the top of the chart,” says Richard Gordon Jr., M.D., the center’s medical director.

Four third-year medical students rotate through the center on a continuing basis. Additionally, fourth-year students may take a one-month family medicine selective there. The student-to-faculty ratio is two-to-one. Each student participates in at least four patient visits per half-day.

In the conventional, “tag-along” model of teaching family medicine, students are only observers as faculty preceptors diagnose and treat patients. Typically the training takes place in large outpatient clinics connected to teaching hospitals. At Yellow Springs Family Health Center, however, medical students make the initial patient assessment alone. After conducting a patient history and physical exam, they present their findings and a treatment plan to the attending physician, who guides them to the best course of action. Then both student and attending physician return to the patient.

“Medical students don’t fully appreciate the questions to ask a patient or the attending physician until they actually do the patient assessment themselves,” explains Dr. Gordon. “We believe this approach provides a more challenging and relevant model for learning family medicine.”

Medical student Marcus Miller agrees. “You’re challenged to think on your feet and learn as you do it,” he says. “At the same

“...put Yellow Springs Family Health Center at the top of the chart.”
“The Yellow Springs Family Health Center combines the realism of a private family practice with in-depth patient contact.”

Medical students see the health center’s connection to the community. The center handles more than 13,000 patient visits per year. It draws patients from the village of Yellow Springs as well as the surrounding rural region, and it provides student health services for Antioch College. Yellow Springs Family Health Center’s physicians also see patients at Greene Memorial Hospital in Xenia and Community and Mercy Medical Centers in Springfield. Medical students participate fully in hospital rounds.

The Yellow Springs Family Health Center is an important focus for Wright State’s community-based programs in geriatric medicine. The geriatric medicine clerkship, directed by Cynthia Olsen, M.D., features home health visits so medical students can learn how healthy older people maintain their independence and quality of life. Dr. Olsen also directs geriatrics rotations for the Wright State family medicine residency programs. Faculty, residents, and students see elderly patients at Friends Care Center, a 60-bed nursing home located across the street from the Family Health Center.

Despite its size and midwestern roots, the village of Yellow Springs has gained a reputation for community activism on an international scale. Faculty at the Family Health Center have followed the community’s tradition by taking teams of Wright State medical students to Nicaragua and Panama to support public health services there.

Only a handful of clinical training sites nationwide teach family medicine along the Yellow Springs model, according to Mark Clasen, M.D., Ph.D., chair of Wright State’s Department of Family Medicine. “Ambulatory care is deceptively simple. The physician’s decision-making process moves so quickly that students in a tag-along model might not pick up on the complexities behind the decision,” he explains. “The Yellow Springs Family Health Center combines the realism of a private family practice with in-depth patient contact. It provides a unique learning experience that enables medical students to see the intellectual challenge and rewards of practicing family medicine.”

* Wright State faculty at Yellow Springs include Jeff Blackburn, M.D.; John Donnelly, M.D.; Richard Gordon Jr., M.D.; Jeannette Lemkau, Ph.D.; Cynthia Olsen, M.D.; and Carmen Wong, M.D.
Outreach Workers Advance Research Efforts
by Deborah Vetter

Rickie Foster has earned the respect and trust of his co-workers, neighbors, and family. Perhaps surprisingly, Rickie is also accepted and trusted in another community—the community of a drug user.

Through his experiences growing up in the inner city, Rickie has learned the social networks of the drug-using community. Knowledge of these networks makes him a valuable resource for researchers in the Wright State University School of Medicine’s Substance Abuse Intervention Program (SAIP), which works closely with people like Rickie to achieve specific research objectives.

The SAIP research team, under the direction of Harvey Siegal, Ph.D., professor of community health and of sociology, brings together experts to investigate these and other social and public health problems. For the past eight years, Robert Carlson, Ph.D., associate professor of community health and a medical anthropologist and ethnographer, has teamed up with outreach workers like Rickie to meet and talk to drug users. Russel Falck, M.A., assistant professor and project director, and Jichuan Wang, Ph.D., associate professor and statistician, develop surveys and conduct appropriate statistical analyses from the responses.

Success in applying the principles of ethnography and medical anthropology are directly related to mutual respect and trust between the researcher and the research participant. "Outreach workers play a pivotal, crucial role in our projects," explains Dr. Carlson. “They identify potential participants and help us gain their trust.”

Ethnographers conclude that there are patterns to the way drug users behave, create meaning in their lives, and perceive their place in society. To really know an alternative way of living, a researcher must “step into” that system and “live the life” to the extent that is ethically and legally possible. “The medical anthropologist,” explains Dr. Carlson, “steps into other people’s worlds with a nonjudgmental ear.” Ethnographers are also skilled at translating relationship patterns evident in one environment in terms that make sense in another. Through these translations, “We give members of this community a voice,” says Dr. Carlson.

Ethnographers and medical anthropologists build on qualitative research methods that are continually being refined by field researchers like Dr. Carlson. The purpose of the most recent research study is to understand the natural course of crack cocaine use in Dayton. “We go to crack houses to talk to people and we conduct in-depth interviews in our offices,” Dr. Carlson says. Specifically, SAIP’s research team is interested in the way an individual’s drug use changes over time, the kinds of health problems a drug user faces, and the barriers for drug users in receiving health services.

Initially, the researchers observe and record what is said and done. Later, they will use the information collected through the interview process to design survey questions that are sensitive to local and cultural practices. Surveys developed from qualitative research methods become tools for measuring (quantifying) the results of the
Outreach workers play a pivotal, crucial role in our projects.

Before drawing conclusions, the research team often turns to outreach workers to corroborate the accuracy of the drug users’ responses.

Insight into the culture of drug users gained from SAIP’s research projects is invaluable in developing prevention, intervention, and medical treatment programs. Ethnographic research findings can be used to support or refute the appropriateness of public health policy. One SAIP study helped transform the public health perspective that users wanted to share their needles. Findings that refuted that perspective were published in a 1996 award-winning journal article, “The Political Economy of AIDS among Drug Users in the United States: Beyond Blaming the Victim or Powerful Others,” published in American Anthropologist.

Dr. Carlson envisions researchers—specifically, ethnographers who are conducting AIDS prevention research—as advocates for this section of society. “Drug users have been stigmatized in our society,” emphasizes Dr. Carlson. As a “marginalized segment of society” drug users are “isolated, often disadvantaged, and without necessary resources. We’re working with the forgotten members of the community.”

Above: Robert Carlson, Ph.D., associate professor of community health, medical anthropologist and ethnographer.

Below: Dr. Carlson (far left) with outreach workers Don Quee, Sherry Osborne, Connie Tidwell, and Rickie Foster.
The classes of 1999 and 2000 rose to the challenge presented to them by Kara Levri, Class of 1999. She was inspired by a lecture on bone marrow transplants given by Neal Rote, Ph.D., professor and chair of immunology and microbiology, at the end of the first year of medical school. He explained the difficulty of bone marrow matching and about the National Marrow Donor Program Registry (NMDP), established in 1987.

Kara and her classmates learned that a patient’s most likely match outside the immediate family is someone of the same racial or ethnic group, and minority patients are less likely than nonminorities to find matched donors on the NMDP Registry. The NMDP is currently conducting national recruitment campaigns to find volunteer marrow donors from the African American, Asian/Pacific Islander, Hispanic, and American Indian/Alaskan Native communities. The registry contains information on 2,648,883 volunteers willing to donate their marrow to patients needing matched donors to treat leukemia, lymphoma, and a host of other blood disorders. As of March 1997, the NMDP has facilitated more than 5,400 marrow transplants for unrelated patients throughout the world.

During the lecture, Dr. Rote strongly encouraged the students to donate blood samples for tissue typing to register in the NMDP. “This is something that you can do to actively help somebody,” he told them. Kara turned to her classmates, raising with them the questions: How committed are we to serving future patients? Are we willing to do something now?

She waited a year until the Class of 2000 had the same lecture so they, too, would understand the need and be eager to participate. Kara then proceeded to set up a friendly competition between the classes to register. Phi Rho Sigma, a medical student community service organization at Wright...
“As future physicians, we may treat patients who need a bone marrow transplant and it would be hypocritical for us not to be registered in the bone marrow program.”

State, agreed to help her organize and sponsor the event. Other collaborators joined in the effort too. The Dayton Community Blood Center agreed to spend an afternoon in the diagnostic labs at Wright State’s Frederick A. White Health Center. Three medical students volunteered their time and hands-on expertise. Pat Abouhassan, Class of 2000 and a registered nurse, and Ann Marie Stuart and Innocent Odocha, both phlebotomists from the Classes of 1999 and 2000 respectively, helped the nurse from the Blood Center draw the blood of their classmates. The expensive tissue typing costs were shared by the School of Medicine and the Community Blood Center, and food and drinks were donated by Meijer, McDonald’s, and Papa John’s Pizza.

“Giving two teaspoons of blood might help save someone’s life in the future,” explained Ms. Levri. “As future physicians, we may treat patients who need a bone marrow transplant and it would be hypocritical for us not to be registered in the bone marrow program. Also, we’re not waiting until our third or fourth years to help other people, we’re starting now.”

The challenge was met with resounding success. The Community Blood Center collected blood from a total of 97 medical students as well as faculty and staff for the NMDP Registry. And, the first-year class had just three more donors than the second year’s.
“I don’t like the looks of this. It could be basal cell carcinoma,” concurs Julian Trevino, M.D., when asked to confirm the resident physician’s diagnosis. What Dr. Trevino, assistant professor and section chief of dermatology, has identified as cause for concern is no larger than a freckle, nor does it differ to the untrained eye as anything but one. Yet, the somewhat surprised middle-aged participant in the annual skin screening quickly agrees to make an appointment for a more thorough exam.

For 10 years, the Section of Dermatology has coordinated and conducted free screenings during national Melanoma/Skin Cancer Detection and Prevention Month sponsored by the American Academy of Dermatology (AAD). This past spring, Dr. Trevino and a team of nine local dermatologists and 11 resident physicians were among the 3,000 physician volunteers nationwide.

Individuals who are concerned about a skin lesion are particularly encouraged to attend, but the screenings are good preventive medicine for everyone. More than 600 individuals attended the five-minute screenings held throughout Greater Dayton in physician offices, hospital outpatient clinics, and community health centers. Approximately one-third were referred for further treatment or tests for skin disorders.

Within a few days of Dr. Trevino’s observation, the participant was seen by Lisa Gelles, M.D., assistant professor of dermatology, and Michael Cairns, M.D., the dermatology resident who first noticed the lesion. After a careful examination, they performed a skin biopsy and set up another appointment with the patient to discuss the results. The biopsy, back within the week, confirmed the original diagnosis—basal cell carcinoma. Minor outpatient surgery under local anesthesia removed all traces of the cancer.
“We want to find and cure cancers before they can become dangerous, and it is gratifying when our efforts are successful.”

In this patient’s case, Dr. Gelles notes, “The lesion probably would not have been dangerous for a couple more years. But at that point, we may have had to do extensive surgery. Now we know this patient is at risk, and we will conduct frequent checkups because there is a 50 percent chance that this patient will develop another dangerous lesion.” Adds Dr. Trevino, “This case represents the kind of outcome we hope for in screening. We want to find and cure cancers before they can become dangerous, and it is gratifying when our efforts are successful.”

The screening has two main goals, explains Dr. Trevino, “We focus on early detection, particularly for melanoma. Early detection means less invasive treatment, and in the case of melanoma, the difference between life and death. Detected early, skin cancer remains one of the most curable of cancers. We also regard this as a public education function. The public needs to be aware of the dangers of sun exposure and the importance of early detection. We disseminate information on how to do self-exams, how to recognize potential skin cancers, and how to avoid damage to healthy skin.”

All participants are given a carbon copy of the screening results and, if referral is necessary, a list of local dermatologists. Copies of each screening are also sent to the American Academy of Dermatology for statistical analysis. According to the AAD, skin cancer is the most common form of cancer in the United States with one million new cases diagnosed each year. Since the national screening program began in 1985, more than one million individuals have undergone the free screenings, and 84,300 suspicious lesions, including approximately 12,100 suspected melanomas, have been detected. In addition, the screenings give the public “unique access to free expert skin evaluations.”

“I see these screenings as addressing an important public health issue because the incidence of all skin cancers is rising so dramatically,” states Dr. Trevino. “This is the single most important community service project we undertake, and we spend a great deal of time preparing for it.”

Coordination of the yearly screening is managed locally and is handled differently in every community. “Some cities, both large and small, do not have community screenings at all,” explains Dr. Trevino. “I feel fortunate that in Dayton we have the kinds of collaborative relationships that allow for community-wide screening efforts. Here, the hospitals and local physicians are very supportive and our combined efforts benefit the entire community.”

One patient, now cancer free, would certainly agree.
Many of Megan Baker’s responsibilities are laid out for her: She gets up, goes to her rotation site, works with patients, studies medical reference books to support the days’ new lessons, comes home, goes to bed, then begins again the next day.

Yet, within the fullness of a third-year medical student’s days, Megan has also volunteered at the Miami Valley Hospital AIDS Foundation, presented a published abstract nationally, and competed on a National Champion/World Cup precision skating team.

Baker says variety, service, and challenge keep her balanced. “Some people ask, ‘How can you go to medical school and participate in all these other activities?’ I respond, ‘How could I get through school without them?’”

A native of Cleveland, OH, Baker says her love both for skating and people directed her to medicine. “Some of my high school and college friends from skating had AIDS, and I helped care for them,” she explains. “I learned that friends and family don’t always accept and understand an illness like AIDS, and this may leave them with no one to rely on. The importance of fairness and efficiency in community health began to register in the back of my mind.”

Baker received her B.A. degree in political science and economics at Columbia University in New York City. While weighing the options of working toward a Ph.D. in economics or attending medical school, she volunteered in the pediatric emergency room at St. Luke’s Hospital, NYC. The experience felt right. “The idea of becoming a doctor finally clicked as I began to work with patients here at Wright State. I see how I can integrate science, computers, and cost-control analysis with helping people.”

Success marks Megan’s first two years of medical school. She and classmate Alison Moon created a presentation on substance abuse for the school’s Student-to-Student program, a health education program for local kindergarten through 12th grade students. She has also maintained her precision skating involvement, practicing each Saturday morning and competing four to five weekends each year. “I grab my books and earplugs for studying and go!” she says.

Through a grant from the American Heart Association, Megan conducted research on the cost-effective analysis of cardiac evaluation in electrically injured patients. Sidney Miller, M.D., associate program director and professor of surgery, and Michael Johnson, M.D., mentored and supported Megan throughout the project. Her abstract was accepted for publication and was chosen for oral presentation at the American Burn Association Meeting and the National Student Research Forum — accomplishments rare among second-year medical students.

Baker hopes to blend public health advocacy with policy, capitalizing on her interests in medicine and economics. “I want to show that there is a way to provide complete health care, cost effectively . . . I want to make a difference with sincerity, compassion, and knowledge.”

— Brook Chalfant
Lawrence Prochaska, Ph.D.

“The road to success can lead you in many directions.”
— Unknown

The road Lawrence Prochaska, Ph.D., is traveling these days will take him to becoming the CEO of the Ohio/West Virginia Affiliate of the American Heart Association (AHA). Dr. Prochaska, associate professor of biochemistry and molecular biology, has recently been chosen president-elect of this affiliate of the AHA. Volunteerism is important to Dr. Prochaska. He explains, “The mission of the AHA is to eliminate death and disability caused by cardiovascular and cerebrovascular disease. My work with AHA complements my research activities and vice versa.”

In addition to his highly regarded research (more than 90 publications, abstracts, and presentations), his laboratory is a training ground for students of all ages. He has had high school students working on research projects as well as undergraduate and M.S., Ph.D., and M.D. graduate students.

Dr. Prochaska’s leadership skills are evident in other areas as well. The design and implementation of the new curriculum that will be instituted this fall at Wright State University School of Medicine is another avenue of interest to Dr. Prochaska. He chaired the committee that planned the Molecular, Cellular, and Tissue Biology course, and will serve as course director for this new Year One course.

In what free time he has, Dr. Prochaska hits the road running to keep himself heart–healthy, and admits that he enjoys playing volleyball and softball “when the graduate students let me.”

Dr. Prochaska was selected as the first recipient of the Miami Valley American Heart Association Research Award in 1996. The Wright State University Academy of Medicine also recently recognized his talents with the presentation of the 1997 Outstanding Senior Faculty Award for Outstanding Achievement in Medical Teaching and Research.

— Mary Lou Graham
Medical students will soon benefit from the generosity and forethought of two donors.

The Ranville Fund has been endowed with a $376,000 bequest from the estate of Mr. Donald Ranville. Three or four scholarships of $5,000 will be awarded annually to third- and fourth-year medical students beginning in 1998. The students will be chosen based on financial need and academic standing. Mr. Ranville, who died in April 1996, lived in Fairborn and was employed by Southwest Portland Cement Company.

In addition to Mr. Ranville’s gift, Mrs. Virginia Hyde Sultzbach bequeathed $10,000 to the school in memory of her father, W. B. Hyde, M.D., and grandfather, W. F. Hyde, M.D. Mrs. Sultzbach lived in Beavercreek with her husband Roy until his death in 1978. In 1979, Mrs. Sultzbach moved to Trinity Retirement Community, where she remained until her death this past February.

The thoughtful and generous gifts from Mr. Donald Ranville and Mrs. Virginia Hyde Sultzbach are just two examples of the benefits planned gifts offer to both the donor and the school. Through careful planning, donors find charitable gift planning can provide opportunities to preserve their carefully built assets, provide for their loved ones, realize savings in income and estate taxes, and support the school in ways and amounts far greater than they thought possible.

A charitable bequest is the most common form of planned giving. A growing number of individuals in recent years, however, are recognizing the value and enjoying the benefits of gift planning using charitable gift annuities and charitable remainder trusts. Assets to consider for gift planning include cash, appreciated securities, real estate, life insurance, and pension plans.

We encourage our friends to let us know when they include the school in their estate plans. Not only can we express our appreciation, but we can make sure they are kept up to date with the many new and exciting developments occurring in the school.

**Adventure Golf Scholarship Classic**

Medical students volunteered their time on Saturday, May 17, to help host the Second Annual Adventure Golf Scholarship Classic, which raised more than $1,900 to benefit general scholarships in the School of Medicine. The miniature golf tournament was held at Adventure Golf on North Main Street in Dayton.

Grand prize winners, Mike Herbenick, Year II, and Dan Williams won a one-week vacation to Florida compliments of All World Travel. Other major tournament sponsors included Merck Co., Adventure Golf, and the Academy of Family Physicians. Several residency programs also participated in hole sponsorship.

Maurice Young, Year II student, was one of more than 60 students who helped make the Adventure Golf tournament a great success.
Women's Advancement Awards
The School of Medicine recently garnered two of the three inaugural Women’s Advancement Awards granted by Wright State University. The awards were to honor those individuals, units, or organizations that have engaged in exemplary work to raise the status of women at Wright State. Jeanne Lemkau, Ph.D., professor and vice chair for research of family medicine, received the Achievement Award for her outstanding work in research, teaching, and scholarship.

Nominated by Cynthia Olsen, M.D., the School of Medicine received the Advocacy Award for its outstanding service in advocating for improvements in the lives of women. The nomination cited the number of women medical students enrolled and the support services available to them, faculty development and leadership opportunities, and the large number of women role models at the school.

President's Award for Excellence for an Outstanding Unit
The Weekend Intervention Program (WIP) recently received the President’s Award for Excellence for an Outstanding Unit at Wright State University. The program is one of several in the School of Medicine’s Substance Abuse Intervention Programs. WIP is an intensive, three-day residential education program for individuals involved in a drug or alcohol offense. Operating since 1978, WIP has become widely known as “the Wright State Model” and has been replicated throughout North America. Phyllis Cole, M.A., program manager, accepted the award for the unit.

President's Award for Faculty Excellence in Teaching
Jane Scott, Ph.D., chair and associate professor of anatomy, received the prestigious Presidential Award for Faculty Excellence in Teaching at the University’s Convocation. The award is given as part of the annual “Three Legs of the Stool” award to recognize individuals who excel in teaching, research, and service.

Brage Golding Distinguished Professor of Research Award
Robert Fyffe, Ph.D., professor of anatomy and director of the Biomedical Sciences Ph.D. Program, received the Brage Golding Distinguished Professor of Research Award. Recipients of this award have demonstrated significant scholarly achievement that garners national and international recognition.
Welcome, Class of 2001

On August 10, Wright State University School of Medicine officially welcomed the Class of 2001 at Convocation. During the ceremony, students received their “White Coat” and recited the Hippocratic Oath for the first time. Students then headed into Orientation Week, designed to acquaint each new class member with each other, faculty and staff, and the school. Class members also participated in a Fun Run/Walk and a day-long outdoor education course at Camp Joy.

Research Forum

The Spring Central Research Forum brought together researchers for a poster display, reception, and guest lecture from Donald Vereen, M.D., special assistant to the director of the National Institute on Drug Abuse. The lecture, entitled “Drug Abuse and Addiction: New Insights from Research,” focused on the issues and problems facing the nation in these areas. These problems include how to develop drug abuse and addiction policies based on National Institutes of Health-funded research findings. The poster display, consisting of more than 75 posters, depicted research and scholarly activities from faculty in the fields of medicine, nursing, professional psychology, and science.
We’re interested in your opinion!  
Please take a moment to complete our reader survey, then fold and drop in the mail.

Did you read all of *Vital Signs*?  
\[\begin{array}{c|c|c|c|c} 
\text{All} & \text{Most} & \text{Some} & \text{None} \\
\hline 
\end{array}\]

If you did not read all, check the main reason why you did not:

- Lack of time
- Content not of interest
- Articles too long
- Articles not timely
- Publication too long
- Other, please specify _______________________________________________________________________

Would you like the articles in *Vital Signs* to be:

- More detailed
- Stay the same
- More general
- Other, please specify _______________________________________________________________________

Would you like more or less of the following types of information in articles? (check all that apply)

<table>
<thead>
<tr>
<th>Type of Information</th>
<th>More</th>
<th>OK as is</th>
<th>Less</th>
</tr>
</thead>
<tbody>
<tr>
<td>More detailed</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Historical</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>About research activities</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>About clinical medicine</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>About faculty</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>About alumni</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>About or by students</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>About educational or curricular issues in medicine</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>About financial and policy issues in medicine</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Other, please specify</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

Your overall impression of *Vital Signs* is:

- Highly favorable
- Favorable
- Unfavorable
- Highly unfavorable

If you could change one thing about *Vital Signs*, it would be:

_________________________________________________________________________________________

This survey was completed by:

- Faculty
- Staff
- Student
- Resident
- Alumni
- Other