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25 Years: Creating a National Model for Medical Education

Established in 1973, Wright State University School of Medicine was conceived with the community to meet its health care needs. Its founders envisioned a medical school that did not own a teaching hospital. Instead, the school's faculty would share their expertise with the entire community through affiliations with local hospitals and other health care institutions.

A supportive community and dedicated faculty and staff enabled the School of Medicine to fulfill the vision of its founders. Eight major teaching hospitals house our

clinical departments and provide diverse clinical training in primary and specialty patient care. Two of these hospitals are peerless federal hospitals, and the school is affiliated with almost 30 other health care institutions. Interwoven missions of education, research, and service link the school to its community in a variety of partnerships.

John Lindower, M.D., former executive associate dean for the school, chaired the original committee charged with the responsibility of developing the new school's curriculum. In retrospect,

he believes the new school's founders accurately predicted community needs and anticipated national trends in medical education. Pioneering innovations—early clinical exposure, required medical ethics, economics, and legal issues, an admissions procedure with community input, rotation through various community sites, a unique selectives course, and a nurturing learning environment—remain hallmarks of the school.

Later challenges included the use of technology for both student learning and patient care, an increase in managed care, and

1973



Ohio State legislature appropriates capital funds for the new medical school.

1974



John Beljan, M.D., founding dean, is hired to establish the school.

1975

The school establishes "matrixed" departments with WSU's then College of Science and Engineering.



The Anatomical Gift Program begins at WSU.

The school's Admissions Committee is formed with a majority community representation.

1976



The innovative Selective Program is established.

"Introduction to Clinical Medicine," a course that gives clinical experience for Biennium I students, begins.

The Department of Medicine in Society teaches values and professionalism in required, rather than elective, courses.

The charter class of 32 is admitted.

1977



The Medical Sciences Building is dedicated.



The Department of Pathology develops the 20-headed microscope to facilitate group learning.

1978



The BMS Ph.D. program accepts its first students.



Horizons in Medicine, a program to encourage greater participation of minorities and disadvantaged individuals in medicine, begins.

The civilian aerospace medicine residency program, a collaboration between WSUSOM and Wright-Patterson Air Force Base, is established.

1979



The school purchases Yellow Springs Family Health Center as a teaching site.



Groundbreaking for Phase II of medical school facilities is held.

LCME grants a Letter of Reasonable Assurance of Accreditation.

The Veterans Administration pledges \$19.7 million to the school.



MODEL

**“THE CURRICULUM
DARE NOT BE CAST IN
CONCRETE . . . IT MUST
BE LEFT FLEXIBLE
ENOUGH TO MEET A
CHANGING PROFESSION.”**

interdisciplinary and interprofessional learning experiences. These, too, were anticipated. Dr. Lindower remembers the caution expressed during the original curriculum committee 20 years ago: “The curriculum dare not be cast in concrete . . . it must be left flexible enough to meet a changing profession.”

Quickly, the school became a national model of medical education, ranking at the top in comparisons for women and minorities in medicine and for the percentage of graduates entering needed primary care practices. Its graduates are

highly successful in competing for and completing residency training. Approximately one-third of our graduates remain in the greater Miami Valley; another third establish practices in Ohio.

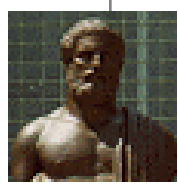
The true measure of success is reflected in our alumni—highly qualified physicians in the full complement of medical specialties who care profoundly about, and for, their patients and their community. ☞

—Judith Engle



John O. Lindower, M.D., was instrumental in developing the new school's first curriculum.

Research Certificate Program in Biochemistry is established.



The Dayton Hellenic Cultural Society gives a bust of Hippocrates to the medical school.

WSUSOM becomes fully accredited.



William Sawyer, M.D., becomes the new dean.

The charter class graduates.

Interprofessional courses “Coping with Loss and Death” and “Suicide and Interpersonal Violence” become part of the selectives program.

Attending Weekend Intervention Program to learn about substance abuse intervention becomes a requirement for all medical students.

The Frederick A. White Health Center opens.



“Biometrics,” a course in biostatistics, is added to the Year II core curriculum.

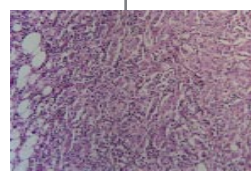
The school develops a prematriculation program to help students gear up for their first year in medical school.

The course “Ethics in an Interprofessional Context” is added to the selectives program.



The Health Sciences Building opens.

WSUSOM ranks first in Ohio in the percentage of minority students admitted.



Medical physiology is reorganized to include cellular and membrane physiology.

Emergency Medicine establishes first anatomy course for PGY-III in emergency medicine.



John Bullock, M.D., starts the first and only ophthalmology fellowship in Dayton.

Nurturing the Qualities That Make a Good Doctor

The landscape of American health care has changed dramatically in 25 years. So have the support services provided to Wright State medical students to prepare them for an ever-changing profession.

As the economics of health care changed, medical students needed personal health insurance. As infectious diseases such as HIV and hepatitis B spread, occupational health policies and procedures were needed to safeguard medical students in clinical training sites. As medical practices changed with the advent of managed care, more attention had to be paid to students' professional development. Along the way, the mission

of Wright State's Office of Student Affairs and Admissions has expanded to meet these needs.

J. Robert Suriano, Ph.D., the first associate dean for student affairs and admissions, set the tone. "Bob Suriano was a role model for all of us," recalls Paul Carlson, Ph.D, who is associate dean today. "He emphasized that students come first. They aren't the bottom of the totem pole, but valuable members of the health care team. Helping them in their education is our whole reason for being here."

Dr. Suriano recognized that meeting Wright State's mission as a medical school — emphasizing primary care, training physicians from diverse backgrounds, nurturing lifelong learning strategies — meant a new approach to selecting medical students. Medical school admissions traditionally had emphasized academic criteria such as grade point averages and MCAT scores. Solid academic preparation has always been a requirement at Wright State, but the admissions committee also looked for qualities



J. Robert Suriano, Ph.D., was the first associate dean for student affairs.

1987

Emergency Medicine establishes objectives-based emergency medicine curriculum for medical students.



Stephen Kaplan, M.D., becomes dean.

Emergency Medicine develops Clinical Preparation Clerkship (Now ICM III) for transition between Biennium I and Biennium II.

1988



John Bullock, M.D., and Blair Rowley, Ph.D., develop the first computerized model of the pupil of the eye.



Internal Medicine develops ambulatory clerkship rotation.

Internal medicine faculty publish standard text *Clinical Medicine Selected Problems with Pathophysiologic Correlations*.

1989



Multidisciplinary course in neuroscience is introduced and becomes the model for the new system-based curriculum.

1990



Kim Goldenberg, M.D., becomes dean.

A major community-academic partnership, later established as the Center for Healthy Communities, receives start-up funding from the Kellogg Foundation.

1991

Emergency Medicine: An Approach to Clinical Problem Solving, which becomes a teaching standard in more than 40 medical schools, is published.

Psychotherapy Clinic opens.

1992

The Office of Geriatric Medicine and Gerontology establishes the only national fellowship in Law, Health Care, and Aging.



Objective Structured Clinical Exam, using simulated patients, is established.

Five videomicroscopes with high-resolution cameras and monitors are added to pathology.

**“WE WANT DOCTORS WHO
PUT PATIENTS FIRST.”**

Paul G. Carlson, Ph.D., (L) current associate dean for student affairs, with students at orientation.



and experiences indicating that an applicant would be a compassionate, caring doctor.

“This is a helping profession. We want to know what applicants have done to demonstrate their interest in helping people. We look for the quality of their experiences, not just the quantity,” says Dr. Carlson.

Wright State’s admissions process has evolved over the past 25 years by continuing to develop more effective ways to discern and evaluate the “humanistic qualities” that make a good doctor — maturity, motivation, interpersonal skills, and concern for others.

“We want doctors who put patients first. We’re looking for

individuals who are empathetic, who have good communication skills and are willing to learn,” Dr. Carlson says. “If we want our graduates to continue to nurture those qualities as they practice medicine, we have to give them enthusiasm, idealism, and support while they are medical students.”

Support for students takes several forms. Academic support is provided in a free prematriculation program for students who want to get a head start on the basic sciences before Year I begins; study skills training, tutoring, and board exam preparation are available as needed. Sensitivity training

helps students understand other cultures, and teambuilding activities enable them to work together in a noncompetitive environment. Financial aid and personal counseling help students deal with more personal issues, including debt reduction and stress management.

“We have an open-door policy for students,” explains Dr. Carlson. “Our goal is to offer as much support as possible for our diverse student body. We want our students to be successful.”

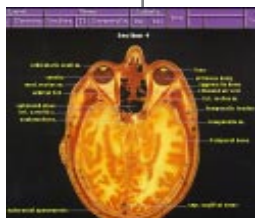
—Mark Willis

Emergency Medicine publishes a test management program to enhance curriculum.

Short-Term Research Experience Access for Minority Students program is established.

Dayton’s first Child and Adolescent Psychiatry Fellowship is accredited.

More than half of this year’s class are women, an accomplishment of only 11 medical schools.



Anatomists Gary Nieder and Frank Nagy develop *Beyond Vesalius* to enhance student learning in gross anatomy.



Computer-aided instruction is included in medical physiology.

Anatomy faculty develop educational software in several areas of study.

Dayton Area Graduate Medical Education Consortium is established.

First M.D./Ph.D. student.

The E. W. Kettering Family Scholarship in Geriatric Medicine is established.

Electronic Digital Didactic Curriculum for Residency in Emergency Medicine is developed.



The Association of American Medical Colleges ranks WSUSOM second in the nation for the percentage of its graduates entering primary care specialties.

The New England Journal of Medicine rates the two-volume textbook edited by the chair of psychiatry as #1 in the country.



Year I & II students undergo health risk assessments as part of the curriculum.

The new system-based curriculum is launched for Year I.



The William and Blanche Schneider Scholarship fund is established.

Postdoctoral Fellowship in Biochemistry and Molecular Biology is established.



A new basic science laboratory opens at the Dayton VA, complete with 50 computers and instruction programs.

The Department of Family Medicine receives the Gold Award for having more than 30 percent of our graduates enter family medicine.

Anatomists Gary Nieder and Frank Nagy garner national recognition for their educational software.

The first Forensic Psychiatry Fellowship in Dayton is established.

The first national educational competencies list for psychiatry is developed.

Vantage Point: Year II Student

Samia Warwar Borchers



I was truly honored to be chosen as a member of the charter class of the new medical school at Wright State University. Since I am a Dayton native, I knew of the excitement and importance of having a medical school in our community. I remember how the community and private hospitals, the VA, and Wright-Patterson AFB seemed to all come together for a common goal.

The medical faculty were great and would invite us to their homes for home-cooked meals. I remember when one preceptor, now a retired family doctor, sat me down in the cafeteria and started discussing his 20-year-old medical school notes that he pulled out of his attic for me! Another family doctor, my mentor, once drove through a blizzard from Springfield when he heard of some classroom help I needed.

It is with deep appreciation to all the Wright State University School of Medicine pioneers, too many to mention, that I give my sincere gratitude.

Samia Warwar Borchers, M.D. ('80), is in private practice in dermatology in Dayton, Ohio.

The main impetus for my pursuit of a medical career has been my desire to join the profession that gave me a second chance at life. In September of 1991, while walking across a parking lot in Toledo, I was struck by a pick-up truck. I suffered a severe concussion, which rendered me unconscious for about 18 hours, and I actually stopped breathing at one point. My “terrible triad” knee injury later required surgery. For about four weeks following the incident, I suffered from diplopia (double vision). This was terrifying because I didn’t know when my vision would correct itself, and because the inability to concentrate on one thing makes everything unclear.

The team at the emergency department performed their jobs expertly and compassionately. The professionalism and compassion with which I was treated during my four days spent in ICU made me want to do for others what had been done for me.

I wanted to go to medical school, but self-doubt stopped me for several years. Working in financial sales, where making money is the sole goal, I wondered to myself if this is all there is. I envisioned myself on my deathbed questioning whether I had done what I could to make a positive impact upon the world around me. Finally, I realized I would be haunted by these thoughts unless I *at least tried*. Once I made the commitment, I was quite successful and performed well enough in my

premed classes and on the MCAT to gain admission to medical school. Little did I know, this was when the real challenge would begin.

Suddenly 93 impressive classmates with outstanding credentials surrounded me. Everyone arrived with a history of high academic achievement, placing at the top of their classes in undergraduate work. Some held graduate degrees or even multiple graduate degrees. Many already had a good deal of clinical experience. I quickly recognized that in this class of high achievers, it is quite an achievement to be *average*.

I began medical school at the age of 29, with a degree in English literature, instead of the norm—biology or chemistry. I felt like a very small fish in a huge pond. I almost expected someone to approach me and say, “I’m sorry, we’ve made a mistake.” Fortunately, that didn’t happen, and I soon found I had more in common with my classmates than I thought.

We are all dedicated to upholding the highest standards of ethics and professionalism. It is truly a privilege to be part of a group of individuals with such strength of character and resolute dedication to the service of others. I began buying anything I could get my hands on that had Wright State University School of Medicine on it. I wanted to exclaim, “I am a WSUSOM medical student!”

The class work soon sobered me up a bit. The first year of medical school is hard. This

“MATHATHON”

statement of the obvious cannot be fully understood until one has been through it. In premed classes, I studied until I learned all the material presented to me or crammed the night before. Here, understanding the material has not been a problem; it is the sheer volume of information we are expected to assimilate that has been difficult. Cramming didn't work anymore and there was more information than I could possibly learn in the time allotted. The incessant pounding of wave after wave of material in the MCTB (Molecular, Cell, and Tissue Biology) marathon course was

feeling of helpless terror I felt after my accident. Once again, I had trouble focusing on one thing.

During this tumultuous time, my classmates, with few exceptions, kept on very brave faces. Maybe this is no problem for them, I thought, and became all the more intimidated. Here I was, visibly stressed out, while everyone else seemed to calmly and methodically work through the material. Afterwards, I had some heart-to-heart discussions with some of my classmates regarding their experience. As it turns out, many of them felt the same way I did. My classmates can most accurately

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nse, things seemed to fall
nto place. School was
more rewarding and less
stressful.

My “vision” cleared. 🍷

—James Graybill, Year II

John Lyman



As I reflect on my medical education at Wright State, two things are preeminent. First, the quality of education was excellent—thoughtful, of appropriate depth, and compassionate. It provided a framework for the science of medicine and also stressed the humanistic components of medicine. Second, I am forever grateful for the community-based nature of the education. It has been extremely valuable in my field of emergency medicine to have learned in a variety of community settings from a variety of practitioners.

John Lyman, M.D. ('80), is a regional director for a multispecialty group whose emphasis is emergency medicine and also serves as the medical student coordinator for the WSU Department of Emergency Medicine. He is also actively involved with the American Academy of Emergency Physicians and is an examiner for the American Board of Emergency Medicine.

John Darwood



Wright State School of Medicine built a solid foundation for my current practice at the Kennedy Space Center and Cape Canaveral Air Station. After a family practice residency at Good Samaritan Hospital in Dayton, I completed Wright State's Master in Aerospace Medicine Program.

Most of my practice is occupational medicine. I also am part of the medical operations for space shuttle launch and landings, and I am with the impact convoy during unmanned launches. I have international medical experience by supporting the shuttle's emergency landing site in The Gambia, Africa.

John Darwood, M.D. ('83), is in practice with Occupational Medicine and Environmental Health Services located at the Kennedy Space Center, Florida.

Many of my classmates have shared with me the peaks and valleys of what has been one of the most interesting and unique years of our lives. For most of us, the third year was like a roller coaster. From the joy of making a diagnosis to the adjustment of working all day after a night on call, the new experiences are too numerous to count. However, along with the new came dozens of opportunities to look back at the first two years of medical school and discover how well our instructors and preceptors had been preparing us for this year—the big hill.

As I stood in surgery, with my nose itching from behind my mask, I suddenly found myself transported back to the gross anatomy lab. Staring down at the patient before me, I saw arteries, muscles, and organs, the names of which rolled off my tongue, thanks to Dr. Scott and others urging us to “talk the talk.”

As I talked with a patient about the various side effects of his medication, it almost felt as if I was back in the medical sciences auditorium listening to a pharmacology lecture. While I wondered if a child might have strep throat, I could distinctly recall the sight and smell of multicolored petri dishes growing specimens for us to identify.

The ethical debates from community health found their way into my third-year clerkships as well. I could almost hear Dr. White

and Dr. Reece as my team needed to determine competence during my psychiatry clerkship or as we helped families with end-of-life issues while they held their relative's hand for the last time.

Although I was able to call on each and every basic sciences course for help this year, perhaps no course laid the framework for this first clinical year better than the familiar Friday at ICM, or Introduction to Clinical Medicine. Returning to the roller coaster analogy, I compare those first two years of ICM to being “too short” for the big rides. While experiencing the minor ups and downs of the “child's ride,” we were learning how to hang on when the hills got steeper. Dr. Binder and colleagues deserve commendation for pacing ICM so well and carefully guiding us as we cultivated our skills.

I can recall the first ICM interviewing sessions in my first year, scared that I would never be able to take a complete history in only 45 minutes! At first awkward and unsure with our otoscopes and reflex hammers, those weekly sessions kept us practicing so we could confidently enter a room and return with the correct findings, putting us on track for the roller coaster's highest hill. I often reflect to one short year ago and marvel at the difference that year has made in my confidence and abilities.

ER COASTER

One positive aspect of third year has been the opportunity to work at many Dayton area hospitals and offices. Widely known and recognized for its community involvement, the school's diversity of clerkship locations creates a unique learning experience. Some of my classmates chose to do ambulatory family practice or internal medicine at clinics in



at a suburban pediatrics office. Some classmates' pulses quickened at the sound of the Care Flight helicopter bringing the area's trauma cases to the team. Still others were comfortable with a unique psychiatry experience at the state facility.

As I begin to apply to residency programs and start my final year of medical school, I am thankful for the many opportunities I have had to explore my interest in geriatric medicine. While participating in the Department of Family Medicine's Summer Research Fellowship, I helped investigate how positive and negative life events impact upon the well-being of older adults. In addition, I was able to schedule my clerkships at several sites that serve large numbers of elderly patients.

As an entering first-year student, I knew of Wright State's dedication to primary care and commitment to early clinical exposure. While these seemed like good ideas, I have only begun to gain insight into how well prepared I will be when I start my residency.

It is time to climb back into the roller coaster car and pull the bar down over my head for a turn on the never-ending rollercoaster of medical school. It is rewarding and challenging career.

—Julie V. Levenson, Year IV

Evangeline Andarsio



Exposure to clinical medicine in my first two years of medical school through Introduction to Clinical Medicine (ICM) was invaluable. As I learned the basic medical sciences, ICM sustained my desire for patient care. It was wonderful being exposed to excellent clinical and compassionate role models. I also enjoyed my medical science professors, who were clearly committed to the students.

During my clinical years I received an excellent community-based medical education with lots of hands on experience. I have been able to continue this spirit throughout my residency training and eight years in private practice as an obstetrician/gynecologist.

Evangeline C. Andarsio, M.D. ('84), is an OB/GYN in private practice in Dayton, Ohio.

Kimberly Bethel-Murray



It occurred to me at the ripe age of five that I wanted to be a doctor in order to help people. I used to mix all kinds of household chemicals together, trying to make a cure for all the sick people in the world.

My initial dream was to deliver babies. However, the primary care emphasis of Wright State helped me realize that I could help more people by treating a broader spectrum of conditions and diseases, so I chose internal medicine.

Kimberly Bethel-Murray, M.D. ('87), (L) is currently practicing at Trotwood Physician Center, Ohio. She has just become the first woman president of Gem City Medical, Dental, and Pharmaceutical Society.

What subject matter and/or skills do you teach?

I teach evidence-based medicine, research design and methods, biostatistics, and clinical epidemiology to medical students, residents, fellows, and faculty. Also, I collaborate with faculty on both educational and research matters. In education I am especially concerned with helping faculty improve how they evaluate students, evaluate their teaching and program, and improve all aspects of their teaching. In research I consult on both medical education and clinical research, helping faculty design studies, organize and analyze data, and prepare manuscripts for publication.

From your experience, how is Wright State University School of Medicine different from other medical schools?

Our teaching and learning environment is less formal and rigid than many other medical schools with which I am familiar. This allows for more significant innovation to occur during a shorter period of time. Similarly, collaboration with colleagues on education and research projects is more productive because there are fewer barriers to progress and more open and trusting communication. A combination of professionalism and a friendly manner can be very effective in helping students learn and develop into competent and caring physicians.

What has been the most significant change in Wright State's medical education over the years?

Presently, we are at the outset of Wright State University School of Medicine's most significant change in its education program. We began implementing a new curriculum in August 1997. This new curriculum features better integration between the basic sciences and clinical medicine, improved interactive learning and problem solving, greater use of computer technology, and an emphasis on evidence-based medicine. The challenge for Wright State University School of Medicine is twofold:

1. Can we offer students a cohesive medical education with mechanisms to improve each iteration of our new curriculum?
2. In today's environment of cost containment, are sufficient resources available to ensure a new curriculum equal in quality to any in the United States?

What do you find to be most rewarding about teaching medical students?

It is most rewarding when I talk with third- or fourth-year students or our graduates who remain in our residency programs. After being in the clinical learning arena, they report the value of the evidence-based medicine concepts and principles they learned in the first two years of medical school. It is at these times when I reflect on the line from Shakespeare: "O! this learning. What a thing it is."

LEARNING

What is the most challenging aspect of teaching here?

Wright State University School of Medicine relies on full-time faculty and a large volunteer faculty to deliver instruction in small-group settings. There are many advantages to small-group learning with its emphasis on development of common learning objectives, interaction, problem-solving, and communal reflection on learning.

happens to be a surgeon, and periodically he has a medical student or resident whom he talks into running with us. A few years ago one such resident was a former medical student who had tried my patience four or five years earlier. After about a month of running in the early spring mornings, he asked, "Why did you not ever get upset with me? I was not a pleasant medical student." I thought for a while and responded, "I was not

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Gary LeRoy



I chose Wright State because of its class size, early exposure to primary clinical care, and its innovative method of integrating educational experiences into the community environment. While working in the various teaching sites in the greater Dayton area, I learned how to practice the "art of medicine" in a number of unique clinical settings. My exposure to clinical health care in rural, urban, private sector, and federal institutions has proven to be invaluable experiences, which I routinely use as a practicing family physician. My experience at Wright State University School of Medicine has helped me further define what it means to be dedicated to the development of my community.

A native Daytonian, Gary LeRoy, M.D. ('88), is the medical director of East Dayton Health Center.

Peter K. Wong



“KEY” to a successful career in medicine:

K= Knowledge. The school’s strong faculty provided me with the necessary clinical skills and taught me to become an intellectual, critical, and resourceful thinker.

E= Empathy. The “human touch” with warmth and kindness are indisputably effective adjuncts to the art of healing. The School of Medicine stimulated me to become an empathic and compassionate clinician.

Y= Yourself. My medical education included a wealth of social and professional activities and opportunities which encouraged me to develop my concept of “self.” I learned the importance of becoming an active participant in both my profession and community.

Peter K. Wong, M.D. ('92), is currently practicing family medicine with Bethesda Group Practice, Inc., a multispecialty primary care group in Cincinnati, Ohio. He has a special interest in primary care sports medicine and works part time as a stadium physician for the Cincinnati Reds and is a volunteer physician for the annual ATP professional tennis tournament.

What subject matter and/or skills do you teach?

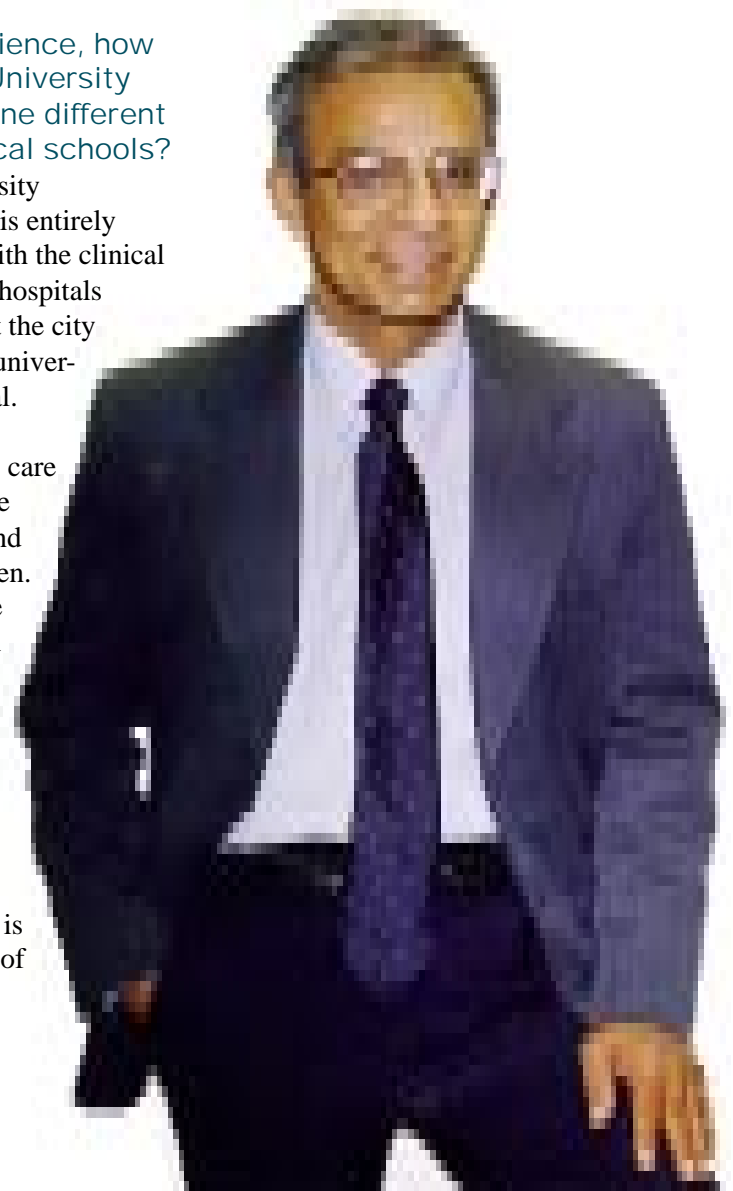
My involvement in teaching clinical neurology begins in the first year in the medical neuroscience course and continues in neuropathology and an introduction to clinical medicine in the second year, and in the neurology components of the internal medicine and geriatric clerkships the third year. This is followed by a two-week neurology clerkship in the fourth year.

From your experience, how is Wright State University School of Medicine different from other medical schools?

Wright State University School of Medicine is entirely community based with the clinical departments in area hospitals scattered throughout the city rather than a single university teaching hospital. Typical university hospitals are tertiary care referral clinics where more complicated and rare disorders are seen. Here, students rotate in community-based hospitals where a more typical spectrum of illnesses is seen. Wright State also differs from traditional medical schools in that there is a large involvement of voluntary faculty in

student teaching, which gives a unique perspective of how medicine is practiced in the community and in the office.

The School of Medicine has a special relationship with the Department of Veterans Affairs and was one of five medical schools formed through the 1972 Medical School Assistance and Health Manpower Training Act. The



ONATE

Dayton VA campus is a major site for student teaching, clinical rotation, and for clinical research.

WSU students often seem different from traditional medical students in that many of them are older and more mature and sometimes enter medicine as a second career. More of them seem to have a nontraditional premedical education and bring their unique and diverse experiences to medicine.

What has been the most significant change in Wright State's medical education over the years?

A major development has been the integration of clinical teaching with basic sciences. This positive development began with the neurosciences six years ago.

Clinical material is introduced in the first year of medical school along with the basic sciences. This greatly increases student interest in medicine and makes basic sciences meaningful in the context of clinical practice.

—Thomas Mathews, M.D.
Professor and Chair of Neurology

What do you find to be most rewarding about teaching medical students?

I value the opportunity to impart to students humanistic aspects of patient care. As a clinical teacher, it is rewarding to see our medical graduates go on to successful and fulfilling careers in medicine throughout the country.

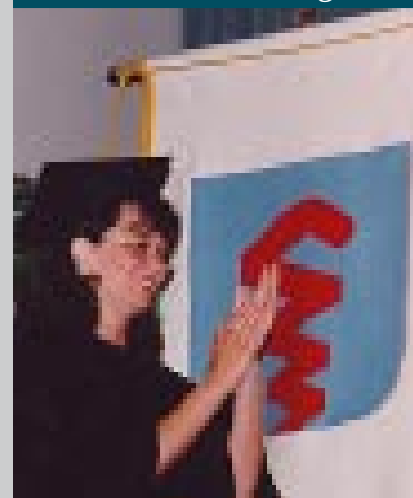
What is the most challenging aspect of teaching here?

The great challenge for our department is the continuous need to find preceptors and lecturers from the volunteer faculty. It is important for students to be exposed to different preceptors to appreciate different approaches to management of neurological problems.

Relate one of your most memorable interactions with a student.

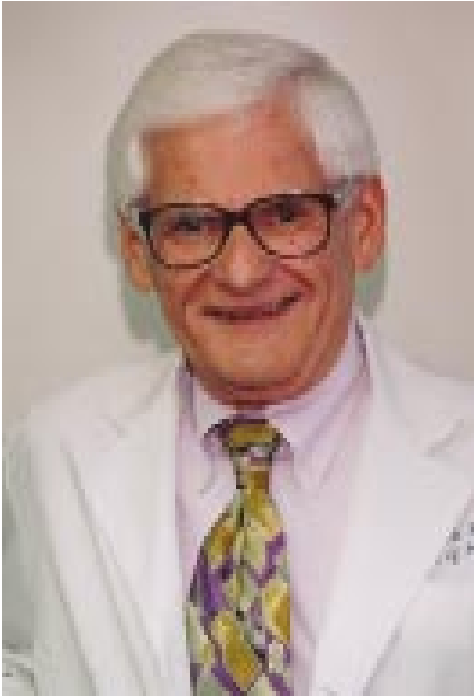
Recently, a close family member was taken to the emergency department of a local hospital. He was treated by the resident physician in a most professional, courteous, compassionate, and caring manner. I later found out that he was a Wright State University School of Medicine graduate and one who had spent a rotation with me. He displayed all of the characteristics of what a good physician should be. All faculty who help develop such graduates should be proud. 📧

Lori Vavul-Roediger



Many aspects of my education at Wright State have been paramount in shaping the way I practice medicine. Dedicated faculty encouraged me to be the best physician I can be. Diverse community experiences allowed me to discover many ways in which a physician can positively influence the lives of patients. Clinical rotations emphasized not only diagnosis and treatment, but highlighted the importance of viewing every patient as an individual with an inherent right to medical care. The focus on the physician's role to both advocate for and empower each patient makes Wright State University School of Medicine an outstanding environment in which to train future physicians.

Lori Vavul-Roediger, M.D. ('96), is currently a third-year resident in pediatrics at The Ohio State University and Columbus Children's Hospital in Columbus, Ohio. Following her residency, Lori will begin a fellowship in child abuse and neglect.



Faculty: Maurice D. Kogut, M.D.

The best is yet to come,” predicts Maurice D. Kogut, M.D. Dr. Kogut retires this summer after a tenure of 18 years as chair of pediatrics, a department located at the Children’s Medical Center (CMC). He and his wife, June, will divide their time between Cape Cod and Scottsdale, Arizona. He intends to “do the stuff I’d like to do—photography, stamp collecting, biking, and reading the literature I do not have time for now.”

The “best” also applies to the medical school, notes Dr. Kogut. “We can all be proud about who we are as a medical school. There are lots of opportunities for growth; there is still the need to push one another to be the best we can be, to be adventuresome, to take risks, to try new things. Working together, working hard, this school can meet the challenges of health care in the future.”

Dr. Kogut joined the School of Medicine as the area’s only certified pediatric endocrinologist in 1980, just after the first class graduated. “At that time our pediatric residency program had only 17 or 18 total residents. Today we have more than doubled that number in the integrated program between Wright-Patterson Air Force Base and CMC. In 1986, the Internal Medicine/Pediatrics Residency Program was established in partnership with CMC and Miami Valley Hospital, and that program accepts four residents each year.” As the residency

program grew, so did the faculty. There are now more than 60 teaching physicians based at CMC.

Retirement will not be all recreational activities for Dr. Kogut because his “personality doesn’t allow him to sit still.” He plans to work part time with two of his former fellows in pediatric endocrinology in Scottsdale and also intends to continue his relationship with Wright State by training faculty in writing USMLE-style exam questions. Dr. Kogut has been a member of the National Board of Medical Examiners for approximately 13 years, which may be a record for the number of years served.

Dr. Kogut was very active in developing the new medical curriculum for Years I and II and has continued to teach in the Year I course, as well as work with the residents and pediatric clerkship students. “The hospital environment alone is not sufficient to train doctors of the future,” he says. “Primary care pediatricians need training in an ambulatory environment as well and need to interact with a variety of community agencies on children’s health and welfare issues. This is very different from pediatrics at most medical schools and what makes the educational experience at Wright State so unique.

“It will be very difficult to leave,” he adds. “I will miss the medical students and residents the most; there is always a challenge there.”

—Carol Kayden and L. B. Fred

**“WE CAN ALL BE
PROUD ABOUT WHO
WE ARE AS A MEDICAL
SCHOOL.”**

Student: Lesley Meeker

National board exams cap the first half of medical school, then students take a welcome summer break before beginning their clinical rotations in August. Medical student Lesley Meeker marked the transition from the biomedical sciences to clinical rounds a different way. Immediately after she completed two days of board exams, she became a patient who underwent bone marrow donor surgery.

Meeker was matched with the recipient after she and other Wright State medical students volunteered to donate blood samples for the National Bone Marrow Registry. Over 3 million Americans are registered in the program, which matches donors who have compatible bone marrow tissue with patients who need transplants to treat leukemia, lymphoma, and a host of other blood disorders.

Organizers of the medical student service project at Wright State predicted that donating two teaspoons of blood might save a life in the future. Meeker learned in March that her tissue matched with a 38-year-old man with leukemia. The patient's identity and home town remain anonymous to protect his privacy. Dayton's Community Blood Center coordinated the donor-transplant process.

Just before she began a surgery clerkship at the Dayton VA Medical Center in August, Meeker learned that the bone marrow transplant had been a success. The prognosis for the recipient was

so good that he may return to work soon. Meeker considers her experience as a patient and the gift of bone marrow to be as much a part of her physician's education as her course work. "It's so much more real for me now," she says. "It's not just something in a textbook." 📖

—Mark Willis

***“IT’S SO MUCH MORE
REAL FOR ME NOW. IT’S
NOT JUST SOMETHING IN
A TEXTBOOK.”***

Lesley Meeker with a patient during her surgery clerkship. Tim Jones, M.D., senior resident, observes.



Reunion '98

The most common phrase on campus the weekend of August 7–9 was, “Do you remember? . . .” as the Wright State University School of Medicine classes of 1983, 1988, and 1993 gathered for Reunion '98. A total of 48 alumni along with their spouses, children, and guests were welcomed back by the Reunion Committee Co-Chairs, Timothy Van Fleet, M.D. ('83), Gary LeRoy, M.D. ('88), and Thomas Proctor, M.D. ('93).

Reunion '98 activities began on Friday with class parties hosted by local alumni in their homes: James Augustine, M.D. ('83), Barry McCorkle, M.D. ('88), and Jenni Schweitzer, M.D. ('93). Participants looked at old photographs, yearbooks, and other memorabilia to jog memories while family and guests were introduced to share present experiences.



Sherry Wheaton, M.D., a graduate of the charter class, spoke of her remembrances at the Gala Dinner.

The Class of '88 enjoyed an evening at the Air Force Museum.

A continuing medical education (CME) session was held Saturday morning. James Augustine, M.D. offered advice on “Excelling in a Managed Care Environment.” Cheryl Gregg of Miami Valley Hospital Enterprises conducted a second session, “Meeting Federal Compliance for Evaluation and Management Coding.” Special thanks to the Academy of Medicine for sponsoring CME.

Saturday evening, more than 120 alumni, faculty, staff, and guests dined under the wings of historic airplanes at the U.S. Air Force Museum. The Gala Dinner celebrated both Reunion '98 and the 25th anniversary of the founding of the School of Medicine. Guests enjoyed soothing background music of a harpist and reminisced at a pictorial history of the school.

The program for the evening included comments by President Kim Goldenberg, M.D., Acting Dean Howard Part, M.D., Associate Dean Paul Carlson, Ph.D., as well as reunion co-chairs Drs. Van Fleet, LeRoy, and Proctor. The event concluded with humorous and poignant remarks by Sherry Wheaton, M.D., member of the charter class of 1980. ☞

—L. B. Fred

Guests reminisced at anniversary exhibit.



1998 Campus Scholarship Campaign Tops Goal

The annual Campus Scholarship Campaign (CSC) is an opportunity for Wright State faculty and staff to show support for their institution. Since the CSC's inception in 1977, faculty and staff across the university have contributed more than \$1.6 million and assisted 1,900 students. The goal of \$100,000 was announced to the university community at the May 14th Campaign Kick-off. The total pledged in six short weeks was \$120,160, topping the goal by more than 20 percent.

The Campus Scholarship Campaign plays a vital role in the lives of many of our students, with 93 percent of them receiving some form of financial aid. The availability of academic and need-based scholarships enables the school to attract many of the brightest students to our medical program. ☞

Medical Alumni Association Elects Officers

Gary LeRoy, M.D. ('83), was re-elected for a second term as president and Holli Neiman, M.D. ('90), was elected to the position of secretary for the Medical Alumni Association Advisory Board. Other current officers of the advisory board include vice-president Sean Convery, M.D. ('81), and treasurer Christ Ticoras, M.D. ('91). The announcement was made at the annual meeting and luncheon Saturday, August 8, 1998. ☞



Richard P. Rood, M.D., F.A.C.P.

('82), received the Crohn's and Colitis Foundation of America's Premier Physician Award. A gastroenterologist with Lake Hospital System in northern Ohio, Dr. Rood recently co-authored a patient guide of inflammatory bowel disease. He completed both a clinical and research fellowship in gastroenterology at Tufts University New England Medical Center. Dr. Rood's experience with ulcerative colitis as a child greatly influenced his decision to become a gastroenterologist; he is also a caring physician and patient advocate. ☞



Melchor J. Antunano, M.D.,

assistant clinical professor, department of community health and a 1987 graduate of the Aerospace Medicine Program, was honored at the 50th Annual Arthur S.

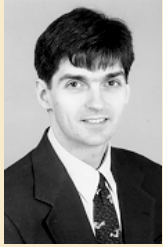
Flemming Awards Program. He was recognized for his "outstanding accomplishments in the promotion of aviation safety in the United States and abroad through the exercise of inspiring leadership and professionalism in the development and implementation of aeromedical education programs." Dr. Antunano is currently the manager of the Aeromedical Education Division of the Federal Aviation Administration. ☞



Frances Owen, M.D. ('85),

(center) received a planning grant to improve teen health in southeast Georgia. Owen's vision is being realized through a Community Access to Child Health (CATCH) grant, awarded by the American Academy of Pediatrics and funded by Wyeth-Ayerst Laboratories. The grant will allow Dr. Owen and her collaborators to conduct a community health needs assessment, develop an evaluation plan, and explore potential sites for preventive programming for teens using the neighborhood center model. ☞

NEW FACES



Henry W. Albers, M.D.
Assistant Professor, Orthopedic Surgery
M.D.: The Ohio State University College of Medicine

Residency: Southern Illinois University School of Medicine (orthopedic surgery)

Fellowship: Boston Children's Hospital (pediatric orthopedics)

Steven Chambers, M.D.
Lieutenant Colonel, USAF Associate Professor, Medicine

M.D.: Uniformed Services University of the Health Sciences, Bethesda, MD



Gerald E. Crites, M.D.
Associate Professor, Medicine
M.D.: The Ohio State University College of Medicine

Residency: University of Cincinnati Medical Center (internal medicine)

Deborah E. Miller, M.D.
Assistant Professor, Family Medicine

M.D.: Wright State University School of Medicine
Residency: Franciscan Medical Center, Dayton (family practice)

20th Anniversary for Horizons in Medicine

Educational initiatives come and go. Few have stood the test of time as well as the Horizons in Medicine Program at Wright State University School of Medicine.

Horizons in Medicine was launched in 1979 as a long-term investment in the education of minority and disadvantaged high school students. The program's ultimate goal was to increase Ohio's supply of minority physicians and other health care professionals.

The underrepresentation of African Americans and other minority groups

among practicing physicians was a national problem in 1979, and it remains so today. In June of 1998, the Council on Graduate Medical Education, a Congressional advisory committee, warned that minorities are still "critically underrepresented" in medicine at a time when health care disparities between minorities and whites are increasing.

A six-week summer program, Horizons is designed to give high school juniors a sense of the career possibilities in health care and to show them the kind of serious preparation needed to enter such careers. Students spend

"THE CHEMISTRY TEXTBOOK IN COLLEGE WAS THE SAME ONE WE USED IN HORIZONS IN MEDICINE."

mornings in classrooms and laboratories at Wright State, where they are introduced to subjects such as anatomy, biochemistry, physiology, and microbiology and immunology. Their afternoons are spent working in



(L - R) Joya Griffin, Veronica Njodinizeh, and Tierra Hurd, participants in the Horizons In Medicine Program, at the 20th reunion picnic.



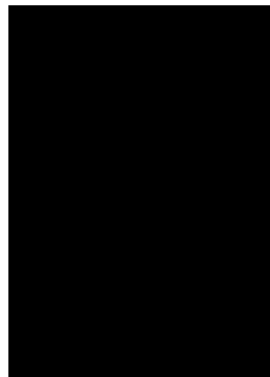
Alonzo Patterson, III, M.D.

hospitals, nursing homes, and community clinics throughout the community.

“I realized the impact Horizons made on me when I became a freshman in college. The chemistry textbook in college was the same one we used in Horizons in Medicine,” recalls Alonzo Patterson, M.D. A member of the first Horizons class in 1979, Dr. Patterson is now a pediatrician in Huber Heights and associate director of Student Affairs, serving as mentor and advisor for medical students.

Working in clinical environments provides opportunities to begin to build the “people skills” needed to be a doctor, according to Dr. Angela Long-Prentice.

Now a family physician in Dayton, she was a member of the 1980 Horizon’s class. “My job was working in the cafeteria. I almost quit. I won-



Angela Long-Prentice, M.D. ('91).

dered what picking up trays for the patients had to do with medicine,” she remembers. “Then I realized that every time I walked into a room, I could make a patient smile. I started building patient relationship skills that summer, and I bring those same skills to my patients today.”

Thirty-three Horizons alumni, like Drs. Patterson and Long-Prentice, have become M.D.’s. Another 17 Horizons students are now enrolled in medical school. Since 1979, a total of 368 high school students have attended the program with 94 percent entering college.

This summer, graduates of the program were invited to return for a reunion weekend. Approximately 100 students and their families joined School of Medicine faculty, administrators, and staff at a picnic on Saturday, August 15.

“I STARTED BUILDING PATIENT RELATIONSHIP SKILLS THAT SUMMER.”

On Saturday evening, State Senator Rhine McLin and Wright State University President Kim Goldenberg were special guests at a dinner that recognized the Horizons in Medicine Advisory Committee. This committee, consisting of seven community representatives, has been together since the beginning of the program.

Gideon Adegbile, M.D., Robert Davis, D.D.S., George Findley, Edythe Lewis, Lawrence Nelson, Allen Pope, and Ruth Richardson continue to serve as the selection committee for the program. School of Medicine faculty were thanked for their continuing support of the program, and proclamations from Mike Turner, mayor of the city of Dayton, and Senator Rhine McLin congratulated the School of Medicine for its 20-year commitment to the community. ☺

Tuan Van Nguyen, Ph.D.
Associate Professor,
Community Health
Ph.D.: Department of
Community Medicine, Garvan
Institute, Sydney, Australia

Christopher J. Spieles, M.D.
Associate
Professor,
Orthopedic
Surgery



M.D.: University of
Cincinnati College
of Medicine

Residency: University of
Cincinnati Hospital
(orthopedic surgery)

Cynthia Van Niman, M.D.
Assistant Professor,
Family Medicine
M.D.: Wright State University
School of Medicine
Residency: Franciscan
Medical Center, Dayton
(family practice)

Teresa Wilkins Zryd, M.D.
Associate
Professor,
Family Medicine
M.D.: Wright
State University
School of
Medicine



Residency: Good Samaritan
Hospital (family practice)

Faculty Notes



Marshall B. Kapp, J.D., M.P.H., will be the 1998-99 Dr. Arthur Grayson Memorial Distinguished Visiting Professor of Law and Medicine. Recently announced by the Southern Illinois University School of Law, the visiting professorship recognizes Professor Kapp's extensive work in the area of legal and ethical issues for the elderly. He is the founding editor of the *Journal of Ethics, Law and Aging*, and his most recent book has been described as "an important and eloquent description of how our legal system has distorted judgments and values in the medical profession."

In addition, the Gerontological Society of America (GSA) announced that Professor Kapp will begin a term as chair-elect of the Social Research, Policy and Practice Section of GSA after this fall's national conference.

Also, Wright State University awarded Professor Kapp the Frederick A. White Distinguished Professor of Service Award at Convocation. Dr. Kapp is professor of community health and director of the Office of Geriatric Medicine and

Gerontology and of the Fordham Foundation Professional Development Fellowship Program in Law, Health Care and Aging. He also holds an adjunct faculty appointment at the University of Dayton School of Law. ☞



Wm. Cameron Chumlea, Ph.D., Fels Professor of Community Health and of Pediatrics, received this year's Presidential Award for Faculty Excellence in Research. Dr. Chumlea is part of the School of Medicine's Division of Human Biology and works with the Fels Longitudinal Study. ☞



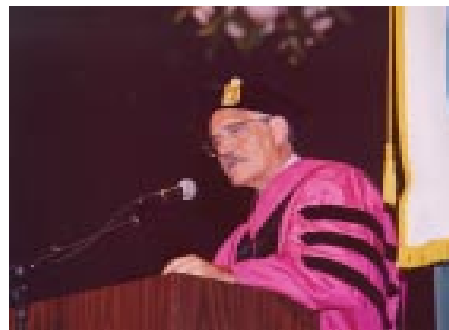
Gerald M. Alter, Ph.D., associate professor of biochemistry and molecular biology, was awarded the Presidential Award for Faculty Excellence in Service. Dr. Alter has provided extensive service to the university and the community, especially with the American Heart Association. ☞



Howard Part, M.D., acting dean (R), speaks with Year I student Thomas Carroll after the Convocation Ceremony.

The Class of 2002

Convocation for the Class of 2002 was held August 9. The annual ceremony welcomes new students and their families to campus, introduces them to key faculty, and helps instill professional values through the traditional "White Coat Ceremony." The week following Convocation consists of several orientation activities, including sensitivity training and team building activities. ☞



Jordan Cohen, M.D., president of the Association of American Medical Colleges (AAMC), kicked off the school's 25th anniversary at June graduation. Dr. Cohen's commencement message encouraged tomorrow's doctors to "have the courage to stand up to those who are trying to drive a wedge of clock-punching between doctors and patients. No laws, no regulations, no patient bill of rights, no fine print in the insurance policy, no watchdog federal agency. . . nothing can substitute for trustworthy doctors who care." ☞