

FLORIDA STATE UNIVERSITY COLLEGE OF MEDICINE

FALL 2015

FSUMED

Asked to produce more physicians for Florida's small towns, the College of Medicine has found a way

GROWING YOUR OWN



Welcome to *FSU MED*. The fall is winding down, and time seems to be moving faster. We're nearing the end of our second semester with the Class of 2019 and the new medicine curriculum. I appreciate the hard work of the faculty in bringing this patient-focused and integrated new program to the students, and I appreciate the students' enthusiasm in accepting the new methods and structure of learning.



This class will experience the new curriculum throughout their journey, but we've already made substantive changes in the third and fourth years to continuously improve it.

Here in our 15th year, it's a good time to reflect on where we are and how we're doing. Once again I've contracted with MGT, the local consulting firm that helped us make the case for a new medical school in 1999 and followed up with a socioeconomic analysis at our 10-year anniversary. I've asked MGT again to analyze our school's impacts across the state, our outcomes so far and our efforts to meet the unique mission here at the College of Medicine.

One of the college's great stories is highlighted in this issue. In the late '90s, the idea of starting a new medical school was controversial because many experts believed our country had too many doctors. Local people knew that was CERTAINLY not true in the Panhandle and most rural areas of Florida. Our founders created a school committed to recruiting students from these areas and returning doctors to their hometowns.

Since its inception, the College of Medicine has typically recruited 25 percent of its entering class from Panhandle counties. That's remarkable, since only 8 percent of the total Florida population resides in these counties. I know state Sen. Durell Peaden was proud of our school and our outcomes, and I recognized his contributions at our White Coat Ceremony in August — two months after his death. We lost a valued friend last summer.

Please enjoy this issue and reflect on the vision of our early advocates, including Sen. Peaden, who saw the promise of a local medical school that would meet the medical needs of the region.

We have great stories of our many graduates who are serving, and thriving, close to where they grew up. We now have graduated 11 classes with 910 alumni and continue to build on the mission of the school, to produce the kinds of doctors Florida needs.

Enjoy reading about our story ... and Go Noles!

A handwritten signature in black ink that reads "John P. Fogarty". The signature is written in a cursive, flowing style.

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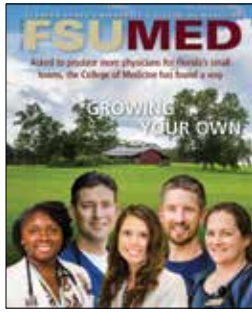
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TO MAKE A GIFT

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on the cover
 To paraphrase "Field of Dreams": If you find them there, they will return. The College of Medicine recruits talented students from small towns, knowing there's a chance many of them will feel the pull to return to where they are needed most.

Photo credits: COLIN HACKLEY
 Illustration: MARTIN YOUNG



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HEADLINES

Remembering Doc Peaden

He saw a need for a new medical school that would focus on creating more physicians for the places in Florida that need them the most. Doc Peaden lived to see his vision coming true.

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FEATURES

**Growing your own:
 The quest for rural physicians**

By Ron Hartung

The College of Medicine deliberately finds many of its students in out-of-the-way places in the Florida Panhandle. It's no coincidence that so many alumni feel at home practicing in small towns.

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Medical mission trips are rewarding, but not always without risk



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New clues on the cellular 'garbage disposal'

Cancer cells rarely cooperate with the drugs that science devises to kill them. They're constantly evolving, often developing resistance or finding escape routes to stay one step ahead of the treatment.

For example, a popular target for chemotherapy in the treatment of many human cancers is the proteasome, a protein complex found in nearly all cells, from microorganisms to humans. Proteasomes are assembled within cells and function like a garbage disposal to remove damaged or unneeded proteins.

Cancer cells often must find ways to evade molecular signals that tell them they shouldn't be growing, or that they should commit cell suicide. They often evade these signals by using the proteasome to destroy the proteins carrying the signal. The cancerous cells are then able to divide unchecked.

Understanding how our cells — healthy or otherwise — build new structures (such as proteasomes), then, is useful in understanding how to deal with defective cells, such as cancer cells.

That's one of the things Robert J. Tomko Jr., assistant professor of biomedical sciences at the College of Medicine, is doing. He is first corresponding author of a paper published in the journal *Cell* that presents a major step forward in understanding the mechanisms by which cells build proteasomes.

"Our study describes how the 'tail' of a single protein subunit acts as a trigger in the assembly process when proteasomes are being built within the cell," Tomko said. "This tail acts like a key that inserts into a lock, triggering a reorganization of the assembling proteasome from a structure similar to a closed fist into one more like an open hand."

From there, the under-construction proteasome fits into the palm of the open hand to complete assembly.

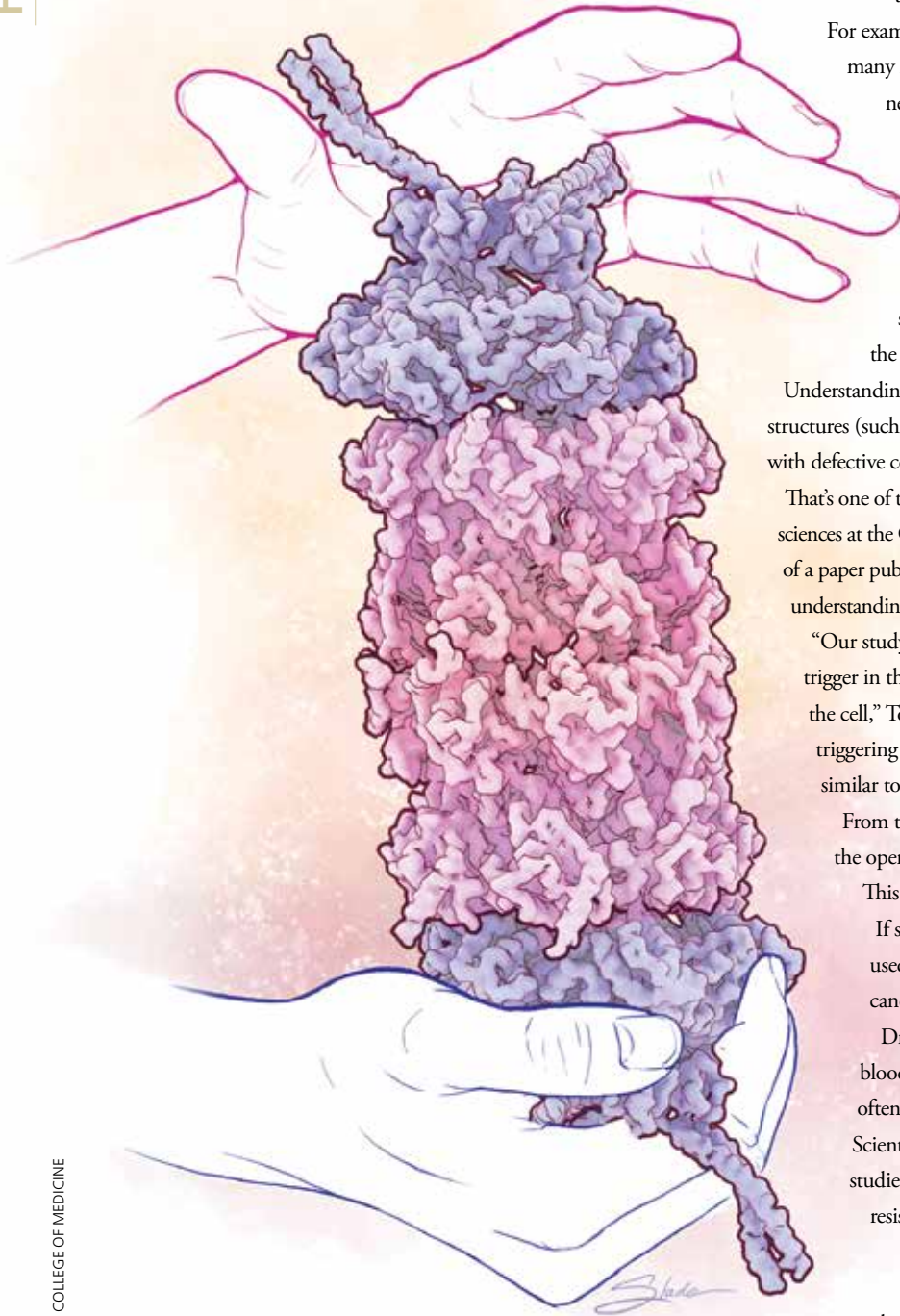
This is where the discovery might be particularly useful.

If scientists can stop the "tail" from opening the lock, it could be used to prevent cancer from growing new proteasomes that allow cancers to grow unchecked.

Drugs that target the proteasome are extremely effective in several blood cancers, but resistance is emerging. These resistant cancer cells often build new or slightly different proteasomes to gain resistance. Scientists could use the knowledge of assembly gained from these studies to prevent new proteasome assembly, thereby reversing resistance to drugs that target the proteasome.

Tomko began working on the science as an American Cancer Society Postdoctoral Fellow at Yale University, where he worked with senior author Mark Hochstrasser, professor of molecular biophysics and biochemistry.

He completed his work and wrote the paper after joining the FSU College of Medicine in January.



A "lid," which looks similar to an open hand, grasps the proteasome and allows it to perform its function, disposing of other proteins. The lid is prevented from grasping the proteasome prematurely by assuming a shape like a closed fist. A subunit identified in Tomko's research attaches to the lid, opening it and allowing it to activate the proteasome. This information provides clues to developing new anticancer drugs that trap the proteasome in an inactive state.

“The experimental approach is a tour de force combining cutting edge technologies to resolve a question that could otherwise not be addressed,” one scientist wrote in the peer review process before the paper was accepted for publication. “The insights may become useful in developing novel pharmaceutical approaches to inhibit proteasome activity.”

Understanding cancer at the molecular level is one of the focal points of the College of Medicine’s research program, and served to attract Tomko and other recent additions to the Department of Biomedical Sciences.

Tomko’s work is a prime example of why molecular mechanisms are so important in advancing our understanding of diseases such as cancer. The cell is constantly building large structures out of smaller protein parts to perform different required tasks, and the more we know about how that works, the more effectively physicians can act when problems occur.

Tomko likens a cell building a proteasome to a human building a car. As with any complicated assembly, there are different ways to put the pieces together, but only a few pathways are likely to generate a working product.

Building the outside of an engine first, for example, could block access to install inner components needed for that engine to actually work.

“Thus, some mechanisms must be in place to make sure that all of the pieces go together in the right way, in the right order,” Tomko said.

And with his team’s discovery, scientists now have a better understanding of the order and manner in which cells build proteasomes.

“We feel strongly,” Hochstrasser said, “that this work breaks both important new conceptual ground in our understanding of how assembly of large protein complexes occurs in vivo and methodological ground in studying protein assembly.”



Robert J. Tomko Jr.

A protein with promise

Sometimes you wonder whether researchers who spend their careers peering into microscopic cells lose their sense of wonder. Then again, sometimes all you have to do is ask.

“Evolution has done such a good job of producing molecules to perform these exquisitely, highly regulated chemical reactions,” Daniel Kaplan said recently when asked about scientific wonder. “It’s just a big bucket of chemistry in a cell, and it’s very precisely regulated and orchestrated.”

Every orchestra needs a conductor, and Kaplan’s lab has identified another one of them. This latest discovery not only sheds light on cell division but also could lead to improved cancer therapy.

The key, says Kaplan, a Department of Biomedical Sciences researcher, is a protein called Treslin.

“It can target cancer cells,” he said. “Most chemotherapy also targets rapidly dividing normal cells, but this seems to have promise for not doing that. Drug companies are going to be excited.”

Before cells can divide, their DNA must be copied. In addition, the strands of the DNA’s famous double helix must be unwound, via a protein called helicase. One strand needs to be inside the helicase ring, the other outside. As Kaplan’s lab reported last year in the *Journal*

of Biological Chemistry, a kinase — that is, a protein that chemically modifies other proteins — called Cdc7 opens up the helicase ring to let one strand out.

But not until this summer, in a paper published in *Proceedings of the National Academy of Sciences*, did Kaplan and Research Faculty Irina Bruck figure out that Treslin was also a key ingredient — in two ways.

Treslin not only stimulates the chemical modification of the helicase, thereby activating it, but also assembles the helicase in preparation for cell division. Since cancer is the unregulated division of cells, knowing how to stop the division process is crucial to halting cancer.

“We think this is really important,” Kaplan said, “because now we can take this purified Treslin and the helicase, put them in a tube and watch the chemical modification occur. Then we can add small molecule inhibitors to see if we can inhibit that. That should stop activation of the helicase. That should stop the cancer cells from dividing. You kill cancer cells but not normal cells.”

Florida State has filed a provisional patent. Meanwhile, the Kaplan lab keeps probing the mysteries of that “big bucket of chemistry in a cell.”

Daniel Kaplan



COLIN HACKLEY

FALL '15

One of STEM's 'Inspiring Women'

At age 7, Yi Ren was often separated from her parents during China's Cultural Revolution. She lived alone at home most of the week while her parents were away in the countryside. The only assistance she received was from friendly neighbors. As a result, at a very young age, she learned to rely on herself.

As she grew professionally, so did her work ethic. Now *INSIGHT Into Diversity* magazine has chosen her as one of its "100 Inspiring Women in STEM," as an example for younger women pursuing careers in science, technology, engineering and math.

"It is so incredibly surprising and humbling," said the biomedical sciences professor, nominated by Department Chair Richard Nowakowski. "It is an absolute honor to be given the opportunity to inspire the young women of today to pursue their goals in STEM fields."

Ren, an immunologist, was the daughter of a surgeon and a pediatrician. At their urging, she pursued a medical degree but graduated with a desire to conduct basic research. She came to the U.S. by way of London, where she obtained her Ph.D.

"Her childhood experience required tremendous strength of will and independence," said Nowakowski. "This same will and independence have strengthened her research and her teaching."

Ren's principal role model, she said, has been her mother.

"Ever since I was little, she would always encourage me to focus on my studies — despite the fact that the Cultural Revolution was still going on and most people had stopped going to school," she said. "She dedicated her life to her work as a physician and biologist even during the toughest and poorest times."

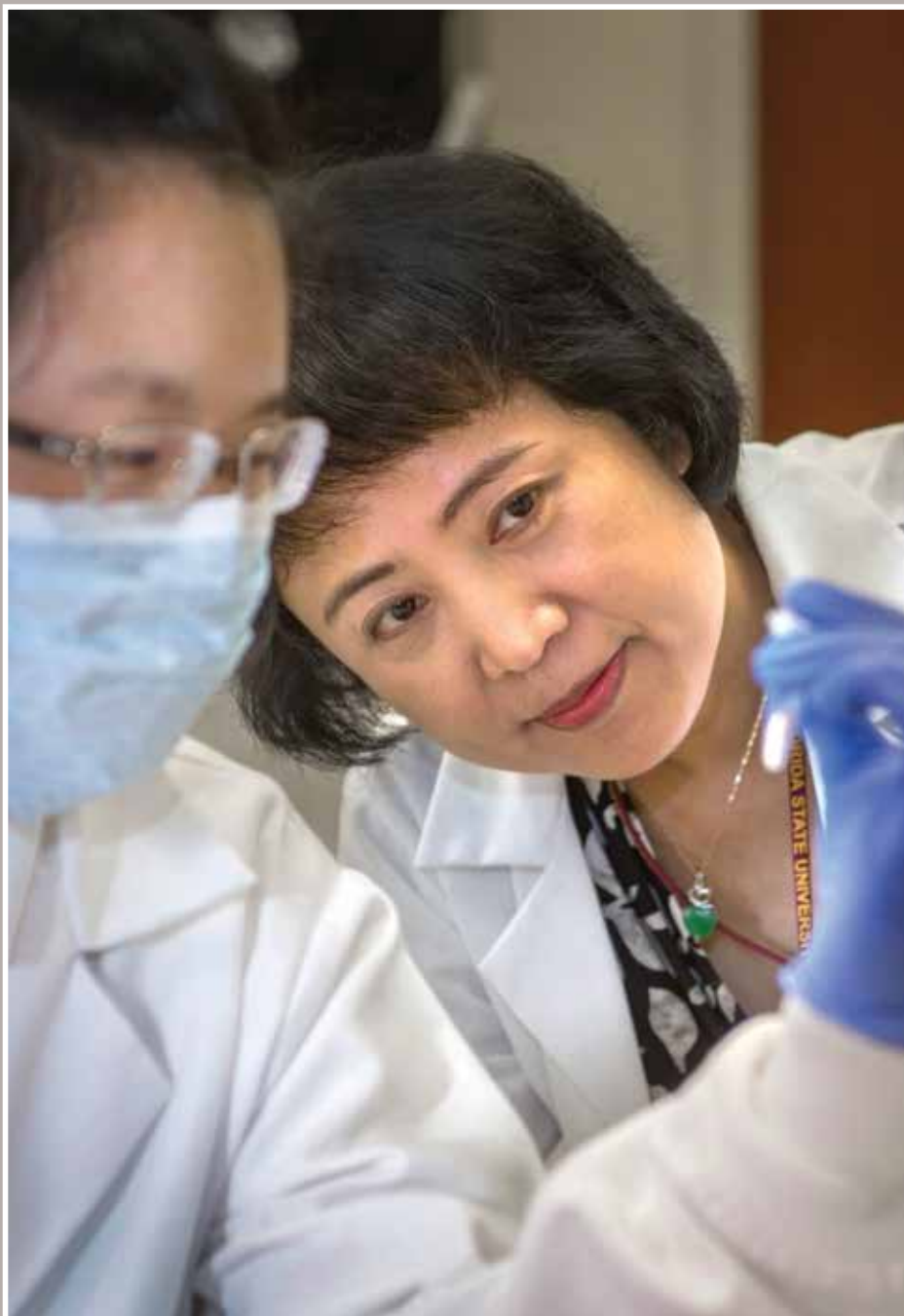
Ren's firm belief that women should not be discouraged by career obstacles comes from personal experience.

"I was first in line for the M.Phil. position with a female professor at my medical school in China," said Ren. "But she was unwilling to accept a female student. I told her I planned to take the exam again the next year and get into an even better program. Ultimately, I was accepted into one of China's most prestigious institutions of medicine in Beijing. In retrospect, her rejection wasn't an obstacle but

more of a blessing, as it made me realize the importance of determination."

Being chosen by *INSIGHT* from an international field of nominees has only increased her determination.

"To be selected reassures me that my work has made an impact on scientists but, more importantly, on female scientists," said Ren. "It motivates me to work even harder."



COLIN HACKLEY

Yi Ren



Teaming up against cancer

When the Florida Legislature described what kind of medical school Florida State would have, it didn't leave much doubt about where the focus would be. On the medical education side, the FSU College of Medicine would focus on developing more primary-care physicians for the state, especially those who would provide care to underserved populations, including rural, urban and older patients.

The legislature also laid out a clear vision for College of Medicine research. Florida Statute 240.2997 reads, in part:

"The College of Medicine shall be dedicated to ... advancing knowledge in the applied biomedical and behavioral sciences, geriatric research, autism, cancer, and chronic diseases."

Key parts of the focus were addressed in the organization of academic departments, with robust research activities to be initiated in the departments of Geriatrics and Behavioral Sciences and Social Medicine. The FSU Autism Institute is considered one of the top programs in the U.S. based on its funding and scholarly activities.

And slightly more than a decade after the medical school's fledgling biomedical research program began, the attention to cancer research is gaining momentum.

In just the past few months, biomedical researchers have published important cancer-related papers in prestigious journals *Cell* and *Proceedings of the National Academy of Sciences*, and have secured new cancer research funding from the National Institutes of Health.

"Our cancer work addresses disease at the molecular level and gives us a foundation for

expanding and directing our efforts to be relevant to many human diseases," said Richard Nowakowski, chair of the Department of Biomedical Sciences.

"With several new scientists joining an already established core of distinguished researchers it's safe to say we've got a diverse and vibrant group of cancer and cell-cycle biologists."

One example is David Meckes, who has already begun to distinguish himself in a young and rapidly expanding field of research involving exosomes – small vesicles secreted from cells and containing a sophisticated cargo of functional proteins and RNA. It represents a form of cellular signaling that is being implicated in a variety of diseases.

At the age of 34, Meckes recently secured his first independent NIH grant. Obtained in a difficult funding environment, especially for young scientists, it's an important step in helping

Meckes take his work to the next level of discovery.

"Your proposal ends up being in the hands of a few established scientists who are judging the merits of your work and your ideas," Meckes said. "As important as the funding is, it's even more satisfying to know that it validates what you are doing. It's a signal that you're on the right path."

Meckes focuses on a specific area of cancer, but with the goal that what he is discovering will have applications across a wide realm of human disease. That makes him a good fit for the College of Medicine's attention to disease at the molecular level.

"I think that's one of the great things about this department is the diversity of it," he said. "For example, I never imagined myself working in neuroscience, but I'm in a collaborative project with James Olcese looking at the role exosomes play in Alzheimer's disease."

FACULTY	ARRIVED FSU MED	RESEARCH FOCUS (prior to arriving at the FSU College of Medicine)
Akash Gunjan	2005	DNA damage and repair (Postdoctoral fellow, United Kingdom)
Myra Hurt	2000	Understanding cellular division at the molecular level (Director of Program in Medical Sciences; researcher at Florida State University)
Daniel Kaplan	2012	DNA replication and genome maintenance (Assistant professor, Vanderbilt University)
Yoichi Kato	2004	Molecular mechanism of vertebrate glial development (Research fellow, Harvard Medical School)
Eric Laywell	2011	Brain tumors and tumor progression of human glioblastoma cells (Assistant professor, University of Florida)
David Meckes	2013	Molecular mechanisms of viral oncogenesis (American Cancer Society Postdoctoral Fellow, UNC Cancer Center)
Tim Megraw	2011	Centrosomes, cilia, stem cells, asymmetric cell division and neurodegeneration (Assistant professor, UT Southwestern)
Antonia Nemeč	2015	DNA repair and cancer genetics (Postdoctoral research, Yale University School of Medicine)
Richard Nowakowski	2010	Cell proliferation and genetic basis of individual differences in the central nervous system (Professor of neuroscience and cell biology, UMDNJ-Robert Wood Johnson Medical School)
Yi Ren	2013	Molecular cell biology of inflammation and macrophage function in central nervous system trauma (Research professor, Rutgers University)
Raed Rizkallah	2008	Cell cycle regulation (Research faculty, Florida State University)
Robert J. Tomko Jr.	2015	How cells build, maintain and utilize the proteasome in normal and disease states (American Cancer Society Postdoctoral Fellow, Yale University)
Yanchang Wang	2003	Cell cycle regulation and the response to the expression of damaged proteins (Leukemia and Lymphoma Society Special Fellow, Baylor College of Medicine)

Looking deep inside the heart

The hereditary disease cardiomyopathy, which makes it difficult for the heart to pump enough blood to meet the body's needs, sometimes leads to heart failure. Drugs like beta blockers control the brain's signals to the heart requesting more blood for the body. Other drugs control the amount of blood entering or leaving the heart, diminishing the heart's workload. None of these therapies, however, act *within* the heart cells.

Researcher Jose Pinto is looking into a treatment that does just that. Using a recent two-year grant from the American Heart Association, first he must demonstrate that mutations in a certain gene – Troponin C – cause the disease.

“Troponin C is the calcium sensor in the heart,” said the Department of Biomedical Sciences assistant professor. “In cardiac cells, when calcium binds to this protein, it triggers contraction. That’s how the heart muscle initiates pumping blood.”

If Troponin C isn't working properly, the heart can't pump blood at a healthy pace. The result is either hypertrophic cardiomyopathy, where the heart becomes abnormally thick, or dilated cardiomyopathy, where the pumping chamber stretches and thins the walls.

“Animal models will test the hypothesis that Troponin C can be categorized as a pathogenic gene and that changes in its calcium affinity are responsible for the development of those diseases,” said Pinto.

After testing this hypothesis, Pinto's team will focus on a possible treatment of hypertrophic cardiomyopathy using an enzyme inside heart cells.

“The nice thing about the enzyme we are targeting is that it has been shown to be only present in the heart,” said Pinto. “The main problem with most drugs developed to target enzymes is that they affect other cells, healthy cells, and the patient experiences unwanted side effects.”

Pinto wants to target hypertrophic cardiomyopathy from within the heart cells, preventing those side effects: “There are no drugs available that defeat abnormal muscle contraction caused by altered Troponin C function *inside* the cell. That's the approach that we are taking.”

He and his lab will breed mice that develop hypertrophic cardiomyopathy — and then will inject a drug and measure its effect.

“We are trying to reduce the levels of this enzyme-like protein in hypertrophic hearts to see if we can counter defects in the calcium sensor, correcting the heart-contraction function and potentially reversing hypertrophic cardiomyopathy,” said Pinto. “This work can serve as a proof-of-concept for the development of new therapeutic strategies to treat heart disease.”

Jose Pinto



COLIN HACKLEY

Soiree for science

Every February, FSU alumni Erwin and Stefanie Jackson sponsor a Valentine's Day performance to support research for a debilitating disease that has impacted their family and is the subject of College of Medicine research.

The Valentine's Day Soiree provides funding for The Brian Jackson Dystonia Research and Discovery Program. Proceeds support a collaborative effort between the College of Medicine and Tallahassee Memorial HealthCare to better understand the neurological movement disorder first diagnosed in the Jacksons' son Brian when he was 15.

The event (6 p.m. Feb. 13 at the University Center Club in Tallahassee) features nationally acclaimed performer and FSU School of Theatre graduate Davis Gaines in “Broadway and Beyond.” Gaines is best known for more than 2,000 performances on Broadway as the phantom in “Phantom of the Opera.”

For event details and ticket or sponsorship information, visit ValentinesDaySoiree.com.



Male brain, estrogen boost

Mohamed Kabbaj knew that testosterone could protect males from the effects of anxiety and depression. He also knew that the male brain converted most testosterone to estrogen. What he didn't know was whether testosterone could provide anxiety protection *without* undergoing that change.

The answer, as his lab reported in *Biological Psychiatry* earlier this year, was “No.” No protection without the conversion to estrogen first.

Much research has underscored the gender differences in response to treatments for anxiety and depression. In previous studies, the Kabbaj lab focused on females and estrogen. This time, his lab team — led by Nicole Carrier and Samantha Saland — focused on males. So far, the link between testosterone conversion and anxiety/depression has been detected only in laboratory animals. But Kabbaj says the results are potentially promising for humans as well.

“It will be critical to identify how testosterone

and estrogen act within the brain in both males and females,” he said, “to improve our understanding not only of sex differences in mood disorders, but also of new ways to approach the development of treatments that are more effective in both men and women.”

Kabbaj knows that physicians are watching his work with interest.

“I go to a lot of meetings that psychiatrists also attend,” he said. “They really like the sex-differences work. They're very excited about it.”



Mohamed Kabbaj

“There is an enzyme in the brain that ‘mediates’ the conversion of testosterone into estrogen,” said Kabbaj, professor in Biomedical Sciences. “We inhibited that enzyme in a specific brain area implicated in the regulation of mood. And when you do that, you lose the antidepressant effect of testosterone.”

The search for this and other ways to defuse anxiety and depression is the reason the National Institute of Mental Health chose Kabbaj in 2013 for a six-year, \$1.8 million grant. Each year, according to the NIMH, major depressive disorder affects more than 20 million U.S. adults — mostly women.

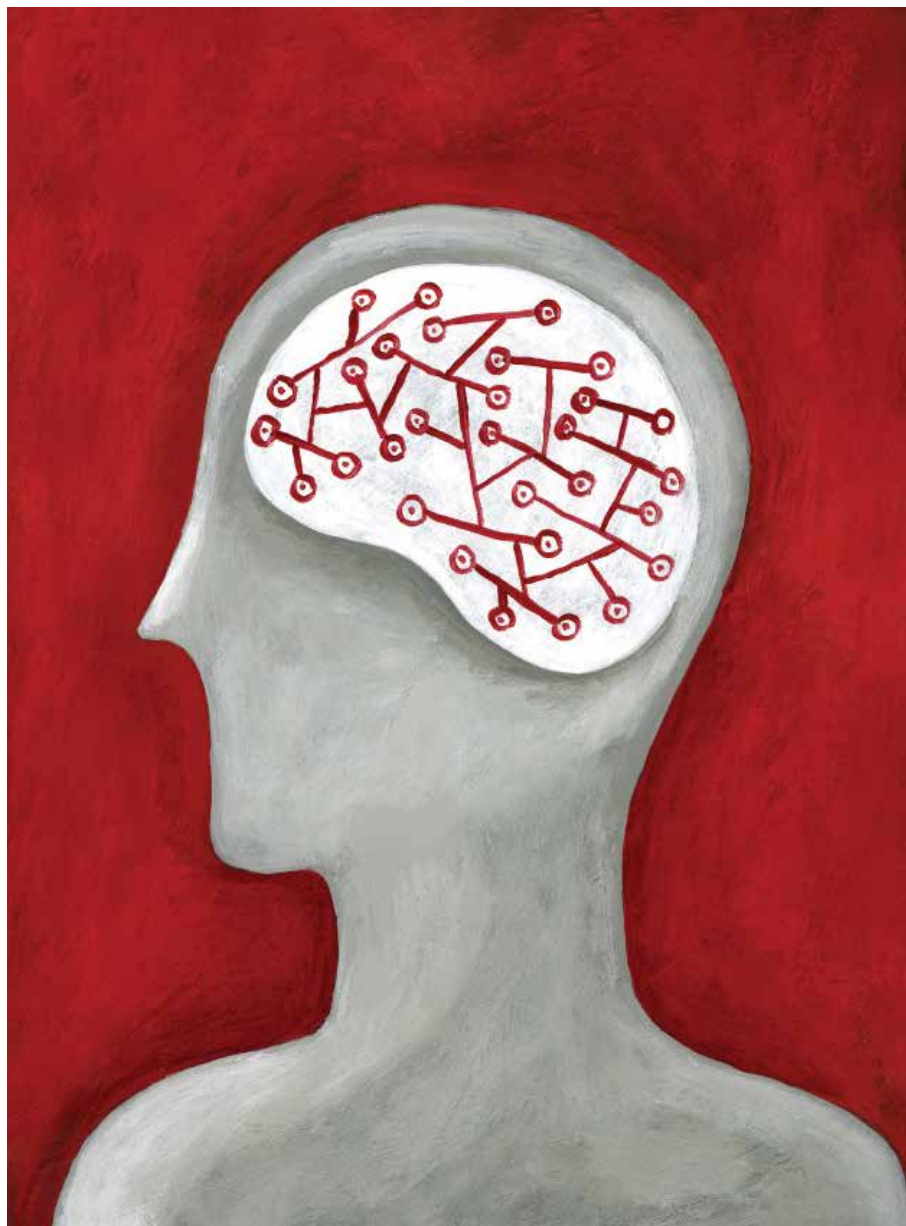


Illustration Works

Moved by research

As part of a military family, undergraduate Barbara Dietrick lived in five states before coming to FSU. Some people might find all that moving to be disruptive, but Dietrick says it gave her a rich supply of experience and initiative.

If something interests her, she pursues it.

So even though she took four classes last spring as a biology major, studied for the MCAT and danced with the FSU Golden Girls, Dietrick somehow also found time to pursue scientific research in the lab of Biomedical Sciences Associate Professor Tim Megraw. She did so well that she received a 2015 Undergraduate Research and Creative Activity Award (URCAA).

More than 70 students applied for the FSU award, and only 12 made the cut. The URCAA provided her with \$4,000 to continue her research over the summer by covering living expenses and a conference she attended in Colorado with the Megraw lab.

Not bad for someone who, not long ago, enjoyed science but didn't know the first thing about research.

"What I find most remarkable about Barbara is how bright and mature she is," Megraw said.

Dietrick, 21, a senior, discovered research through Florida State's Undergraduate Research Opportunity Program. Currently she operates her own experiment in the Megraw lab, where they use the fly as a model to study

genetic mutations.

"Dr. Megraw gave me my own project my sophomore year working with one of the mutants he found," said Dietrick, whose lab responsibilities will culminate in an honors thesis project. "Microcephaly is what I'm concentrating on. It's a brain disease that causes reduced size of the cerebral cortex in humans."

Her broad spectrum of interests often piques others' curiosity.

"People are very surprised when they find out I am involved in both research and Golden Girls," Dietrick said. "There is such a stereotype that Golden Girls are just dancers that have to look pretty on the sidelines of games, but we are held to high academic standards."

"I'm looking at applying to M.D.-Ph.D. programs, because I love research so much. I just can't imagine doing one without the other."

Her vision for using those degrees is equally ambitious.

"Right now, what I'm looking into is gene therapy and doing the clinical component, but also research," Dietrick said. "It's such a new field. It would take a lot more research, and then human trials. I'm looking to try to do both."

With the URCAA, she's on her way.

"It's very validating and humbling to win because so many people applied for the award," said Dietrick. "It was exciting to know that other people cared about my project."



FSU Photo Lab/Bill Lax

Barbara Dietrick



Good news for aspiring neuroscientist

Lacy Goode (right) with her lab team at the College of Medicine

Recent FSU graduate Lacy Goode tackled Chinese mostly so she could communicate better with the researchers she'll encounter in her career, but her choice of Chinese indirectly led to a prestigious Fulbright scholarship. What's more, she's also been accepted into a graduate program that's willing to wait a year for her to complete her Fulbright.

"I decided to do Chinese because it seemed the most relevant," said Goode, who has taken three semesters of the language. "One in five people on the planet speak it. I really fell in love with the language and the culture."

At the same time, Goode — one of 40 Fulbright scholars selected for Taiwan out of 275 applicants — relished the guidance of Biomedical Sciences professors Pradeep Bhide and Ioanna Armata while pursuing her interest in neuroscience.

"Dr. Armata had just moved here to work in Dr. Bhide's lab, and it worked out perfectly that she needed students," said Goode, one of many undergraduates who work with the college's research faculty. "I've been doing research with her on dystonia, a neurological movement disorder. I've been able to figure out that neuroscience is the path I want to pursue."

Goode also began to see how her academic interests complemented one another.

"Dr. Bhide is working with a lab in China, so last summer we had people from there come over here," said Goode. "I realized how important it is to build cultural ties and communicate with another culture, especially places like China and Taiwan. That's the forefront of a lot of research, especially technology."

Then the Fulbright entered the picture.

"One of my classmates said, 'You should really think about applying for a Fulbright,' and I had never even heard of it," said Goode.

The Fulbright is an international academic exchange program established in 1946 by the U.S. Department of State to promote peace. Scholarships

are awarded to approximately 1,600 U.S. students each year. Alumni include Nobel Prize winners, Pulitzer Prize recipients and heads of state. Goode will teach English in Taiwan for a year on her Fulbright scholarship. She'll defer graduate school until her return.

"Throughout my graduate school applications, in the back of my mind I was still thinking, 'I want Fulbright,'" said Goode. "I wanted graduate school eventually, and I did the applications as an exercise, so they would be less scary when I applied again."

Applying once was enough. She was invited to interview at the University of Alabama at Birmingham.

"I met with the neuroscience program director at UAB," said Goode. "He said, 'If you could do the Fulbright and come back to us, we would want you even more.'"

Bhide also saw advantages.

"A good scientist not only needs to be very skilled in the lab but well-rounded in all spheres of life — able to interact well with diverse groups," he said. "The Fulbright scholarship will afford Lacy the perfect opportunity to ease into the professional world."

Goode is especially excited about acquiring teaching skills.

"UAB does a lot of outreach with younger children in the community. Gaining teaching skills and being able to take that back — I can apply that to teaching science."

She also sees the practical value of her language studies. Within the Department of Biomedical Sciences, for example, almost 22 percent of faculty, staff and students are Chinese.

"In my lab alone, there are several people whose primary language is Chinese, and their English is really impressive," said Goode. "At the same time, there are moments when they can't quite express themselves. It's going to be helpful to be able to communicate with my colleagues from China."

Network news

The word “research” used to produce mental images of hermit-like scientists going it alone, jealously guarding their discoveries. But the days of the rugged individualist are fading fast. With prodding from the National Institutes of Health, researchers and their institutions are sharing their work through partnerships and networks — in a continuing effort to translate discoveries more quickly into healthier communities.

The College of Medicine, whose entire approach to medical education is based on clinical partnerships, made headlines this fall with the latest chapter of its longtime research relationship with the University of Florida. FSU is a partner in the \$17.5 million award that UF received through the NIH’s Clinical and Translational Science Award (CTSA) program.

“It’s a significant milestone for both institutions,” said Michael Muszynski, associate dean for clinical research. “It further codifies the functionality of our Clinical Research Network involving all of our statewide regional and rural campuses, and it carries the enormous potential of two major Florida universities working together to bring the latest medical advances to a very expansive and diverse patient demographic.”

The CTSA supports a nationwide network of about 60 hubs. Myra Hurt, senior associate dean for research and graduate programs, estimated the College of Medicine’s share of the four-year award will be more than doubled by institutional support and will total several million dollars.

Not sure what “translational science” means? Hurt offered this example: “We did a pre-test on student athletes testing their reasoning ability. So later, if they get a head injury we have a baseline of ‘Are they reasoning in the same way?’ This would help diagnose minor concussions that may go unnoticed. It’s a simple change that’s translating research about the athletic physical into prevention and treatment of concussions.”

Hurt mentioned blood pressure as another common health issue that could be addressed in this latest round of translational research.

“We have about 2,500 community physicians on our clerkship faculty, and they collectively have more than 2 million patients, representing a demographic cross-section of Florida’s population,” she said. “That’s where our students do their clinical training, and that’s where we’re building research.”

College of Medicine research projects often involve overlapping partnerships with UF and the OneFlorida Clinical Research Consortium.

“Another grant that we recently received with UF, and the University of Miami, is from the Patient-Centered Outcomes Research Institute, or PCORI,” Hurt said. “It will create a database linking de-identified information about human disease all over Florida. The goal is to create an archive of such data linked all over the United States. That will greatly enhance our ability to understand chronic diseases and conditions of the brain that have been very hard to treat.”



Nurse Practitioner Susan LaJoie, left, works with a diverse patient population in Gadsden County.



Juliette Lomax-Homier

Fort Pierce’s new leader

Juliette Lomax-Homier, onetime partner in a health-care group called Just Ladies, is the newest member of a deans’ group that previously was just gentlemen.

In June, Lomax-Homier became dean of the Fort Pierce Regional Campus. Each of the College of Medicine’s six regional campuses has a dean, and she’s the first woman in that role. Lomax-Homier is no beginner, though: She’s been with the Fort Pierce campus since 2007.

“She is a superb role model and educator who has served as both OB-GYN clerkship director from the beginning and as our OB-GYN education director for the past year,” College of Medicine Dean John P. Fogarty said. “Her leadership and calm presence in these roles has made her selection as campus dean very easy.”

Lomax-Homier replaced the founding campus dean, Randall Bertollette, who continues to serve as a part-time course director for Doctoring 3.

“When I came to Fort Pierce to complete a National Public Health Service Corps obligation just out of residency,” she said, “I could have never dreamed that the same community would one day host a regional campus of a medical school.”

Lomax-Homier’s background aligns perfectly with the College of Medicine’s emphasis on primary care and service. From 1985 to 1989, she served the NHSC as a staff obstetrician-gynecologist for Fort Pierce’s underserved and migrant population. After that, she practiced OB-GYN at Just Ladies. Her practice now is limited to gynecology.

Fogarty lauded Bertollette’s work as the first dean of the Fort Pierce campus, and students, alumni, faculty and other community members praised him as kind, supportive, humorous and welcoming.

“I only hope,” Lomax-Homier said, “that I can fill the shoes of Dr. Bertollette.”

Remembering Doc Peaden

In its first 10 years, it was known simply as “the auditorium” or “1400.” Everyone knew that if such a beautiful space was ever named for someone, that person would have to be special indeed. Then in June, Sen. Durell Peaden died — and suddenly it became obvious that this should have been the Durell Peaden Auditorium all along. He was one of the handful of people about whom you could say: “Without him, the College of Medicine probably wouldn’t exist.”

He had all the right ingredients at the perfect time: He was a physician, legislator and Florida Panhandle native; he cared about his rural neighbors; he constantly dreamed up big ideas; and he wouldn’t give up.

He dropped by FSU one day in late 1997 and asked whether the university could create a medical school to provide the primary-care doctors that rural Northwest Florida needed. The next month he was introduced to Myra Hurt, then-director of FSU’s Program in Medical Sciences, which was providing the first year of medical school for bright Panhandle students (and others) who previously wouldn’t have had a shot at an M.D. She and Peaden became allies and friends.

Several years and several miracles later, with critical assistance from then-President Sandy D’Alemberte at FSU and then-Speaker John Thrasher at the Florida House, the FSU College of Medicine was established. Over the years, Peaden contributed his time, money (for student scholarships) and considerable influence to help the college produce physicians for elder, rural, minority and other underserved populations.

This school, of course, was only one of countless worthwhile causes he supported in his 69 years. Equipped with both an M.D. and a J.D., he served in the Florida House from 1994 to 2000 and the Senate from 2000 to 2010. He started as a Democrat and switched to the Republican Party. In a story for the News Service of Florida upon Peaden’s death, Jim Saunders wrote: “With his soft, slow drawl, Peaden liked to describe himself as a ‘country doctor.’ He was a well-liked figure in the Legislature,” where he was widely known as Doc. He was survived by his wife, Nancy, and three children. And now a lovely auditorium bears his name.

“He had such a life force,” said Hurt, senior associate dean. “I never saw him down, not one time. He was always up to something, always had some project, some plan. He was something else.”

Read the Durell Peaden obituary on our website



RAY STANYARD

Durell Peaden Jr., left, appeared with current FSU President John Thrasher at the College of Medicine’s first commencement ceremony in May 2005. It was a crowning achievement for him and Thrasher, who had been instrumental in creating a new medical school at Florida State.

Producing family docs

The continuum of care that family physicians provide exists nowhere else, says the Florida Academy of Family Physicians. And just about everyone agrees our country needs more of them.

So there were lots of smiles at the College of Medicine this year when it was announced that the school, once again, was among the country’s top 10 producers of “family docs,” as they call themselves.


“This reflects a commitment by the entire school to meet the legislative mandate that created our school with a focus on primary care and our mission of meeting the needs of communities, especially the underserved populations, across the state,” said Daniel Van Durme, a family physician and chair of the Department of Family Medicine and Rural Health. “From outreach programs in rural areas that begin before college, through admissions policies that focus on characteristics likely to produce family doctors, through our innovative curriculum.”

Second-year student Tatianna Pizzutto is sold on family medicine.

“I want to have the breadth of knowledge and ability to treat anyone anywhere,” said Pizzutto, president of the medical school’s Family Medicine Interest Group. “My passion is for the patient. And from what I’ve seen in my year-plus here, every patient *needs* a primary practitioner to orchestrate their care and navigate our health-care system.”

Based on a three-year average reflecting the 2012, 2013 and 2014 classes, the College of Medicine ranks seventh on the latest list released by the American Academy of Family Physicians. It was also in the top 10 in 2007, 2008 and 2009.

“We have great graduates matching at wonderful programs throughout the country and a true commitment to primary care and patient-centered, community-based care,” said Dean John P. Fogarty, himself a family doc. “Recognition as one of the top 10 schools for producing family physicians is a great affirmation that our focus is working.”



College of
Medicine

Dean Fogarty at the Class of 2019 White Coat Ceremony in August

A young school leads the way

In its infancy, the College of Medicine spent much time and energy explaining its plans to the accrediting body of U.S. and Canadian medical schools. Back then, the Liaison Committee on Medical Education (LCME) believed this country had no pressing need for new medical schools.

A core group of the medical school's founders spent many weekends preparing to help the LCME understand why a community-based approach would better address the paucity of physicians in Florida's small towns. In many ways, those meetings helped shape the course of medical education.

In 2006, one year after the College of Medicine gained full accreditation, the Association of American Medical Colleges (AAMC) reversed course and called for an increase in medical school enrollment, citing much of the same research Florida State had been describing.

By fall 2008, 10 institutions had announced their intent to develop new medical schools.

A recent, subtler development makes many of the college's founders smile as well. In July, FSU College of Medicine Dean John P. Fogarty quietly began a term as chair of the LCME.

You've come a long way, baby?

"You better believe it," said Myra Hurt, who helped envision how the college would educate new physicians and served as interim dean. "This is sweet irony. And it's great for new and emerging medical schools to have the LCME chaired by the dean of a young medical school."

In addition, Alma Littles, senior associate dean for medical education and academic affairs, recently began her term as chair of the Academic Physicians Section (APS) of the American Medical Association (AMA). She presided over a transition for the APS from its previous name — the Section on Medical Schools.

There are more than 20,000 academic physicians nationwide, but the Section on Medical Schools had fewer than 600 members.

"We believe this change will help the AMA-APS expand its engagement with academic physicians nationwide and help address the key challenge we all face — how best to educate the next generation of physicians," Littles said.

Recognizing that new medical schools have different accreditation challenges, the AAMC and AMA sought input from newer schools for LCME leadership.

That led to Fogarty, who became active with the LCME in 2011, three years after he became the College of Medicine's dean. He has chaired numerous accreditation site visits and now presides over the LCME's three annual meetings. His term expires in 2017.

"The rapid expansion in the number of medical schools after FSU was established has challenged the LCME with a major increase in site visits and work at our meetings," Fogarty said. "I am honored to be chosen to chair this organization and know that this role provides great visibility for the FSU College of Medicine."

Their heart on our sleeves

When members of the Class of 2019 donned their first white coats in August, they were in many ways being cloaked by the kindness of a former physician and his wife, who had a vision for preserving humanism in medicine.

The Jules B. Chapman, M.D., and Annie Lou Chapman Private Foundation was created, in part, with first-year medical students in mind.

“Four years of medical school presents many challenges, and for some the experience diminishes the fundamental goodness that brought them to medical school in the first place,” said Robert Watson, professor of clinical sciences at the College of Medicine and Chapman Foundation trustee.

Watson, a neurologist who was Annie Lou Chapman’s personal physician for several years, said that her steadfast wish was to help medical students learn to provide compassionate care and to seek ways to nurture their humanism during the rigors of medical school. “She always believed that the art of medicine was at least as important as the science of medicine,” Watson said.

The Chapman Foundation covered the cost of the white coats for first-year students as part of the more than \$400,000 in support it has provided to the College of Medicine and its students and faculty.

In addition to the white coats, the foundation supports the student organization *FSUCares* in service-learning trips to Immokalee and a year-round community health program at Maryland Oaks Crossing, which provides transitional housing and services for families who have been, or are at risk of becoming, homeless.

The Chapman Foundation also sponsors the College of Medicine’s chapter of the Gold Humanism Honor Society, provides a \$100,000 Humanism Scholars Fund and partly underwrites the cost of *HEAL*, a student-produced literary magazine for “humanism evolving through arts and literature.”

There’s also a weeklong medical school experience (Summer Institute) in Immokalee for promising high school students from underserved backgrounds who otherwise might not receive the encouragement

and guidance needed to pursue a career in medicine.

The Chapman Community Health Program at Maryland Oaks Crossing provides FSU medical students with an enduring platform for service to the medically underserved. Working with faculty physicians and medical residents, the students are immersed in the values that are the foundation of the College of Medicine’s service-oriented mission.

“We’re challenged to use the knowledge we obtained in the classroom, and translate it into creative and practical solutions for the residents of this community,” said second-year medical student Dijo Joseph. “Dealing with issues such as transportation, access to nutritious foods, and affordability of care — those are things practicing physicians deal with all the time. Being able to have this experience so early on in our medical education has been invaluable.

“I believe these experiences will allow us in the future to better treat patients that have obstacles in maintaining their health and well-being.”



COLIN HACKLEY

First-year student Sam Cook, after being coated by Professor Jim Cavanagh



COLIN HACKLEY

Dance Marathon 2015

For the kids

Celebrating its 20th year was a piece of cake for Dance Marathon at FSU. Among the festivities (yes, there was cake) the largest student-run philanthropy on the FSU campus raised a record-breaking \$1.16 million.

The dancing takes place in two shifts of 20 hours from Friday evening to Sunday afternoon in February, but raising the money is a year-round effort for the more than 1,800 FSU students who participate.

The proceeds support the Children's Miracle Network and Shands Children's Hospital in Gainesville, and the FSU College of Medicine pediatric outreach programs. Tallahassee-area children benefit from each of the agencies.

The College of Medicine, which received more than \$550,000 raised during the 2015 event, seeks opportunities to fill gaps in health care for medically underserved children in the community by utilizing available

resources. The money invested locally supports a school-based primary care health clinic at three schools in Gadsden County, where children often don't have adequate access to care. The clinics represent a partnership among the College of Medicine, the Gadsden County Health Department and Gadsden County Schools.

The College of Medicine also distributes funds to Tallahassee Memorial HealthCare to support pediatric services, including potentially lifesaving genetic screening for a few adolescents each year who otherwise would not be able to get it. Additional support goes to Bond Community Health Center, Big Bend Hospice and the Young Parents Project and Early Head Start Program.

Dance Marathon at FSU 2016 takes place Feb. 26-28 at the Donald W. Tucker Civic Center. Donations are accepted year-round at dmfsu.org.



Eric Walker



Tiffany Smith-Sutton

'Grateful beyond measure'

Doctor: "Students, we hope many of you will practice primary care in areas where it's least available."

Students: "We'd love to, but we have a load of academic debt. We might have to take higher-paying jobs."

Doctor: "What if we covered your tuition, for starters?"

Talk about a conversational attention-getter, courtesy of the National Health Service Corps.

Here's how it works: The NHSC will cover your tuition, fees and other educational expenses for four years. In return, you'll agree to serve at an NHSC-approved site for four years. Those sites include medically underserved urban, rural or frontier communities across the U.S. The program also will help with your living expenses through a tax-free monthly stipend.

In October, first-year students Tiffany Smith-Sutton and Eric Walker became the fifth and sixth College of Medicine students who've received these prestigious NHSC scholarships.

"For most individuals in my community, health care is a luxury," Walker said. "If afforded the opportunity to serve as a National Health Service Corps member, I believe I will be able to connect with my patients in a very unique way because I would not be too far removed from their position."

Smith-Sutton, also eager to do hands-on work in a community where the need is greatest, added: "And as a wife and mother of two, funding my medical education with the least amount of debt is top-priority. I am grateful beyond measure for this scholarship."

For more information: <http://nhsc.brsa.gov/>

Expanding mental health research

Clinical research at the College of Medicine is following a familiar footprint, seeking to include a demographic profile that reflects Florida's diversity. The college's developing Clinical Research Network is designed with the idea of learning from the patient population served by many of the nearly 2,500 physicians throughout the state who teach FSU medical students. And, in turn, discovering ways to improve patient care across the spectrum of human disease.

Mental health is no exception.

In May, Florida State was invited to become an associate member in the National Network of Depression Centers. Part of the attraction was Florida State's community-based medical education program and the inherent relationships with community physicians.

The national network was seeking to expand into Florida, and partnering with a medical school that has relationships with physicians and their patients throughout the state was a selling point.

"To date, research on causes and treatments for mood disorders has mostly included specialty-care patients at single centers and sites, which has limited its impact," said Heather Flynn, associate professor and vice chair for research in the medical school's Department of Behavioral Sciences and Social Medicine.

"Access to such a broad and diverse patient population is vital in order to develop a better understanding of mental health and other health issues that can be relevant to many different kinds of people."

Flynn, who has been chair of the Women in Depression Network for 15 years, said progress in developing treatments for mood disorders has been slow for several decades, mostly because researchers have been working on the problem independently.

The NNDC's mission is to develop and foster connections to use the power of a network to advance scientific discovery and to provide stigma-free, evidence-based care to patients with depressive and bipolar illnesses.

"By uniting in a collaborative network, we bring the best minds together, regardless of their location, to advance the state of the science in the field of mood disorders," said John Greden, founding chair of the NNDC. "Florida State University will greatly contribute to that effort."

The idea behind the network comes from the National Cancer Institutes, which are based on a philosophy that nobody in the U.S. should be more than 200 miles from a cancer center. The NNDC is a long way from that goal, but it has been seeking new partners. This is its first foothold in Florida, the third-largest state in the country.

"We're trying to get mental health and mood disorders on the same level as cancer in the way we look at it from a public health perspective," Flynn said.



Heather Flynn

Approaching old age

Florida already is home to the highest percentage of residents over age 65. Within 15 years the number is expected to double (to nearly 8 million), while available caregivers are becoming scarcer.

“It’s a dilemma, for sure,” said Paul Katz, who joined the College of Medicine in June as chair of the Department of Geriatrics.

Katz, a geriatrician, is optimistic that the College of Medicine, with its focus on geriatrics, can help provide solutions. He’s buoyed by a \$2.25 million grant from the federal Health Resources and Services Administration in a strategic effort to address similar problems nationwide.

The College of Medicine is one of 44 organizations in 29 states selected to participate in the Geriatrics Workforce Enhancement Program.

“This goes well beyond what we teach medical students,” Katz said. “The ultimate goal is to enhance the workforce — nurses, social workers, primary-care physicians and the public. We’re not going to be adequately prepared to meet the needs of our older patients in Florida with anything less than a comprehensive approach.”

Often overlooked in the care of older patients is the free care provided by family members. Roughly 2.8 million of them provided an estimated \$29 billion worth of unpaid care to older Floridians in 2009. The state’s demographics show that many of those will need care themselves within the next 15 years and that there will be fewer potential caregivers available.

In addition, a third of the nursing workforce and 40 percent of the physician workforce nationwide is currently over age 50.

So how is the College of Medicine trying to help?

By partnering with the FSU colleges of Nursing and Social Work and with numerous College of Medicine affiliates statewide, for starters.

“Together we will be addressing health-care gaps through individual, system, community and population-level changes,” said Ken Brummel-Smith, Department of Geriatrics chair emeritus. “We will be developing six innovative projects that will allow for the creation of new service delivery models in addition to novel opportunities for interprofessional and interdisciplinary training and patient and caregiver education.”

For example, the college will sponsor caregiver workshops by specially trained social workers and community members at Westminster Communities locations throughout the state.

The college also will add a geriatrics-focused curriculum to medical residency programs already affiliated with the College of Medicine, and is partnering with the Health Care Network of Southwest Florida to enhance the care of older patients.

“All of our efforts,” Katz said, “are oriented toward developing a health-care workforce that maximizes patient and family engagement and improves health outcomes for older adults by integrating primary care and geriatrics.”



Paul Katz became chair of the college’s Department of Geriatrics in June.



FSU Photo Lab/Bill Lax

Daniel Van Durme

He's an ACE Fellow

Deans of medical schools are rarely family physicians. Marian Bishop, a medical educator and administrator, wanted to change that. She established a trust to help fund “dean school” for family physicians, and half of medical school deans specializing in family medicine have gone through the Bishop Fellowship Program.

Now, Daniel Van Durme can add his name to the list of Bishop fellows — but not for the same reasons. After six years of thinking the program just wasn't for him, Van Durme said “Yes” in part because it included the opportunity to learn from other areas of higher education as well. Bishop partnered with the American Council on Education (ACE) Fellowship Program, which selected 47 fellows to learn executive-level leadership in higher education.

As a Bishop Fellow and an ACE Fellow, nominated by College of Medicine Dean John P. Fogarty, Van Durme was matched with the University of New Mexico to help meet learning goals on behalf of the college.

“I will see how university presidents think, how provosts in other departments at other colleges think,” he said.

Van Durme's main interest, however, is to learn how to enhance the college's clinical practice.

“The goal of my project, with the support of the dean and others,” he said, “is to really look at how we can best identify clinical practice sites for our clinician faculty to work at and practice at that will also be a revenue stream (as the LCME accreditors require) that is clearly aligned with our mission.”

He will study under Paul Roth, M.D., the University of New Mexico's chancellor for health sciences and dean of the school of medicine. Van Durme's fellowship will span the 2015-2016 academic year, and he will visit the mentoring institution three times for one to two weeks per visit.

“A lot of the success of our school came by learning what to pick and choose from other people,” he said. “That's how you become great: Build on others' strengths, learn from others' weaknesses. We need to do the same thing when we look at our clinical opportunities, practice opportunities and educational opportunities.”

As an ACE Fellow, he'll have a chance to do that.



FSU Photo Lab/Bill Lax

Wade Douglas

Preparing for operation

The Florida State University General Surgery Residency Program at Tallahassee Memorial HealthCare took an important step in its development by receiving initial accreditation in June. The residency program will participate in the National Residency Match Program for the first time in March. The goal is to match six residents and to open in July.

“Obtaining initial accreditation within a year is remarkable, but is just the first step towards accomplishing the goal of providing graduate medical education opportunities within the region and hopefully improving health care within the region,” said Program Director Wade Douglas.



FLORIDA'S PANHANDLE: FERTILE GROUND FOR TOMORROW'S DOCTORS

BY RON HARTUNG

When the late legislator Durell Peaden warned in the 1990s that the Florida Panhandle was dangerously low on doctors, he had a hopeful message as well: Future doctors were waiting to be discovered in the dozens of towns between Madison and Milton. All that was missing, he said, was the magnetic pull of a medical school that specialized in rural areas and primary care.

Today, the Panhandle has become a physician factory beyond Peaden's wildest dreams. In all, *268 students from 38 Panhandle towns* are attending, or have graduated from, the FSU College of Medicine.

Most are still in med school or residency training. They won't all return to the Panhandle, but many will. Thirty-one Panhandle alumni already are practicing there — including 19 working in their hometowns. One of them is in Crestview, Peaden's hometown.

"I'm so blessed to be back here," said Kara Brooks, who graduated from high school in Crestview. Her relatives were Peaden's patients, and she worked for him briefly when he was a state senator. "I am forever grateful for his efforts and successes in growing medical resources in my part of the state."

Now she's practicing at the four-story Sacred Heart Crestview Medical Clinic.

"It's exactly what I hoped it would be," said the Class of 2006 alumna.

She loves that her patients often are neighbors, friends, fellow church members — not people she knows only from her exam room.

Brooks did her residency training not far away in Albany, Georgia. Doctors tend to settle down close to their residency locale. But each passing year provides more examples of alumni who bucked that trend. For example, 13 of the 31 who've returned to the Panhandle spent three or more years outside the region.

Actually, having regional roots isn't even a prerequisite. Twenty-three College of Medicine alumni who grew up outside the Panhandle, or even outside the state, are now practicing in Peaden's beloved stretch of Northwest Florida. Peaden, who died in June, would have rejoiced over these numbers.

"Durell was such an optimist, he probably would've said, 'I'm not surprised!'" said Myra Hurt, who bonded with Peaden during their efforts to create the College of Medicine.

She knows how valuable each new Panhandle physician is — and how much work goes into recruiting and preparing them.

Lacking words, not brains

In 1997, when Peaden inquired about the possibility of a new medical school at FSU, he was immediately steered toward Hurt — who'd been pondering that possibility for years. She directed FSU's Program in Medical Sciences, which guided students through their first year of medical school. More than that, though, PIMS sought students more likely to



practice medicine in rural and other underserved communities. And PIMS emphasized a patient-centered, student-focused, apprenticeship style of medical education.

“I knew how few rural kids actually get to the point that they apply to medical school,” said Hurt, senior associate dean for research and graduate programs, a scientist at FSU since 1987. “Often they just hadn’t been exposed to role models and to people who told them, ‘This is what you’re going to have to do to get in.’”

Like Peaden, Hurt grew up rural — but in Arkansas. Repeatedly she has seen people overlook entire rural populations, equating unremarkable standardized test scores with unremarkable intelligence. A downstate professor familiar with FSU’s outreach efforts once asked her, “Why put

your resources there when you could put them with other kids who are clearly going to do well?”

She was aghast.

“I learned from teaching high school biology for six years in north Arkansas that the college-bound kids didn’t really need me. They would have done well regardless,” Hurt said. “But the kids that I helped were the ones who needed to learn the language to do better on standardized tests. They knew the concepts. What they didn’t know were the words. Nobody had worked with them.”

Hurt is delighted to see so many talented medical students who otherwise might have gone undiscovered.

Kara Brooks (M.D., '06), left, at her office in Crestview.



COLIN HACKLEY



SSTRIDE approach

SSTRIDE (Science Students Together Reaching Instructional Diversity & Excellence) gives rural and minority students the appropriate academic background and enthusiasm for science while exposing them to a variety of health professions. It's based in five Panhandle counties (plus Orange and Collier counties downstate).

Conceived by Hurt when she directed PIMS, and developed by Thesla Berne-Anderson, SSTRIDE operates under these principles:

- If you want a health professional to practice in Wewahitchka (for example), your best bet is to recruit someone who grew up there.
- If you hope to attract qualified Wewahitchka students to your medical school or health program, you'd better get involved with them academically in middle school, pique their interest in a medical career and stay with them through high school and undergraduate years, preparing them for the academic rigors of the curriculum.

Of SSTRIDE's nearly 1,200 participants with documented high school graduation, more than 98 percent went on to college, and nearly two-thirds chose a health, science or math major.

How many prospective students *right now* are being groomed by SSTRIDE? Answer: 438 (131 in Madison County, 113 in Okaloosa, 107 in Gadsden, 46 in Leon and 41 in Walton).

Choosing students

In keeping with its mission and legislative mandate, the FSU College of Medicine gives special consideration to applicants who are minorities, rural, Panhandle residents or committed to serving the underserved. So it has its own way of evaluating prospective students.

"For example," said Assistant Dean for Admissions Graham Patrick, "our average MCAT score is about 28. None of the other Florida schools have an average MCAT below 30. Some say, 'Florida State is easier to get into.' My response is, 'It's *different* to get into.' We put an emphasis on other things."

Those MCAT numbers don't concern Patrick. According to MCAT data, he said, once you get above a score of 26, pass rates on standardized step exams don't change, nor do graduation rates.

And FSU medical students excel on those step exams. In the most recent results, printed in the med school's 2014 annual report, FSU students taking USMLE Step 1 for the first time had a pass rate of 93 percent, identical to the national average. For Step 2 (clinical knowledge), FSU students had a pass rate of 98.5 percent, higher than the national average of 95. Every year, scores are well above what you'd predict if you judged solely from MCATs.

"We're happy to offer the opportunity to people who otherwise would not get it," Patrick said. "We think they'll make wonderful physicians, if given the chance."



268 STUDENTS FROM 38 PANHANDLE TOWNS

This map shows how many people from the Panhandle are enrolled in, or have graduated from, the FSU College of Medicine. How did we define “from the Panhandle”? Where possible, we used the town where the student graduated from high school. For the three years where that information was not available, we used the hometown the student had identified for the graduation program. For example, the “13” next to “Panama City” on the map indicates that 13 alumni or current students either graduated from high school in Panama City or listed Panama City as their hometown at graduation time. *(We counted current medical students; current Bridge students; and graduates. We did not count former students who did not graduate.)*

54 ALUMNI PRACTICING IN 15 PANHANDLE TOWNS

Whereas the map shows which of our students came FROM the Florida Panhandle, this chart shows how many College of Medicine alumni came TO the Panhandle to practice — whether or not they grew up here. *(Several of these 54 alumni are practicing in more than one town.)*

Apalachicola	1
Blountstown	1
Bonifay	1
Chipley	1
Crestview	1
Marianna	1
Pace	1
Panama City	4
Panama City Beach	1
Pensacola	8
Perry	2
Port St. Joe	1
Quincy	2
Santa Rosa Beach	1
Tallahassee	31



COLIN HACKLEY



HAWKINS: FILLING A NEED IN BONIFAY

When he thought about coming back to practice in his hometown (population not quite 3,000), Patrick Hawkins had one concern: “I didn’t know if Bonifay people who’d seen me growing up could see me as their physician. I didn’t know if they’d open up to ‘little Patrick Hawkins who used to cause trouble in Sunday School.’”

Not a problem. Business is so good at Hawkins Family Medicine that he’ll soon be moving into a new, bigger office across I-10. And not a moment too soon: The desks of the doctor, two nurse practitioners and the office manager now butt up against each other in one cramped room.

Hawkins graduated from the College of Medicine in 2008 and from the Tallahassee Memorial Family Medicine Residency Program in 2011. He appreciates Bonifay’s support. And he feels needed.

“When I came back, the average age of the physicians here was 65 — excluding me,” said Hawkins, who occasionally rides his Harley-Davidson to work. “Since then, we’ve had one of the practicing physicians pass away, and two retire, which put a heavy burden on the rest of us. Fortunately some nurse practitioners helped out. And just this year we’ve had two new physicians come in. They had family ties.”

In his mind, coming back was never in doubt. His family is here, along with his wife’s family and loads of memories: “Country living — growing up riding four-wheelers, hunting, fishing, doing all the things they talk about in country songs. Wanting to offer those same opportunities to my children was definitely the biggest attraction.”

The relationship between providers and patients is informal, as reflected on the Hawkins Family Medicine Facebook page. In the past year, that page has mentioned the first day of school (wishing everyone “a sick-free year”), ugly Christmas sweaters, Hawkins’ mother-in-law/office manager (“the glue that holds us all together”), the rodeo (“stop by our booth!”) and much more. His faith also shows through: “Thanks be to the Lord for his blessings and to you ... for your trust.” The 68 patient reviews give him an average of 4.9 out of 5 stars. “Very smart, very caring crew they have here,” one patient wrote. “When you trust someone you’ll drive over an hour to come see them.”

Since 2012, Hawkins has been teaching College of Medicine students interested in rural medicine. His approach with students, as with patients, is quiet but confident, friendly but no-nonsense.

“I’ve enjoyed it,” he said. “It keeps me on my toes, just having to make sure I’m explaining stuff correctly and thinking outside the box when necessary. If you go back to the Latin root of ‘doctor,’ it’s ‘teacher.’”

RACKARD: 'BEST DECISION OF MY LIFE'

Rachel Rackard has lived in Thailand, Brazil, Maryland and Tallahassee, but in 2003 she and her husband adopted Chipley, population about 3,500, as their new home. At age 34, a so-called nontraditional student with a 6-year-old son, she's spending Year 3 in the College of Medicine's Rural Program, based near Chipley in Marianna.

As an undergrad at FSU, she double-majored in criminal justice and psychology. Then, for 10 years, she worked at the Life Management Center in Marianna and Bonifay, ultimately becoming a Licensed Mental Health Counselor. She enjoyed the work but eventually thought she could help people more if she had a medical degree. She and her supportive husband talked it over time and again. Big commitment, long commute, serious disruption of family routine.

She says she probably wouldn't be at the College of Medicine if not for a chance visit from first-year students.

"A couple of years ago, a class of new FSU med students came through Marianna as part of their Rural Experience," she said. "My supervisor asked me to talk to them about rural mental health. We had extra time, so I told them, 'Yeah, I thought about med school.' They were all so encouraging. I think that's when I really got serious. I knew I'd have to start from scratch with the science prerequisites, but I also knew the years were

going to go by whether I was working on this goal or not. It was time to take that first step forward. So, that's when my husband and I decided 'Yes.' It's been the best decision of my life."

This year, the Rural Program has a new approach. Instead of spending six weeks in family medicine, then eight weeks in internal medicine, for example, students experience the various specialties one day a week.

"It's been a good opportunity to see long-term, chronic-disease management," she said. "It gives you good opportunities to see true continuity of care from lots of perspectives. For example, I was in surgery Monday and Tuesday, and a lady came in with pelvic pain. The surgeon wanted to refer her to an OB doctor before he pursued other things. And I get to go on THAT appointment, to see it from the OB perspective."

She's looking ahead to the possibilities: "The Life Management Center is trying to do more integrated care and have family physicians come work with them. After residency, I've thought about trying to rejoin that agency. I definitely want to come back to this area. You literally can leave the doors unlocked and the keys sitting in the car seat. The people are so good."



ALBRITTON: HAPPY (AND FRAZZLED) IN MARIANNA

think my patients appreciate that I'm one of them," Robin Albritton says. "They come to me in camouflage, T-shirts, tank tops, flip-flops. You're never going to see me dressed up in a suit and tie in here, because that's just not who I am."

Albritton grew up in Marianna, headed to medical school, graduated in 2007, promised to come back after completing Tallahassee Memorial's Family Medicine Residency Program — and did. Five years later, he's seeing patients at Chipola Surgical & Medical Specialties, mentoring Marianna's next wave of prospective physicians, raising his kids and watching his community of more than 6,000 prosper.

At the same time, he's working some crazy hours and becoming increasingly aware of the red tape involved in old-fashioned primary care. It's satisfying, and sometimes frustrating, on the front lines.

"Dr. Albritton exemplifies the College of Medicine mission statement," Steven Spence, the medical school's clerkship administrator in Marianna, said in a letter nominating Albritton for this year's Distinguished Alumni Award — which he won.

"Working with Dr. Albritton makes you want to do primary care," said Jennifer Rowe, a third-year student who grew up in rural North Carolina and Florida's Clay County, and is spending Monday mornings with him this semester. "The rapport that he has with the patients is phenomenal. He doesn't rush people along. He's also very much into shared decision-making: 'These are our options. What would you like to do?' He can take something complex and break it down to a level that anyone can understand.

"He's very patient with me as well. It's not just, 'Hey, come follow me around and see what I do.' He's really interested in helping me learn how to think as a physician."

Here's a sampling of what Albritton thinks:

- "FSU has proven that an average MCAT score of 28 does not mean we have lower board scores than anybody else. I tell Chipola College students here all the time: You need to be a well-rounded individual to get into the College of Medicine. English and the arts are just as important as chemistry and biochemistry. And you need to do mission trips."
- "Primary care doctors in towns like I'm in are a dying breed: willing to do office, and hospital, and nursing homes, and be on call frequently. I'm on call every fifth weekend. Weekends are brutal. They're 72 hours. I'm responsible for every patient in the hospital. On a slow weekend I often will see 35 to 40 patients. On a busy day, 55."
- "Everything is electronic, which was supposed to help us practice medicine. But it's much more labor-intensive. We spend more time on the computer than with patients."
- "Marianna's a good community. A lot of my friends are back. They're engineers, lawyers, nurse practitioners, outstanding businessmen and -women. That's what it's going to take. There's nobody sitting in New York right now saying, 'Man, I'm moving to Marianna, Florida!'"



COLIN HACKLEY



COLIN HACKLEY

MACK: SEEING BEYOND GADSDEN COUNTY

Miranda Mack was valedictorian and taught chemistry and physical science at East Gadsden High. In short, she's plenty smart.

But medical school is a whole different animal. As it turns out, one of Mack's best discoveries during her medical training was about herself. At the Pensacola Regional Campus, she learned that one reason for her difficulty with exams was that she has ADHD. More important, she learned how to live with it.

Now, having finished her clinical rotations, she's ready to begin interviewing at residency programs for the next stage of her medical education. Big question: Now that she has experienced life beyond rural, familiar Gadsden County, where will she want to settle down?

"Everybody in Quincy that knows I'm in med school wants me to come back," she said. "At this point, I'm just waiting to find out where I'll go to residency, and then I have to go from there with the opportunities that open up."

Other observations from this Gadsden native:

- "I applied to a lot of places for medical school, but FSU is the only place that not only took me but nurtured me. I don't think I would have made it, honestly, if it hadn't been for the College of Medicine taking a chance on me."

- "I love Pensacola [where she spent her clinical years]. Escambia County has several satellite communities. I did pediatrics in the town of Jay, in the middle of nowhere with one traffic light. I've been in Gulf Breeze. I've been in Milton. I've been in Pace. It's been really interesting to see how things are different in all these areas."
- Dr. Luis Navas, her first physician mentor in Pensacola, "is one of the people that brought out my confidence. He gave me a lot of freedom, a lot of responsibility. He was able to see what my weaknesses were, and he pushed me toward more of my strengths. At the beginning I was second-guessing myself about everything. His mentorship and guidance really helped."
- "One program that I really liked was St. Vincent's in Jacksonville. I did a four-week rotation there and fit in pretty well with the faculty and residents. They have a combination of rural and urban populations; serve a lot of people who are uninsured; serve a lot of victims of crime; and have a lot of infectious disease. It's going to be one of my top choices for residency."

People of Gadsden County, don't give up: She still might be your doctor one day.



Frank Walker (center) with Dean John P. Fogarty (left) and Tallahassee Campus Dean Ron Hartsfield.

Alumni, distinguished

Ten years after graduating its first class, the College of Medicine is just getting started honoring its alumni. In August, in its second rendition, the PIMS and College of Medicine Distinguished Alumni Award moved to a bigger stage.

During the Class of 2019 White Coat Ceremony, the medical school's newest students got a chance to meet some of its finest alumni. Many of them likely recognized at least one of the winners.

Frank Walker, a Tallahassee pediatrician, was a member of the third group of students to complete the PIMS program (1974). Not long after establishing a pediatrics practice 30 years ago, Walker joined the PIMS admissions committee. He became the committee's chair and continues in that role today with the College of Medicine admissions committee.

He was nominated for the Distinguished Alumni Award by Class of 2019 student Andrew Kropp, who shadowed Walker for four years as an FSU undergraduate.

"I've had people tell me that they choose to drive hours from home in order to visit him because he cares the most and gives the utmost attention to their children," Kropp said. "Despite having hundreds of patients, Dr. Walker can tell you the social history of virtually anyone without having to look at their chart. Sometimes it's because he treated the parents when they were children."

The other 2015 Distinguished Alumni Award winner is **Robin Albritton (M.D., '07)**. He came to medical school from Marianna, where the college has a rural medicine education site, and said all along that he wanted to go back to practice, because that's where he was needed.

Albritton stayed true to his mission, no matter the challenges. For an idea about his life, and his work, see: **ALBRITTON: HAPPY (AND FRAZZLED) IN MARIANNA**, on Page 24.

Robin Albritton



COLIN HACKLEY

The model of success

Casey Cosgrove (M.D., '12) has been inducted into the Gold Humanism Honor Society twice – as a medical student at Florida State, and at The Ohio State University, where he currently is serving as Education Chief Resident in his final year of OB-GYN. One contributed to the other, as far as he's concerned.

“Florida State’s model of having us follow with experienced community physicians really provided me with a great foundation for how to treat the patient and for building a rapport that improves their medical care,” he said. “The responsibility of taking care of patients and working one-on-one with attending physicians gave me a great amount of autonomy, which has translated to success in residency. I also feel that having such great teachers and mentors while in medical school has motivated me to give back to the medical students that I work with.”

Cosgrove said the science he learned in his first two years at FSU prepared him well for the ensuing two years of clinical rotations. That’s where he said he was getting the experience that has helped him succeed at Ohio State.

“As a medical student at Florida State I always felt as if I was part of the team. My attendings gave me a great amount

of responsibility with patient care, which has been instrumental to a smooth transition to residency,” he said.

“I felt like from Day One in residency I was comfortable talking to consultants, working with patients, collaborating with nurses and other ancillary staff. Having the opportunity to work with an attending for several weeks on each rotation in medical school was greatly instrumental in building my confidence and allowed for a great degree of graduated responsibility that is so important in medical education.”

After completing his OB-GYN residency Cosgrove plans to do a fellowship in gynecologic oncology. And then. . .

“I hope to have the opportunity to stay in academic medicine and mentor medical students and residents,” he said. “I would love to have the opportunity to be a program director and/or medical student clerkship director in the future.”

Wherever he ends up, Cosgrove said he’s thankful for his time as a medical student at Florida State.

“I look back at how much we were able to grow on each rotation – from not being able to find a chart on Day One to writing notes, having succinct assessments and plans and being able to communicate the patient’s needs by the end of the rotation is a triumph for the FSU model of medical education.”



COLIN HACKLEY



FSU Photo Lab/Bill Lax

A message from Zita

It’s nearly a tradition now that the featured speaker at the White Coat Ceremony is a College of Medicine alumnus, particularly one who embodies the medical school’s mission statement in his or her practice choices.

Zita Magloire (M.D., '11) graduated from the University of Kansas Family Medicine Residency Program and returned to enter practice with one of her College of Medicine preceptors – Ashley Register in Cairo, Georgia.

“It is amazing to think that eight years ago I was in your place, about to walk across this very stage and don my white coat,” Magloire told the first-year students. “I want to, above all things, encourage you, and tell you that not only can you survive medical school, residency and beyond, but you can grow and become a strong, more caring person in the process.”

Magloire cited examples from her time in medical school.

“In residency, and even out in practice, most physicians don’t struggle because of lack of knowledge, but because of challenges in effectively communicating with others, dealing with stress or stressful situations, managing time effectively or being able to empathize with their patients,” she said.

“The things you will learn here are the skills and attributes that distinguish medical students from Gold Humanism Honor Society medical students; residents from chief residents; and a physician from the doctor that you would send your mom to. These are the things that matter most, and the white coat embodies all of them.”



COLIN HACKLEY

First Class support

The inaugural class of the FSU College of Medicine has created an endowed scholarship fund to commemorate its role in the medical school's history. More than a dozen members of the 27-person Class of 2005 gathered in April at the home of Senior Associate Dean **Myra Hurt** for a reunion that included the reenactment of a funny photo they took just before the class graduated 10 years earlier.

Standing above the stairs (l-r): **Amanda Sumner, Alex Ho, Myra Hurt, Nari Heshmati, Shayla Gray, Joda Lynn**, Dean Emeritus **J. Ocie Harris, Karen Miles** and Associate Dean **Helen Livingston**. Standing on the stairs (l-r): **Lorna Stewart, Christie Alexander, Kimberly Ruscher, Julie Barré** and **Sarah Mulkey** (with child).

To contribute to the fund contact Senior Development Officer **Cindy Tyler** – cindy.tyler@med.fsu.edu, 850-645-0390.



Ride for Hope

Jason Farrah (M.D., '06) and his brother, Jeffrey, started Ride for Hope, a memorial bike ride in Tallahassee, to honor their late father, Lou, who died of cancer in 2006. The event, sponsored by Tallahassee Memorial HealthCare, celebrated its 10th anniversary in June. Jason Farrah, center, posed with medical students from FSUCares, who participated in a health fair that is part of the weekend's activities each year. The event raises money for the TMH Cancer Center. FSUCares faculty advisor **Christie Alexander (M.D., '05)** is on the far right.

Moore praise

Steven Moore (M.D., '11) vowed while in medical school that he would become a primary-care physician like his father, who once was the only doctor in a small, rural town in Alabama. He has done that, graduating from the Family Medicine Residency Program at Carolinas Medical Center in Charlotte, North Carolina, in 2014 before joining a family practice in Charlotte.

Not long after joining the practice, Moore saw a particular patient for the first time while on rounds at the hospital. The patient and his wife were so impressed that she sent an email to College of Medicine Dean John P. Fogarty (and gave us permission to reprint it here):

“My husband just saw Dr. Moore today for the first time. He is an unbelievably wise, caring, and competent young physician with a brilliant future ahead (in my humble opinion)!!!!!!

“Sincerely, Patricia M. Spence.”



Sarah Barnett (M.D., '13), Erika Bernardo (M.D., '12), and Jazmin Lesnick (M.D., '11), crossed paths as medical residents with the U.S. Air Force pediatrics program in San Antonio, Texas. Bernardo graduated in June and is a USAF pediatrician at Fort Sam Houston, Texas. There are still three College of Medicine alumni in the residency program, but **Joshua Ellis (M.D., '14)** wasn't available for this photo.



Jada Leahy (M.D., '09) was photographed by the U.S. Navy as she performed surgery on board the aircraft carrier USS George H.W. Bush during a Feb. 16 training exercise in the Atlantic Ocean. Lt. Cmdr. Leahy was assigned to the USS Bush and was a staff surgeon at Naval Medical Center in Portsmouth, Virginia, but has since relocated to Naval Hospital Pensacola.



Mark your calendar

The PIMS and College of Medicine 2016 Reunion will be held April 23 at the College of Medicine's main campus. The event will include a CME program and barbecue and will be held in conjunction with Second Look Weekend (for students accepted to the College of Medicine's Class of 2020).

Look for additional details at med.fsu.edu/alumni or contact Alumni Relations Coordinator Chelsea Knott – chelsea.knott@med.fsu.edu, 850-645-9428.

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Subscribe to "FSU COM" on **YouTube** to see videos produced by and about the college.



Join our **LinkedIn** group, "Florida State University College of Medicine," to discuss medical issues or view job openings.



2006



Scott L. Brotherton, M.D., is an orthopedic surgeon in Palm Harbor, Florida. He completed military service as a major in the U.S. Air Force, where he served as chief orthopedic surgeon at Osan Air Force Base in South Korea and as an orthopedic surgeon at Eglin AFB in Florida. He completed a fellowship in sports medicine at Andrews Research Institute in Gulf Breeze, Florida.



Shannon Price, M.D., is an OB-GYN with Affinity Physicians for Women in Tifton, Georgia.



Chris Sundstrom, M.D., is chair of the Department of Obstetrics and Gynecology at Tallahassee Memorial Hospital. His vice chair is FSU College of Medicine alumna **Tanya Evers** (M.D., '08).



2007



Andrew Gamenthaler, M.D., is a surgical oncologist in Daytona Beach.

2008



Andrew Galligan, M.D., completed the Pediatric Hematology/Oncology Fellowship at UF Health in Gainesville. In July he became an assistant professor of pediatric hematology/oncology at USF Health Morsani College of Medicine in Tampa.

2009



George Barrio, M.D., is practicing neurology with The NeuroMedical Institute of Panama City, Florida.

2010



Thomas Babcock, M.D., is a fellow of otology, neurotology and lateral skull base surgery at the University of Miami Miller School of Medicine in Miami.

2011



Veronica Finnegan, M.D., is chief resident of the SUNY Upstate Radiation Oncology Residency Program in Syracuse, New York.



Ashley Kelley, M.D., graduated from the Georgetown University Medicine-Pediatrics Residency Program in June and is a medicine-pediatrics primary-care specialist in Vienna, Austria.



Ashley Lucke, M.D., serves as chair of the American Academy of Pediatrics Section on Medical Students, Residents and Fellowship Trainees. She recently began a neonatology fellowship at Baylor College of Medicine in Houston.



Bradford March, M.D., is chief resident of the Brown University Diagnostic Radiology Residency Program at Rhode Island Hospital in Providence.



Kelli Murphy, M.D., returned from an operational forces tour as a flight surgeon with the U.S. Navy, and got engaged in August (her fiancé is Shaun Randell). She is an IM resident at Naval Medical Center San Diego.

2012



Sharon Aroda, M.D., completed the USF Internal Medicine Residency Program in June and is an internal medicine physician with USF Health in Tampa. Aroda was married in March to Ankit Shah, a 2012 USF College of Medicine graduate who currently is a resident in ophthalmology.



Michelle Cormier Brenner, M.D., recently completed a U.S. Navy operational forces tour as Fleet Marine Force Battalion Surgeon. She is completing the internal medicine residency program at Naval Medical Center San Diego.



Casey Cosgrove, M.D., is in the final year of the obstetrics-gynecology residency program at The Ohio State University. Read more about his accomplishments after medical school on Page 27.



Tara Cosgrove, M.D., served as chief resident of pediatrics at Nationwide Children's Hospital in Columbus, Ohio, where she recently began a pediatric oncology fellowship.



Jessica L. Malmad, M.D., is a family physician at Stone Mountain Primary Care in Atlanta.



Monica Peña, M.D., completed the Pediatrics Residency Program at Baylor College of Medicine-Houston in June. She currently is practicing with Pediatrics in Brevard at locations in Melbourne, Viera, Cocoa Beach and Rockledge.



Mary Leona Walch Pippin, M.D., completed the Family Medicine Residency Program at Wake Forest Baptist Medical Center in June. She is a family physician in Enterprise, Alabama. Her husband, **Jerrid Pippin, M.D.**, completed the Emergency Medicine Residency Program at Wake Forest in June and is an ER physician in Dothan, Alabama.



2013



Fernando Parra-Ferro, M.D., is chief resident of emergency medicine at the University of South Carolina/Palmetto Richland and is the proud parent of baby boy Tristan Alexander Parra-Ferro, born May 16.



Lisa Sappenfield, M.D., recently was featured in the American Congress of Obstetricians and Gynecologists District XII newsletter for her work in a report on the ACOG Annual Clinical and Scientific meeting. Sappenfield is a past winner of the College of Medicine's Ryals Clements Award for the outstanding graduating student in OB-GYN.

The Power of the Mosquito Bite

Daniel Van Durme's goal was to be in the *New England Journal of Medicine*, but not like this. In July 2014, when the *Journal* reported that the United States had 232 imported cases of the chikungunya virus, he was one of those cases.

More than a year later, he still is. The high fever lasted just the first week, as did the worst joint pain. But he's still taking ibuprofen and other anti-inflammatory drugs to ward off the discomfort.

Van Durme, director of the College of Medicine's Center on Global Health, has treated patients in more than a dozen countries. Yet he has a whole new respect for infectious diseases and the impact one mosquito can have.

"I was returning from a medical trip to Haiti, and at the Miami airport I first started having symptoms," he said last spring while leading a seminar on chikungunya (pronounced "chicken-GUN-ya") and similar diseases. "I started rubbing my left ankle. By the time I landed in Tallahassee, my right hand started to hurt. Those are still giving me trouble."

The first week is typically the worst.

"Chikungunya' is a West African word that means 'to be bent over,'" said Van Durme, who's also chair of the college's Department of Family Medicine and Rural Health. "Within 24 hours of first having ankle pain,

I had to have two canes — one in each hand — to get from my bed to the bathroom, walking ... about ... like ... this," he said, pretending to trudge through molasses. "Every joint was hurting. My knees, my back, my neck, everything. I lay in bed like this" — hands crossed on his chest — "and my arms got stiff. So I thought, 'I've got to straighten my arms out.'" Easier said than done. He demonstrated with clenched teeth and grunts of pain how much effort was required.

"The bad symptoms last seven to 10 days. My fever got up to 104.0 — delirium-inducing fever. The joint pain can last a year or more. I'm still taking daily NSAIDs. I'll keep my fingers crossed, and hopefully it will be resolved eventually."

Chikungunya showed up in West Africa in the 1950s and the Caribbean in 2013. As of March, throughout the Americas, there were 1.3 million suspected cases, Van Durme said.

Originally the virus lived in just one type of mosquito, *Aedes aegypti*, he said. "Then it jumped species to also live in the *Aedes albopictus*. Both of those mosquitoes are all through the Southeast. You go outside and get bit by a mosquito, there's a good probability it could be one of those two."

In fact, some people who didn't travel have still contracted chikungunya. "Somebody went to one of these areas, brought back the virus, got bit by a Florida mosquito, and then the Florida mosquito bit another Floridian and gave them chikungunya," Van Durme said.

The fatality rate is only about 1 in 1,000, usually the very young or very old. No antiviral therapy is available. So rest and hydration are important, he said, as are acetaminophen for fever and, again, anti-inflammatories for pain. He's still taking them every day.

But this experience has done nothing to dampen Van Durme's enthusiasm for global medicine. He plans to return to Haiti and has resumed his quarterly trips to Nicaragua.

"I have seen several patients with chikungunya in Nicaragua," he said, "and they understand that I can show true sympathy when I tell them I had it as well."

Painful though it has been, Van Durme's illness has been a powerful teaching tool.

"Students do not really comprehend that we actually put ourselves in harm's way when we treat some illnesses," he said. "I think it gets them to consider their own career choices and what precautions they may take."

If they do get sick? "For some illnesses, like the flu, we strive to teach students that they **MUST** stay home to avoid getting others sick." But if they're not contagious, he said, doctors must find the balance between when to work, even if they're not 100 percent, and when to stay home and get well.

Avoiding mosquito bites: www.cdc.gov/features/stopmosquitoes/



Florida State University College of Medicine Partners

As a community-based medical school, the FSU College of Medicine provides clinical training at regional medical school campuses around the state through affiliations with local physicians, ambulatory care facilities and hospitals. The medical school is proud to recognize its partner institutions and organizations.



RAY STANYARD

1 Daytona Beach Campus

- Bert Fish Medical Center
- Flagler County Health Department
- Florida Health Care Plans Inc.
- Florida Hospital DeLand
- Florida Hospital Fish Memorial
- Florida Hospital Flagler
- Florida Hospital Memorial Medical Center
- Florida Hospital Oceanside
- Halifax Health
- Stewart-Marchman-Act Behavioral Healthcare
- Surgery Center of Volusia County
- Twin Lakes Surgical Center
- Volusia County Health Department
- Volusia County Medical Society

2 Fort Pierce Campus

- Department of Health in St. Lucie County
- Florida Community Health Center Inc.
- Children's Medical Services – Southeast Region
- Grove Place Surgery Center
- HANDS Clinic of St. Lucie County
- Heart & Family Health Institute
- HealthSouth Treasure Coast Rehabilitation Hospital
- Indian River Medical Center
- Indian River County Medical Society
- Lawnwood Regional Medical Center
- Martin Health System
- Martin County Medical Society
- New Horizons of the Treasure Coast
- Port St. Lucie Hospital
- Raulerson Hospital
- Sebastian River Medical Center
- St. Lucie Medical Center
- St. Lucie Surgery Center
- St. Lucie/Okeechobee Medical Society
- Surgery Center of Okeechobee Inc.
- Surgical Center of the Treasure Coast
- The Surgery Center at Jensen Beach
- Treasure Coast Center for Surgery
- Treasure Coast Community Health
- Treasure Coast Hospice
- VNA of the Treasure Coast
- Volunteers in Medicine Clinic

3 Orlando Campus

- Alliance Surgical Center
- Central Florida Regional Hospital

- Community Health Centers Inc.
- Department of Health in Orange County
- Downtown Surgery Center
- Florida Hospital
- HealthSouth – Physicians' Surgical Care Center
- Nemours Children's Clinic
- Orange County Medical Examiner's Office
- Orange County Medical Society
- Orlando Center for Outpatient Surgery
- Orlando Health
- Orlando VA Clinic
- Seminole County Health Department
- South Lake Hospital
- St. Cloud Regional Medical Center
- UF Cancer Center – Orlando Health

4 Pensacola Campus

- Baptist Health Care
- Children's Medical Services – Northwest Region
- Covenant Hospice
- Department of Health in Escambia County
- Department of Health in Santa Rosa County
- EmCare
- Escambia County Medical Society
- Haven of Our Lady of Peace
- Lakeview Center Inc.
- Naval Hospital Pensacola
- Nemours Children's Clinic
- North Okaloosa Medical Center
- Sacred Heart Health System
- Santa Rosa Medical Center
- VA Gulf Coast Health Care System
- West Florida Hospital

5 Sarasota Campus

- Aesculapian Surgery Center
- Bay Pines VA Healthcare System
- Cape Surgery Center
- Department of Health in Sarasota County
- DeSoto Memorial Hospital (Arcadia)
- Doctors Hospital of Sarasota
- Doctors Same Day Surgery Center
- GulfCoast Surgery Center Inc.
- Lakewood Ranch Medical Center
- Manatee Memorial Hospital
- Sarasota County Medical Society
- Sarasota Memorial Health Care System
- Venice Regional Bayfront Health

Tallahassee Campus

- Advent Christian Village
- Apalachee Center Inc.
- Archbold Medical Center (Thomasville, Ga.)
- Big Bend Hospice
- Bond Community Health Center Inc.
- Capital Health Plan
- Capital Medical Society
- Capital Regional Medical Center
- Centre Pointe Health & Rehabilitation
- Children's Medical Services – Big Bend Region
- Department of Health in Leon County
- Doctors' Memorial Hospital (Perry)
- Emerald Coast Behavioral
- FSU Health and Wellness
- HealthSouth Rehabilitation Hospital
- Life Care Centers of America (Thomasville, Ga.)
- Memorial Hospital and Manor (Bainbridge, Ga.)
- Neighborhood Medical Center
- Red Hills Surgical Center
- Refuge House
- Southwest Public Health District 8, Unit 2 (Thomasville, GA)
- Tallahassee Memorial HealthCare
- Tallahassee Outpatient Surgery Center
- Tallahassee Plastic Surgery Clinic
- Tallahassee Single Day Surgery
- Tallahassee VA Clinic
- Westminster Oaks

★ Rural Medicine

- Collier County Health Department (Immokalee)
- Florida State Hospital (Chattahoochee)
- Healthcare Network of Southwest Florida (Immokalee)
- Jackson Hospital (Marianna)

FSU College of Medicine -Sponsored Residency Programs

- Dermatology Residency Program at Dermatology Associates (Tallahassee)
- Family Medicine Residency Program at Lee Memorial Health System (Fort Myers)
- General Surgery Residency Program at Tallahassee Memorial Hospital (Tallahassee)
- Internal Medicine Residency Program at Tallahassee Memorial Hospital (Tallahassee)

- Obstetrics & Gynecology Residency Program at Sacred Heart Health System (Pensacola)
- Pediatrics Residency Program at Sacred Heart Health System (Pensacola)
- Procedural Dermatology Fellowship Program at Dermatology Associates (Tallahassee)

Family Medicine Residency Program Affiliations

- Bayfront Medical Center (St. Petersburg)
- Florida Hospital (Orlando)
- The Florida State University College of Medicine Family Medicine Residency Program at Lee Memorial Health System (Fort Myers)
- Halifax Health (Daytona Beach)
- Mayo Clinic (Jacksonville)
- Miller School of Medicine, University of Miami, Department of Family Medicine and Community Health (Miami)
- Morton Plant Hospital (Clearwater)
- Naval Hospital Pensacola
- St. Vincent's Medical Center Inc. (Jacksonville)
- Tallahassee Memorial HealthCare

Other Affiliates

- Gadsden County Health Department (Quincy)
- H. Lee Moffitt Cancer Center & Research Institute (Tampa)
- Halifax Health General Surgery Residency



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Getting your first white coat is not only a transformational experience for most medical students, but it's apparently a lot of fun, as well, judging by the reaction of Brianna Baker, a first-year student from Fort Walton Beach.

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END NOTE

