Florida Passes Landmark Physician Workforce Legislation
How do you internationalize an American profession? The answer is simple: One country at a time.

One of the dilemmas osteopathic medicine has encountered in its attempt to globalize the profession is the ambiguous way much of the world interprets the term osteopathy. While osteopathic medicine is a patently American-based profession that is viewed as distinctive but equal to allopathic medicine in the United States, the concepts of osteopathy are international and varied.

For example, in countries such as England and Australia, they offer a D.O. degree just for learning the osteopathic manipulative medicine aspect of the profession. In France, it’s a certificate program; in Germany, it’s an add-on to an M.D. degree. Consequently, it’s not hard to understand why American D.O.s have such a difficult time getting licenses in some countries.

In recent years, the American Osteopathic Association and other osteopathic organizations and colleges have truly invested themselves in expanding our brand of osteopathic medicine into other countries by working hard to differentiate graduates of AOA-accredited programs from other osteopathic programs around the world. But it’s been a protracted process for a number of reasons.

Most professions, especially the health professions, never think of equal but distinctive branches of a single profession. For instance, although the licensing boards in each country accredit them, health professionals such as pharmacists, nurses, optometrists, and physician assistants are universally the same no matter where they practice or earn their degrees. Clearly, the same cannot be said for D.O.s.

As I mentioned, osteopathic medicine has made inroads in various countries—especially in regard to educating the licensing boards, governmental agencies, and/or ministers of health about what American osteopathic medicine is all about, the qualifications of its physicians, and their ability to practice any specialty of medicine. I’m proud to say that NSU’s College of Osteopathic Medicine has—and continues to—play a significant role in this process through its international outreach programs, international selective rotations, and other means.

Because of its ever-growing esteem, the College of Osteopathic Medicine has begun to meet with international universities that currently have a medical school. As a result, we are beginning to develop, exchange, and share knowledge and learning experiences with their students—and ours. In fact, we’re currently dealing with two medical schools in Columbia and one in Argentina, as well as looking at establishing and implementing a program in certain countries in the Caribbean and Portugal to promote the recognition and practice of American-based osteopathic medicine in their countries.

What we’re looking at doing is having some of these international students come to our college to learn about our curriculum, while some of our students will do the same by visiting the international colleges we form affiliations with in the near future. In addition, because of our tremendous distance learning opportunities here at NSU, we can utilize international lecturers who possess expertise in areas that are not common in our country and vice versa.

Because travel borders are no longer as imposing as they once were, the opportunity to learn and be taught by health professionals from different parts of the world is becoming more important as patients in the United States will—with increasing frequency—present with diseases we were unfamiliar with in the past.

We are also fortunate that NSU-COM’s public health perspective and curriculum, which includes a significant focus on preventive medicine, allows us to pursue this international aspect to further create opportunities in those fields because of the public health impact many diseases have. It also provides an opportunity to gain knowledge and potentially look at international career paths instead of just regional ones.

Without question, NSU-COM is embarking on an exciting new chapter in its history. Our intent is to help bring practitioners that have graduated from AOA-accredited colleges of osteopathic medicine into the international arena where they can serve humanity. In many foreign countries, their major need is primary care physicians who can function in rural, isolated areas. Consequently, it’s a perfect marriage of supply and demand because we possess a rich history of having a positive disproportionate number of practitioners in medically underserved urban and rural populations.

If we couple these factors with the opportunity to work as physicians—especially within the primary care specialties—in these countries and can educate medical students living in these countries to become osteopathic physicians from an AOA-accredited COM, we will end up having a tremendous impact on improving the quality of health care worldwide. Eventually, these efforts will allow all graduates of NSU-COM—and any other COM in the nation—to practice anywhere in the world they wish to practice.
In June, an important piece of legislation was enacted by Florida Governor Charlie Crist that requires the Department of Health to collect and analyze physician workforce information that will help the state address and plan for its future health care needs. The specifics of this legislation are addressed at length in this issue of COM Outlook, but it is certainly not an understatement to say this is something that has been needed for a very long time, particularly in a growth state such as Florida.

Because most citizens live and socialize in their own communities, they rarely see the diaspora of populations or realize the vastness of this huge land mass called Florida. They see it on the map as a peninsula state, but if you take Florida and overlay it on the northeastern part of the United States, the image is startling. Consider this: If you take Pensacola and place it on Bangor, Maine, then Homestead, which is at Florida’s southern tip, would end up being in Dover, Delaware.

I mention this because in the delivery of health care, which is not something that requires a doctor, pharmacist, nursing professional, allied health professional, optometrist, or dentist on every corner, you absolutely need these individuals in what I call circles or regions of influence. In the popular coastal regions of the state, there is an abundance of the aforementioned health care professionals to care for the population. However, many of the people moving into the state now are moving into new areas where there is a definite lack of health care services.

This is illustrated by the fact that the legislature, the governor’s office, and the overseeing board of our education system have created several new medical schools in recent years to address this issue. However, the creation of new medical schools does not ensure an equitable geographic distribution of these educated professionals that graduate from the multiplicity of programs in the state of Florida. Nor does it guarantee that these individuals will even remain in Florida to pursue their health care careers.

It’s important to recognize that, in many places, there are no subspecialty physicians for 90 or 120 miles—and you don’t have to go very far to find this dilemma. All you have to do is travel to the western Palm Beach County area, which has experienced a huge population explosion over the past decade. As a result, the county is struggling to find sub specialists such as neurologists, neurosurgeons, and orthopedists because they are not plentiful, or in some areas, simply nonexistent.

There is an integral reason why the state needs to study this situation. We’re soon to be the third-largest state in the country behind California and Texas, and yet we have this disparate distribution of health care professionals. You can’t just listen to people such as myself espouse certain thoughts on the issue based upon the fact that I’ve been involved in health care for 45 years. You need to do surveys, analyze the data, and publish statistical, value-based reports that prove there is a tremendous void in the care of individuals who are moving north of the I-4 corridor in the middle of the state. Additionally, you need to verify that there is indeed a tremendous lack of health care professionals to provide health care to these new communities.

Health care today is no longer as simplistic as it was decades ago. It now involves the workings of multiple health professionals, particularly allied health and nursing professionals, who have greater education and possess the necessary critical-thinking skills to ensure efficient and expedient hospital management. In addition, because the cost of health care has escalated so dramatically, the only way you are going to bring efficiency to the system is for all health professionals to become much more communicative and cooperative in their delivery of the health care product.

We teach these principles here at NSU’s Health Professions Division. For example, we have interdisciplinary classes, educate our students in a clinical environment, and teach them to respect each other’s knowledge base. More importantly, we teach them to respect the vast wealth of knowledge that is going to be provided to allay morbidity and provide consequential health value to the patient.

Florida is the epicenter for change in health care delivery in the United States. Consequently, if we can effectively tackle wellness and prevention issues and improve the compliance rate of people who already have multiple morbidities in their older years—if we can successfully deal with these issues by having health care professionals in the right place at the right time in the most efficient way—then we are going to be doing the rest of the country a big service.

That’s why this physician workforce bill is so important. It isn’t just to illustrate how many doctors we have and how many doctors we retain in the state of Florida. It goes well beyond that, which is why I’m hoping this initial examination of workforce activity through the Department of Health will lead to similar studies of all health professionals.
Interdisciplinary Approach Enhances Jamaica Medical Mission

Thanks to the interdisciplinary atmosphere that exists at NSU’s Health Professions Division, this year’s Medical Mission to Jamaica proved to be the largest and most successful in its seven-year history. In an extraordinary show of support, the 130-member health care squadron traveled to a number of locations throughout Jamaica to provide a range of services to a record 4,000 appreciative patients.

Florida Passes Landmark Physician Workforce Legislation

Earlier this year, historic physician workforce legislation in the form of a bill titled CS/CS/SB 770 was passed by the Florida Legislature and signed into law in June by Governor Charlie Crist. It was a milestone accomplishment that occurred with little fanfare, but the health care benefits it will eventually provide to Florida’s diverse and ever-burgeoning population will be far-reaching.

Near-Death Experience Leads Dr. Stanley Simpson to NSU-COM

On the morning of May 16, 1986, Dr. Stanley Simpson experienced the sort of medical emergency every physician dreads—only this time it wasn’t one of his patients who was writhing in pain during the throes of a massive heart attack—it was Dr. Simpson himself. Although he fully recovered from his frightening brush with death, Dr. Simpson was forced to make some profound changes in both his life and career, which included joining the College of Osteopathic Medicine’s faculty in 1992.

Osteoblast Entertains and Educates Attendees

The incoming M1 class experienced the invaluable opportunity of relaxing and mingling with M2s, family, and friends at the annual Osteoblast, which was held in August on the grass courtyard in front of NSU’s Alvin Sherman Library, Research, and Information Technology Center.

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In July, The NSU-COM Area Health Education Centers (AHEC) Program brought staff from its regional affiliated Everglades AHEC and Central Florida AHEC together with representatives from Broward County Public Schools and faculty from the NSU Nursing Program to plan a major expansion of its Tobacco Cessation and Prevention Training Initiative. Through this project, the AHEC will deliver services to train current and future health providers and enhance access to tobacco cessation and prevention services throughout its 19-county South and Central Florida service region.

Twenty-five of the top 50 woman-owned businesses in the state operate in South Florida, including Westchester General Hospital in Miami, which is a member of the Consortium for Excellence in Medical Education. Gilda Baldwin, who serves as CEO of Westchester General, ranked third in the survey, which was based on total revenue and sponsored by the Center for Leadership at Florida International University (FIU) and the Commonwealth Institute South Florida.

OPP fellows Elena Timoshkin and Alberto Caban-Martinez, M.P.H., attended the Florida Academy of Osteopathy (FAO) 52nd Annual Conference, which was held in April at the LECOM-Bradenton medical campus in Bradenton, Florida. During the symposium, Timoshkin and Caban-Martinez expanded their OMT skills and learned techniques not routinely taught at NSU-COM. In addition, Timoshkin was awarded the FAO Student of the Year Award for her service to NSU-COM and OPP. In August, Timoshkin was given another prestigious accolade when she received the American Osteopathic Foundation’s 2007 Burnett Osteopathic Student Research Award, which comes with a $2,000 cash prize. The award is presented annually to an osteopathic medical student who submits the most outstanding concept paper pertaining to an osteopathic-oriented research proposal.

Lynne Cawley, M.Sc., director of alumni affairs, has been elected to a two-year term as chair of the Council of Development and Alumni Relations of the American Association of Colleges of Osteopathic Medicine.

Throughout the month of June, five M2 students attended Air Force Officer Training School at Maxwell AFB in Montgomery, Alabama. The month-long experience consisted of extensive training in U.S. Air Force principles and leadership. In addition to early morning workouts and lectures, the students experienced a mock overnight deployment, complete with a makeshift hospital, to learn the duties they will be expected to perform as military physicians and leaders while overseas.

During Club Week, Student National Medical Association officers teamed up to help recruit new members. Pictured (from left) are Candace White (M1 representative and Medical Explorers chair), Damilola Olupona (vice president), Camille Pond (treasurer), and Audrea Vaughan (president).

White Coat Ceremony Welcomes Class of 2011

On August 5, the class of 2011 was officially welcomed into the osteopathic occupation at the 27th Annual White Coat Ceremony, which was held at NSU’s University Center. For the 230 students comprising the class of 2011, the White Coat Ceremony served as an auspicious experience that officially marked their entry into the medical profession.

In the presence of family, guests, and faculty members, the students were welcomed into the medical community by leaders of the osteopathic profession and ceremonially “cloaked” with their white coats. By establishing this meaningful ritual at the beginning of medical school, the intent is to make students aware of their responsibilities from the first day of training and convey the message that doctors should “care” as well as “cure.”
In June, the NSU-COM 10th Annual Alumni Reunion and Continuing Medical Education Program received the Best Special Event Award in the 2007 American Association of Colleges of Osteopathic Medicine (AACOM) Communications Awards Competition. The organization represents each of the nation’s 26 colleges of osteopathic medicine/branch campuses and serves the administration, faculty, and students of osteopathic medical schools through its centralized application service, government relations, finance, communications, and research/information departments.

On August 6, two representatives from the Florida Department of Health—Ana Viamonte-Ros, M.D., M.P.H., who serves as secretary and surgeon general, and Deputy Secretary Lillian Rivera, R.N., M.S.N.—visited the Health Professions Division to develop partnerships with NSU as well as various state and local health departments. According to David Thomas, M.D., J.D., professor and chair of NSU-COM’s Department of Surgery, “Dr. Viamonte-Ros was very impressed with the possibilities of collaborative opportunities with the university, especially with our medical and dental colleges.”

The Health Professions Division and the College of Osteopathic Medicine were recognized by the South Florida Table Tennis Organization for their ongoing support of The South Florida Newgy Open Table Tennis Championships, which were held June 30-July 1 in Coral Springs. The event benefits the organization’s junior table tennis programs and the Boys & Girls Clubs of Broward County.

In June, Alberto Caban-Martinez, M.P.H., attended the Society of Epidemiologic Research (SER) meeting in Boston, Massachusetts, to present his research findings on the topic “Surveillance of Concurrent Hearing and Visual Impairment in U.S. Workers: The National Health Interview Survey 1997 to 2004.”

While most of their counterparts were traveling or catching up on lost sleep during their six-week break between their first and second year of medical school, three M2 students who are ensigns in the U.S. Navy—Daniela Perez-Velasco, Andrea Gajeton, and Lynn Morrissey—attended Officer Development School in Newport, Rhode Island. During their five-week training, the students learned about their responsibilities as military officers and doctors through leadership courses as well as classes that taught them about the U.S. Navy’s history and organization.

Nine NSU-COM students participated in the Everglades AHEC Summer Health Career Camp, which allows a number of high school students from underserved rural/inner-city areas to benefit from an educational experience that provides them with an early introduction to health-related careers. “Each of these students brought a unique combination of their love of learning, interest in rural communities, and an intense commitment to share their knowledge and commitment to health care,” said Shelley Warshaw, who serves as recruitment coordinator for the Everglades AHEC. “This year’s camp participants were among the most fortunate to have been able to know and learn from this exceptional group of future NSU-trained physicians.” The participating students were Alex Dubrovsky, Minerva Ellis, Chuck Green, Thuy Le, Richelle Martinez, Damilola Olupona, Adam Philips, James Spendley, and Nick St. Hilaire.

On August 25, several representatives from NSU-COM turned out to celebrate the achievements and longevity of Edith Lederberg, who serves as executive director of the Aging Disability and Resource Center of Broward County. The “Viva la Edith” event, held in Fort Lauderdale, was a joyous commemoration of Lederberg’s 30 years of dedicated and continuous service to the senior services agency.
Eye on AHEC

- The AHEC Program’s nationally recognized annual Summer Health Career Camps were extremely successful, featuring 95 high school students from a pool of approximately 250 applicants from over 30 schools located throughout the program’s 19-county service area.

- AHEC personnel have continued to collaborate with the nursing department of NSU’s College of Allied Health and Nursing to implement a community health promotion/disease prevention training initiative. This includes placing nursing students at community health center sites in Broward and Lee counties to deliver health education and preventive case management services to patients with diabetes, cardiovascular disease, obesity, and other health issues. Through this effort, 25 nursing students provided health education and disease management services to 1,000 patients during the past year.

- NSU’s Center for Psychological Studies is working with the AHEC Program to develop a series of training programs for faculty and students from osteopathic medicine, nursing, dental, and other HPD programs as well as community health providers on motivational interviewing techniques to effectively assist patients to change health risk behaviors such as smoking. Through this project, the AHEC Program is further enhancing the multidisciplinary nature of the many training programs and services it provides to the university and underserved areas throughout South and Central Florida.

Palmetto General Hospital, which is a member of the Consortium for Excellence in Medical Education, was featured in U.S. News & World Report’s Best Hospitals 2007 report. Palmetto General Hospital was one of the 22 Tenet hospitals among 277 hospitals nationwide recognized by the American Heart Association/American Stroke Association in the magazine for achievements in the Get With The Guidelines™ program to improve patient outcomes and save lives by promoting evidence-based treatments for coronary artery disease, heart failure, and stroke. In addition, Palmetto General Hospital received two awards in July at the 27th Annual Florida Society of the American College of Osteopathic Family Physicians (FSACOFP) Convention. The Family Medicine Resident of the Year Award was bestowed upon Nancy Culp, D.O., a graduating PGY III family medicine resident, while Marc Morganstine, D.O., vice president of medical education, received the Family Medicine Resident Educator of the Year Award.

Promoting Health Across Campus…and Beyond!

By Sandi Scott-Holman, D.O.       Director, NSU Student Medical Center

Despite effective vaccines, pertussis (also known as whooping cough) remains a serious public health problem, which is why promoting effective vaccination strategies is key to reducing the burden of disease in adolescents and adults.

Prior to the introduction of the pertussis vaccine in the 1940s, there were approximately 250,000 cases reported annually and 10,000 deaths. By 1976, cases were down 97 percent. But in the 1980s, the number of cases began to rise, and by 2005, the CDC reported 25,616 cases and 38 deaths. Waning immunity seems to be a leading cause. Five to 10 years after completion of the childhood vaccination series, immunity typically declines. Therefore, the CDC Advisory Committee on Immunization Practices published updated guidelines in December 2006 for pertussis vaccinations. Following is a brief synopsis:

- Adults who completed the primary vaccination series with a diphtheria and tetanus-toxoid-containing vaccine (DTP/DTap) and received their last Td (tetanus) vaccine more than 10 years ago should be vaccinated with a single Tdap booster dose.

- Tdap is approved for one-time use only, so follow with a Td booster every 10 years.

- Adults who require tetanus vaccination as part of wound management should receive the Tdap rather than the Td.

- Intervals as short as two years are acceptable since last Td.

Health care workers are at increased risk of contracting and transmitting pertussis compared to the general population. Please schedule an appointment at our Student Medical Center for your Tdap vaccination today by calling (954) 262-1262.
### Student Government Association Report

The 2007-2008 SGA would like to welcome the class of 2011 to NSU-COM. We would also like to congratulate and welcome Megna Shah as our new SGA secretary. The executive board is looking forward to a productive and exciting year, promoting involvement, service, and collaboration among our colleagues. The SGA has decided on several initiatives for the year, some new and some old.

**TOUCH Kickoff** - TOUCH stands for Translating Osteopathic Understanding into Community Health. TOUCH is an initiative implemented nationally by ACOM’s Council of Osteopathic Student Government Presidents (COSGP) to promote and recognize community service performed by osteopathic medical students around the country. This year, we started with a TOUCH kickoff event held on Saturday, September 15 at John U. Lloyd State Park, where NSU-COM students participated in the annual Intercoastal Cleanup. The event included picking up trash, removing foreign trees, and planting native plants in the sand dunes, followed by a beach party.

**SGA Committees** - This year, the SGA has decided to focus on involving more students in the day-to-day functioning of the SGA by soliciting first-year students to become involved in various committees including TOUCH, Social, Web Site, Finance, M3/M4 Liaison, and more.

**New Organizations on Campus** - We are pleased to welcome two new student interest groups: the Anesthesiology Interest Group, founded by M2 Michael Valladares, and the Radiology Interest Group, founded by M2 Erica Cohen. The two new groups will work to bring in speakers and arrange opportunities for students who may be interested in those professions.

**Annual Awards** - The SGA will continue to award the Student D.O. of the Year, Student Clinical Preceptor of the Year, and Student Organization of the Year awards, which serve to recognize excellence in service to the NSU-COM community.

**Preparing Students for Clinical Rotations and Residency Matches** - Together with Dr. Joseph De Gaetano, the Office of Clinical Education, and the classes of 2009 and 2010 SGAs, we are continuing projects to help prepare students for decisions about where to perform clinical rotations and how to prepare for the national residency matches.

### 2007-2008 Executive Board

**President:** Roger A. Alvarez (M3)  
**Vice President:** Jessica Hilst (M2)  
**Treasurer:** Srinivas Rajendran (M2)  
**Secretary:** Megna Shah (M2)

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### CBAP Cosponsors Interdisciplinary Law Conference

On September 8, NSU-COM’s Center for Bioterrorism and All-Hazards Preparedness (CBAP) co-hosted a first-of-its-kind symposium at NSU’s Davie campus called Bioterrorism and All-Hazards Preparedness—Implications for the Legal Community: Are You Ready? The daylong program, which was co-hosted by NSU’s Shepard Broad Law Center, featured national, state, and local experts in law and public health preparedness who discussed an array of topical issues.

**Leonard Levy, D.P.M., M.P.H.,** who serves as CBAP director, spoke about all-hazards emergencies and preparedness issues and addressed the importance of working with the legal community from a public health care perspective. In addition, **Jessica DeLeon, Ph.D.,** CBAP coordinator of research and evaluation, and **David Thomas, M.D., J.D.,** chair of the Department of Surgery and professor of public health, discussed the topic “Planning and Preparedness for the Frail Elderly and Other Vulnerable Populations—A Legal Perspective.”

Featured national speakers included **Daniel D. Stier, J.D.,** public health analyst for the Public Health Law Program at the Centers for Disease Control in Atlanta, Georgia, who spoke on “The Public Health Law Perspective in an Emergency,” and **Patricia M. Sweeney, J.D., M.P.H., R.N.,** chair of the Department of Public Health Practice at the Graduate School of Public Health at the University of Pittsburgh, who discussed “Legal Preparedness for the Courts and the Public Health System in an Emergency.”

The afternoon sessions, which were devoted to providing a context for public health preparedness and the law in Florida, featured a number of insightful seminars. **Joshua A. Perper, M.D., M.Sc., LLB,** chief medical examiner, Broward County, and NSU-COM clinical professor of surgery (pathology), discussed “The Role of the Medical Examiner in a Public Health Emergency,” while **Richard McNelis, J.D.,** assistant general counsel for the Florida Department of Health, presented an overview of “State Public Health Laws Related to Emergencies.”

The conference concluded with the speakers forming a panel to discuss the challenges for Florida in developing a coordinated system of communication and collaboration between public health and the judicial system to help assure that the public is aware of the legal issues involved during an emergency.

The symposium was videotaped for posterity and is scheduled to be available for national dissemination via the CBAP Web site or on CD by December 2007. For more information about this program, please contact Dr. Cecilia Rokusek at rokusek@nova.edu.
Not every organization or institution can point back to a very specific happening that marked its birth—the real landmark. In the case of our osteopathic college, it was the sale of Osteopathic General Hospital (OGH) to American Medical International, Incorporated (AMI).

Yes, if you’re a purist, conception took place long before that. Dr. Morton Terry carried with him a dream for many years. He was trained at the Philadelphia College of Osteopathic Medicine before coming to Florida. Down here, he encountered bias and discrimination like he had never seen in Philadelphia, where there was certainly a considerable amount of it. Buoyed by his experience in an educational institution, he vowed to bring an osteopathic college to South Florida.

Not ashamed of this goal, he spoke freely of it to his colleagues in the area, and they enthusiastically joined in to secure his quest. D.O.s like Dr. Dan Finkelstein, Dr. Emil Todaro, and Dr. Mort Morris were strong leaders in the movement, backed by other members of the board of directors. But it takes money to develop a school and then build buildings—essentially since they had none. They were standing at ground zero.

Ground zero was Osteopathic General Hospital, organized over the years until it became a substantial entity, especially after moving from smaller quarters on Biscayne Boulevard. By dint of their personal work and fine efforts, along with great cooperation from the osteopathic community, it became a successful hospital.

One caveat: You must remember that during the 1960s, D.O.s could not practice in allopathic hospitals, were not welcome in allopathic educational entities, and could not even visit their patients who might be in another hospital, even if they sent them in and were not taking care of them.

Mort liked to tell and retell the story of a medical course he applied to at an allopathic institution. He was immediately rejected. He called the M.D. director of the course, who laughingly and rudely told him he was an “osteopath” and not welcome. With a flourish, Mort immediately withdrew his annual contribution to the involved institution’s charity. The following morning, the phone rang. “Mort (ah, first name basis all of a sudden), this is George (no longer Dr. Smith). Why don’t you send in your application? We’d be glad to have you.”

Mort was a very good and conscientious internist and was, at one time, the only D.O. internist in South Florida, where he worked without other internists to help him. Another illustration Mort liked to tell about D.O. discrimination was the story of having a very puzzling case. He found a cooperative and capable M.D. internist and convinced him to come to the hospital in consultation. The very next day, the county medical society called the M.D. on the carpet, warning him that if he ever again consulted in an osteopathic hospital, he would be brought up on charges of unethical conduct.

That was the atmosphere in those days, so the osteopathic profession had to develop its own hospitals, and OGH was one of the leading ones. This was also the time when “hospital corporations” were forming and buying up individual hospitals, both for-profit and nonprofit, and OGH was a contender even though it was osteopathic.

Eventually, Mort and his colleagues were approached with an offer that exceeded $10 million dollars—and the corporation was willing to buy out any existing contracts, so that the money was free and clear. There appeared to be a pot of gold at the end of the rainbow.

The offer was 50 percent in cash and 50 percent in AMI stock. As Mort used to tell it, as a fable of miscalculation he told on himself, his reply was, “Whoa. You think we were born yesterday? You are going to give me a batch of stock, then go back to California and print more stock, making ours worthless. No way. We want cash.”

AMI agreed, and the deal was made. However, within a few weeks, the stock soared. Mort got over his embarrassment, and later it became a funny story.

But most important, there was approximately $10 million dollars in the coffers. At last—enough money to start a school and get it rolling. In 1979, the OGH Board of Directors organized the board of Southeastern College of Osteopathic Medicine (SECOM), with 50 percent of the members representing the foundation that held the cash from the sale and 50 percent representing the Florida Osteopathic Medical Association. They voted immediately to establish the college.

When that check came in—or rather, when it was deposited—it was the true moment of birth for SECOM—an institution that has since come a long way.


Dr. Arnold Melnick is the founding dean of Southeastern College of Osteopathic Medicine (the precursor to NSU-COM). His pithy columns serve as a humorous and insightful bridge to the past—and remind us of how far our college has come in a relatively short period of time.
Robert Hasty, D.O., FACOI, assistant professor of internal medicine, received his designation as a fellow of the American College of Osteopathic Internists (FACOI) at the ACOI Annual Convention in October and graduated from the Health Policy Fellowship program in September. He also provided local, statewide, and national lectures on topics such as “Risk Management,” “Prevention of Medical Errors,” “Insomnia,” and “Obesity and Public Health” and was quoted in the July issue of The DO in an article entitled “Educators Grapple with Profession’s Rapid Growth.” Dr. Hasty received an additional honor in September when he was named program director of the new osteopathic internal medicine residency program at Palmetto General Hospital, which will commence in July 2008.

NSU-COM mourns the loss of David Levine, D.O., FACOFP dist., who served as a clinical professor of family medicine for several decades. Dr. Levine, who passed away in July, was a distinguished member of the osteopathic profession who was an American Osteopathic Association Board of Trustee member and served productive terms as president of the Florida Society of the American College of Osteopathic Family Physicians, the Florida Osteopathic Medical Association, and the Broward County Osteopathic Medical Association. His daughter Julie, who graduated from NSU-COM in 2004, and his son Matthew, who is enrolled in the class of 2009, are proudly carrying on Dr. Levine’s osteopathic legacy. Photo credit: David Berg.

Janet Hamstra, Ed.D., assistant professor and medical education specialist, presented two lectures at the American Association of Colleges of Osteopathic Medicine Annual Meeting held June 27-30 in Baltimore, Maryland. Dr. Hamstra, along with faculty members Joseph De Gaetano, D.O., M.S.Ed, FAAFP, FACOFP, and Daniel Shaw, Ph.D., discussed the topic “The Professional Portfolio and its Assessment.” She also teamed with Dr. De Gaetano, Barbara Arcos, D.O., and Mark Sandhouse, D.O., to discuss “OMM Teaching for the 21st Century.”

Gary Hill, D.O., assistant professor of internal medicine, recently graduated from the STAR (Steps Towards Academic Research Fellowship Program), which offers a full year of collaborative training and interaction with faculty members from the University of North Texas Health Science Center at Fort Worth and other institutions.

Edward Packer, D.O., FAAP, FACOP, associate professor/chair of the Department of Pediatrics, helped organize and participated in the NSU-HPD Back to School Physicals kickoff event.

Pablo Calzada, D.O., M.P.H., FAAFP, associate professor and assistant dean of clinical operations, was appointed to the editorial team of Osteopathic Medicine and Primary Care, which is an online journal published by BioMed Central.

Paula Anderson-Worts, D.O., associate professor of family medicine and public health, has been appointed director of the family medicine residency program at Broward General Medical Center.

Kenneth Johnson, D.O., FACOOG, associate professor of obstetrics and gynecology and director of NSU’s Women’s Health Center, delivered a presentation titled “A Media-Based Motivational Intervention to Reduce Alcohol-Exposed Pregnancies” at the annual meeting of the Research Society on Alcoholism in Chicago, Illinois, on July 9. Dr. Johnson’s lecture described the ongoing NSU research collaboration between himself and Drs. Linda and Mark Sobell of the Center for Psychological Studies. The study is funded by a research grant from the Centers for Disease Control and Prevention and is the latest result in a nearly 10-year collaboration between the NSU researchers.

Howard Neer, D.O., FACOFP, professor and associate dean of alumni affairs, was presented with the Distinguished Service Award at the 27th Annual Florida Society of the American College of Osteopathic Family Physicians (FSACOFP) Convention held July 25-29 in Orlando, Florida. Dr. Neer, who previously won the FSACOFP’s Lifetime Achievement Award in 2001, received this year’s Distinguished Service Award for his “support of the profession in an outstanding and exemplary way above the call of duty.”

David Thomas, M.D., J.D., professor and chair of the Department of Surgery, was appointed in July to Florida’s Blueprint Commission on Juvenile Justice Reform. This 25-member commission, comprised of citizens, stakeholders, and policy experts, was established to develop a plan that will reform Florida’s juvenile justice system and address key concerns such as juvenile recidivism, the overrepresentation of minority youths, and alarming trends involving girls, who comprise the fastest-growing segment of the juvenile justice population.
Behavioral Health Promotion Program Update

M. Isabel Fernandez, Ph.D., professor and director of the Behavioral Health Promotion Program, and Jacob Warren, Ph.D., assistant professor of preventive medicine, coauthored an article titled “Predictors of Unprotected Sex Among Young Sexually Active African American, Hispanic, and White MSM: The Importance of Ethnicity and Culture,” which was published in AIDS and Behavior.

Drs. Fernandez and Warren had a newsletter article published in Psychology & AIDS Exchange on the topic “Using Internet Chat Rooms to Recruit Hispanic MSM into HIV-Related Research Studies: Lessons Learned” and made presentations pertaining to its research at several recent symposiums. During the 115th National Convention of the American Psychological Association held last August in San Francisco, California, Dr. Warren discussed the “Role of Culture as a Buffer Against Drug Use,” while Dr. Fernandez spoke about “Promoting Resilience Among Gay, Bisexual, and Questioning Male Youth.” At the 11th Biennial Conference of the Society for Community Research and Action held last June in Pasadena, California, Dr. Warren discussed “Cultural Variations in Correlates of Condom Use Among GBQ Young Men,” while Dr. Fernandez addressed the attendees about “Culture, Contest, and Development: HIV Prevention for Gay/Bisexual/Questioning Youth.”

The program recently received funding from the Adolescent Trials Network for a study entitled “Validation of the HIV Treatment Readiness Measure (HTRM)” that focuses on the validation of a questionnaire designed to assess adolescents’ readiness to begin taking antiretroviral HIV medications.

Research Grant Recipients

In May, several NSU-COM faculty members, in collaboration with other NSU faculty members, were awarded substantial cash endowments in the Eighth Annual President’s Faculty Research and Development Grant program.

Eric Shamus, Ph.D., M.S.
“Outcomes of an Interdisciplinary Therapy Program for Children with Disabilities”

Cyril Blavo, D.O., M.P.H. & T.M.
“Lifestyle Design for Children’s Physical, Nutritional, Social, and Spiritual Fitness”

David Thomas, M.D., J.D.
“Quality Enhancement Program for the NSU Institutional Review Board”

FSACOFP Conference

A number of full-time and clinical faculty members presented lectures or hosted meetings at the Florida Society ACOFP Convention and National Family Practice Update held in July.

Arthur Berman, D.O. - “Diagnosis and Treatment of Viral Hepatitis”

Marisa Braun, M.D., M.S. - “Pandemic Flu: An Emerging Threat”


Hilda De Gaetano, D.O.
“Personal All-Hazards Preparedness and Planning: Are You Ready?”

Robert Hasty, D.O. - “Safe Approach to Treatment of Insomnia”

Merrill Krolick, D.O.
“Use of Devices in Treatment of CHF and Cardiac Arrhythmia”

Susan Ledbetter, D.O. - “Evaluation of Dementia”

Morton Morris, D.O., J.D.
“Florida Mandatory Lecture on Florida Laws and Rules”

Joseph Namey, Jr., D.O. - “Combination Therapy to Reduce Cardiac Risk”

Anthony Ottaviani, D.O., M.P.H. - “Approach to Patients with COPD”

Christopher Parry, D.O. - “Management of Erectile Dysfunction”

Samuel Snyder, D.O. - “Diabetic Nephropathy”

Joel Stein, D.O. - “OMT Lecture and Workshop”

Ron Walsh, D.O. - “Renin Inhibition in Achieving Control of Hypertension”

Monica Warhaftig, D.O.
“Professional All-Hazards Preparedness and Planning: Is Your Office Ready?”
Ronald Bekic, D.O., who graduated from NSU-COM in 2004 and completed his family medicine internship and residency training through the North Broward Hospital District in June 2007, became a member of the Department of Family Medicine in August. Over the years, Dr. Bekic has actively participated in many of the college’s humanitarian outreach efforts.

Natasha Bray, D.O., who joined the Department of Internal Medicine in July, received her D.O. degree from Oklahoma State University-College of Osteopathic Medicine and completed her internship at Philadelphia College of Osteopathic Medicine. She recently concluded her residency and clinical fellowship in medicine at Harvard Medical School.

James Breen, M.D., became a Department of Family Medicine member in July and will be working primarily at the North Miami Beach clinic. He received his M.D. degree from Jefferson Medical College of Thomas Jefferson University in Philadelphia, Pennsylvania, and is board certified in family medicine. Prior to joining NSU-COM, Dr. Breen was in private practice for over five years.

Marti Echols, Ph.D., M.Ed., joined the college in June in the newly created assistant dean of medical education position. In this role, Dr. Echols is responsible for providing leadership in instructional planning, development, and implementation. Dr. Echols earned her Ph.D. degree at Ohio University in 1998 and her M.Ed. degree from Ashland University in 1991.

Rogerio Faillace, M.D., who had been assisting in the NSU Pediatric Clinic for some time, joined the Department of Pediatrics as a full-time faculty member in July. He received his M.D. degree from Fluminense Federal University in Rio de Janeiro, Brazil, and is board certified in pediatrics. Prior to joining NSU-COM full time, Dr. Faillace was in private practice in Lighthouse Point, Florida.

Tracy Favreau, D.O., who received her D.O. degree from NSU-COM in 2001, joined the college’s faculty in July. Her postgraduate education includes completing her family medicine residency training through the North Broward Hospital District and finishing her dermatology and cutaneous surgery residency in July 2007 at Broward General Medical Center.

David Gensure, who joined the college in August in the newly created position of director of continuing education, spent the past 21 years working at Pfizer, Inc. in a variety of positions, including director of training/team effectiveness in Rye Brook, New York. Gensure received his bachelor of science in business management from the University of Maryland European Division.

Yasmin Hussain-Qureshi, M.P.T., M.H.S., who is a part-time lab instructor in the Osteopathic Principles and Practice Lab, received her bachelor of clinical sciences (osteopathy) degree from Victoria University in Melbourne, Australia. When she arrived in the United States, she received a master's degree in physical therapy from Florida International University in Miami.

John Pellosie, D.O., M.P.H., came on board in July as a Department of Preventive Medicine faculty member. Dr. Pellosie, who is board certified in both preventive and aerospace medicine, received his D.O. degree from the Philadelphia College of Osteopathic Medicine and his M.P.H. degree from the University of Texas School of Public Health.

Diane Sanders, D.O., who recently concluded her stint as an NSU-COM geriatrics fellow, joined the Department of Geriatrics as a full-time faculty member in July. Dr. Sanders received her D.O. degree from the University of Health Sciences-College of Osteopathic Medicine in Kansas City, Missouri, and is board certified through the American Osteopathic Board of Family Physicians.

Andrea Sciberras, D.O., joined NSU-COM in September as an internal medicine faculty member. She received her D.O. degree from Kirksville College of Osteopathic Medicine and completed her internship and residency training at Mount Sinai Hospital in Brooklyn, New York. She previously worked at Long Island Jewish Medical Center in New Hyde Park, New York.

Ralph Wood, D.O., joined the college in April and was recently named assistant medical director of the NSU medical clinics. Dr. Wood received his D.O. degree from the West Virginia School of Osteopathic Medicine and is board certified through the American Osteopathic Board of Family Physicians and the American Academy of Urgent Care Medicine through the American Medical Association.
The Medical Center in Columbus, Georgia

The Medical Center in Columbus, Georgia, is a 413-bed facility that serves as a tertiary referral center for west central Georgia. Its history traces back to the mid-1840s when it became the first hospital established in the area. Today, the center offers a wealth of specialty and primary care services and is the leading provider of health care in the region, offering highly specialized acute care services—many of which are unavailable anywhere else in the area. These include the John B. Amos Cancer Center—the region’s only advanced maternity services and neonatal intensive care unit—a dedicated pediatric service/pediatric intensive care unit, a cutting-edge trauma center, and highly regarded emergency services for children and adults, with 60,000 visits yearly. The hospital also owns and directs two long-term care facilities near campus that care for approximately 200 senior residents.

As the region’s largest hospital, The Medical Center has a long and distinguished history of training physicians. ACGME-approved programs include a rotating internship that was established in the early 1940s, which evolved into a two-year general practice residency in the 1960s. Family medicine became a three-year specialty in 1969, and The Medical Center’s program followed suit in 1972 to develop into a three-year entity. In 1993, the internships were approved by the AOA. The Medical Center, which recently received a three-year JCAHO accreditation, now has dually approved rotating internships and family medicine residencies.

The center, which is a member of the CEME through its affiliation with the Osteopathic Institute of the South, offers third- and fourth-year NSU-COM students the opportunity to select core or elective experiences in family medicine, ICU, pediatrics, internal medicine, OB-GYN, and emergency medicine. The facility currently hosts 10 to 12 students annually. When The Medical Center joined the CEME network in 1997, the hospital already sponsored AOA-approved internships in family practice and traditional rotating. Today, the center continues to offer a rotating internship as well as an AOA-approved three-year family practice residency program that was endorsed in 2006.

The medical education faculty includes ten full-time family physicians, two obstetricians, one pediatrician, and five medicine hospitalists. All faculty members are full-time employees who are dedicated to teaching residents and medical students. In addition, a hospital medicine fellowship for family medicine graduates is now in its third year of existence, with three former fellows serving as full-time hospitalists. Forty-five alumni family physicians also have hospital privileges at The Medical Center.

The teaching programs fully utilize electronic medical records (General Electric’s Centricity) in the Family Medicine Center and at all ambulatory clinics. Because each exam room is computerized, the Internet-based Centricity program provides the physicians with easy access to medical records from any computer. In addition, the teaching programs are currently transitioning to a completely electronic curriculum utilizing the Challenger for Residencies program from the Challenger Corporation.

Over the years, many NSU-COM graduates have become outstanding family physicians after three years of training at The Medical Center. At the center’s June 2007 graduation ceremony, 2004 NSU-COM alumnus Jeff Crick, D.O., continued this trend by receiving The Medical Center’s Geriatrics Award and Academic Excellence Award.

To date, the family medicine residency has graduated over 300 physicians, with over 60 percent practicing in the state of Georgia.
Hanks to the interdisciplinary atmosphere that exists at NSU’s Health Professions Division, this year’s Medical Mission to Jamaica proved to be the largest and most successful in its seven-year history. In an extraordinary show of support, the 130-member health care squadron traveled to a number of locations throughout Jamaica to provide a range of services to a record 4,000 appreciative patients.

The 2007 NSU-COM Medical Mission to Jamaica, which is spearheaded annually by Paula Anderson-Worts, D.O., associate professor of family medicine and public health, was a multifaceted triumph that featured participation from five University of Miami medical school students as well as a dedicated and diverse group of volunteers comprising HPD faculty members, students, and community advocates.

In fact, this year’s medical outreach effort was so popular that some hopeful participants—all of who have to pay their own expenses—had to be turned away due to logistical constraints. “This was the best mission trip I’ve had in seven years. Even though it was the largest group we’ve ever coordinated, it ran the smoothest. From year to year, HPD students and faculty members hear about the success of the program and the rewards the participants get from the patients appreciating what they do for them,” said Dr. Anderson-Worts about the mission’s esteemed reputation. “Our students truly look forward to the Jamaica mission because they get the experience of being able to apply what they learned didactically to a clinical setting. I think that’s what really appeals to the students—that they really feel as if they’re making a difference while getting the opportunity to learn at the same time.”

Because the medical mission continues to grow each year, Dr. Anderson-Worts continually seeks ways to enhance existing services or add new components to the health care mix. “This year our focus was on women’s health, so we raised $1,000 through a garage sale to partner with the Jamaica Cancer Society and pay for 60 women to have mammograms and pap smears,” Dr. Anderson-Worts explained. “We also had Dr. Fern Bent, a Jamaican OB-GYN and local South Florida physician, who came along with us and helped with that aspect of the trip.”

Through the use of a sign-up sheet for women 50 years of age and older as well as onsite screenings for at-risk patients, potentially lifesaving mammograms and pap smears were conducted at Bethel Church in St. Mary on the Jamaica Cancer Society’s Mammobile. “The great thing is that the cancer society actually does the mammograms, processes the pap smears, gets the results to the patients, and does all the follow-up,” said Dr. Anderson-Worts. “That’s been a drawback for us in the past because we’re only there for a short period of time. Consequently, it’s hard to do diagnostic testing because if patients need to be contacted or referred out, we can’t do it. This is a way to provide care that would not normally occur because people can’t afford it and partner with the cancer society to get it done.”
done and deliver the results to the individuals.”

In addition to the aforementioned enhancements, the health care contingent partnered with the Kiwanis Club in Kingston to provide services and screenings at a local health fair and visited a local orphanage and nursing home. Additionally, one of last year’s popular mission components was implemented again this year as David Perloff, M.D., clinical assistant professor of internal medicine, brought along an echocardiogram machine and an echo technician to operate it. “The students were able to see and hear the cardiac dysfunctions on a real patient and have a one-on-one experience with Dr. Perloff, which definitely adds a valuable dimension to our mission trip.”

Because she is a forward-thinker, Dr. Anderson Worts is already looking for ways to add new elements to the 2008 Medical Mission to Jamaica. “Next year, we’re going to try and focus on creating medical management teams to concentrate on issues such as hypertension and diabetes so that once we see patients from a medical standpoint, we can get a podiatrist or a dietitian to help with preventive care. Each year, my goal is to try and step it up from an educational standpoint for both the patients and the participants.”
Sunshine State Passes Landmark Physician Workforce Legislation: What it Means for Physicians, Floridians

By Scott Colton
Director of Medical Communications
Earlier this year, historic physician workforce legislation in the form of a bill titled CS/CS/SB 770 was passed by the Florida Legislature and signed into law in June by Governor Charlie Crist. It was a milestone accomplishment that occurred with little fanfare, but the health care benefits it will eventually provide to Florida’s diverse and ever-burgeoning population will be far-reaching.

Essentially, the bill requires the Department of Health (DOH) to conduct a much-needed collection and analysis of physician workforce data, which will be critical in addressing many issues of substantial fiscal and policy implementation to the state and in planning for Florida’s future health care needs. In fact, these issues are timelier than ever now that the state is spending millions of taxpayer dollars on funding new medical schools to address physician shortages both statewide and nationally.

CS/CS/SB 770, which was sponsored by State Senator Jeff Atwater, and the House companion bill sponsored by State Representative Ed Homan, M.D., have the potential to create sweeping and much-needed changes to everything from the equitable dispersal of physicians across the state to increased postgraduate training opportunities for Florida’s medical school students.

Physician Shortages: Dissecting the Dilemma

“It is commonly accepted that we have a physician shortage in this country,” said Anthony J. Silvagni, D.O., Pharm.D., M.Sc. FACOFP dist., who serves as dean of NSU-COM and chair of the Council of Florida Medical School Deans. “This problem particularly applies to Florida, where the situation will only get worse over time due to overall population growth, innovations in health care, and the growing number of older Americans that move to Florida and have significant medical needs. That is why the Council of Florida Medical School Deans has been very active in educating the public, legislators, and government officials about understanding this dilemma.”

To address these concerns, the state asked existing medical schools to increase their class sizes and approved the formation of several new institutions. Consequently, the number of Florida medical schools has increased from four to nine in the past seven years, including two branch campuses. “In 2000, there were four medical schools,” said Dr. Silvagni. “In 2008, there will be seven medical schools, including the two new schools located at the University of Central Florida and Florida International University. In total, there will be five public schools, two private schools, and two branch campuses that are fully functioning four-year branch campuses. One is a private entity at a public institution, which is the University of Miami medical school branch campus at Florida Atlantic University in Boca Raton. The other is the Lake Erie College of Osteopathic Medicine branch campus in Bradenton, Florida, where the parent school is in Erie, Pennsylvania.”

In theory, the increase in class sizes and the construction of new medical schools should go a long way toward ameliorating the physician shortage situation in Florida. In reality, however, there are other significant factors that need to be taken into account when assessing the issue, including the lack of both osteopathic and allopathic residency slots statewide.

“We know that by 2013, because of the class-size increases all existing Florida medical schools implemented at the state’s request, we will be graduating approximately 1,300 medical students a year,” stated Dr. Silvagni. “The problem is we only have 796 first-year total D.O. and M.D. residency slots—648 allopathic and 148 osteopathic. And that’s a critical concern because statistics show that while 40 to 50 percent of medical students will return to the state in which they went to school, 60 to 75 percent of residents end up staying in the state in which they conducted their postgraduate education.”

The above figures are especially noteworthy because, according to the Report of the Commonwealth Fund Task Force, 2002, residents in training at Florida’s teaching hospitals provide medical care for 75 percent of Florida’s indigent, underinsured, and uninsured patients. Additionally, the estimated value of this care is more than $900 million.

“We now have this huge investment in state schools and medical education, but we will be losing many of these graduates to other states, which means we will not solve the physician shortage problem unless we match the increase in medical students with graduate medical education slots,” Dr. Silvagni added. “We are currently ranked 46th in the nation in terms of residency slots
per capita, but it is estimated that we will probably be ranked in the 20s nationwide in medical students per capita within the next five years.”

According to Representative Homan, who serves as assistant professor of orthopedics and sports medicine at the University of South Florida (USF) College of Medicine, the passing of CS/CS/SB 770 and the subsequent assessment that is already being conducted through the Department of Health will help the state make appropriate decisions in the future concerning physician workforce issues. “It takes 11 to 13 years to train a doctor, at a cost of approximately $400,000 to the state for every physician who completes his or her training in Florida,” he explained. “We’re currently graduating about 800 students per year through Florida’s medical schools, so we already know we don’t have enough residencies. We’re building new medical schools but not expanding residencies, so where are our graduates going to go?”

To become adequately trained physicians, these dedicated individuals must complete a minimum of four years of premedical education, four years of medical school, and three-to-five years of graduate medical education. As a result, the state has a vested interest to ensure that as many physicians as possible who conduct their pre- and postgraduate training in Florida remain here to practice their craft.

“Of the 800 students we are graduating, only 400 end up staying in Florida, so we’re actually training twice the number of doctors that actually end up practicing here,” Dr. Homan continued. “We’re spending $30,000 per student per year in a four-year program, which amounts to a $120,000. And since only half of them stay, the cost to the state for each doctor is really almost a quarter-of-a-million dollars. And that’s not counting the fact that these students pay tuition, too; I’m just talking about the cost to the state. When you look at it in financial terms, we’re not getting a very good return on our dollar for the Florida taxpayer.”

Another compelling issue raised by Representative Homan involves the increasing number of women that are becoming physicians. On the surface, the influx of female doctors would seem like a boon to both the state and nation’s physician workforce dilemma. However, according to Representative Homan, that’s not always the case, especially when you consider that many of today’s female physicians are working fewer hours than their male counterparts for a variety of reasons. According to a report presented by the American Academy of Pediatrics in 2002, the number of female pediatricians working part-time grew from 24 percent in 1993 to 28 percent in 2000. Conversely, the number of male pediatricians working part-time remained stable at 4 percent from 1993 through 2000. Studies also show that female physicians work between 7 and 13 percent fewer hours and see up to 14 percent fewer patients than male physicians (amednews.com, 5/14/2001).

“Because I’ve been in private practice and taken many emergency room calls, I know that providing the vast patient population with effective medical care is becoming a real problem,” he added. “Since I left private practice to work at a medical school, which sees a lot of Medicaid patients, I’ve realized there are very few doctors who actually treat the Medicaid population—and that’s a problem. We’re also finding that many doctors don’t want to take E.R. calls at all because of low reimbursement and liability expense. As a result, the whole physician system is sort of breaking down as far as supplying needed care to the population. All of these factors are playing into my belief that we’re going to have a serious physician manpower problem in Florida.”
From Estimates to Actual Figures
While the aforementioned topics all played a role in making CS/CS/SB 770 a legislative reality, the key issue involved tasking the DOH to “serve as a coordinating and strategic planning body to actively assess the state’s current and future physician workforce needs and work with multiple stakeholders to develop strategies and alternatives to address current and projected physician workforce needs.”

Thanks to a preliminary survey that was disseminated last year through the DOH to 50 percent of the M.D. population, a revealing picture began to emerge regarding the estimated and actual number of physicians that actively practice medicine in the Sunshine State. Although it was a strictly voluntary request, 84 percent returned their surveys, providing the concerned parties with some rather eye-opening insights. In the near future, the additional 50 percent of the M.D. population, as well as all the D.O.s in the state, will be surveyed when they renew their licenses.

Florida medical licenses, which are valid for two years, are renewed in the following way: Each year, 50 percent of the M.D. population renews its licenses, while the entire D.O. population—because of its smaller number—renews its licenses every two years.

“The survey, which will be ongoing, is extremely critical because all of the state’s physician workforce needs are based on the crudest of estimates,” Dr. Silvagni explained. “We don’t know where the physicians really live or if they’re actually practicing in their licensed specialties. For example, if Dr. Smith owns houses in Florida, North Carolina, and New Jersey and maintains a Florida medical license just in case he decides to practice here someday, he is counted as a Florida physician. As a result, we don’t know how many physicians truly practice in Florida, how many live in Florida but don’t practice at all because they maintain their licenses for sentimental reasons, how may only work part-time, or how many practice their full specialty. The survey will also help us to discover where they actually practice as opposed to where they live.”

“When we reviewed the initial survey results, we discovered that 25 percent of the doctors that have Florida licenses do not live in Florida and did not even practice one day in Florida,” said Representative Homan. “Additionally, in response to the question ‘How many hours per week do you work seeing patients?’ 25 percent answered they worked less than 20 hours per week. That means that out of the number of physicians surveyed that have licenses, only about 50 percent may actually be seeing patients more than 20 hours per week in Florida.”

Beyond unearthing the actual number of physicians that currently work in the state, the ongoing survey digs much deeper to assess a range of issues relating to the individuals who comprise Florida’s physician workforce—and the way those issues impact the manner in which health care is delivered within the state. Consequently, because the questions are quite probing, a companion piece of legislation called SB 1034 was passed in conjunction with CS/CS/SB 770 to exclude this information from the public record.

“The reason this companion bill is so critical is simple: If you want honest answers from the physicians, you cannot put them in personal jeopardy,” Dr. Silvagni explained. “For example, if I am practicing in a small town and I put down that I am planning to retire in two years, which is one of the questions that will be asked when the survey becomes mandatory, that information could cause quite a stir if it’s public record. What happens if the local newspaper publishes the information and
many of my patients start looking for another doctor, which means I end up without a practice? What if I have partners who begin to restructure the whole practice, phasing me out since they know I plan to retire in two years even though I may not actually retire when the time comes?”

**End Result? Enhanced Patient Care**

Through the surveys mandated by CS/CS/SB 770, analyzing where physician shortages are most evident throughout Florida’s 67 counties—and addressing those imbalances—will help ease many health care hardships for the state’s growing population. “There are 1,100 orthopedic surgeons in the state, but only 100 see Medicaid patients for non-emergent problems,” stated Representative Homan. “In fact, 34 Florida counties have no elective orthopedic care for Medicaid patients. That explains why some patients are traveling for hours to come to the USF and other medical schools’ orthopedic clinics to see a doctor for elective surgery. It’s not as if they have a super-special problem; it’s because they can’t get an appointment to see an orthopedist where they live. The reimbursement for Medicaid is less than 60 percent of the Medicare fee schedule, and it is not enough to cover the overhead in a private practice.”

“This is such a milestone piece of legislation,” stressed Dr. Silvagni. “Many people participated in this initiative, which was one of the most cooperative efforts I’ve ever been involved in. In addition to the invaluable contributions of Senator Atwater and Representative Homan, many other legislatures as well as a number of organizations joined together to make this happen. These organizations include the Council of Florida Medical School Deans, the Florida Medical Association, the Florida Osteopathic Medical Association, the Florida Graduate Medical Education Committee, the Florida Hospital Association, and the Safety Net Hospital Alliance of Florida.”

Now that the bill has become law and the survey process has begun in earnest, the logical next step is to collect all the data, conduct a thorough analysis of the physician population in Florida, and slowly begin to implement the appropriate changes. “How do you make a map of where you want to go if you don’t know where you’re starting?” said Representative Homan. “The ultimate goal is to reconstruct our health care delivery system to provide the best affordable care with equal access for every citizen.

“It’s about time we did this,” he concluded. “In fact, it’s something we should have done 10 years ago. I’ve been a legislator for the past five years, and I’ve learned that leadership moves in the direction in which the public is pointing. The legislature is not a leader in thinking out of the box and taking the public somewhere it hadn’t thought about going. When the public cries out and says, ‘Fix this problem,’ that’s when true change occurs.”

<table>
<thead>
<tr>
<th>Number of Licensed Florida Physicians</th>
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<tr>
<td>61,387 allopathic physicians</td>
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<td>5,833 osteopathic physicians</td>
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(As of June 30, 2007/Florida Department of Health)
On the morning of May 16, 1986, Stanley Simpson, D.O., experienced the sort of medical emergency every physician dreads—only this time it wasn’t one of his patients that was writhing in pain during the throes of a massive heart attack—it was Dr. Simpson himself.

Although he fully recovered from his frightening brush with death, Dr. Simpson, who serves as associate professor of family medicine, was forced to make some profound changes in both his life and career, which included joining the College of Osteopathic Medicine’s faculty in 1992. However, despite his obvious love for the medical profession, it’s surprising to learn that Dr. Simpson didn’t consider pursuing a career as a physician until 10 years after he received his bachelor’s degree in marketing from Temple University.

Philadelphia: The Early Years
As a child growing up in Southwest Philadelphia, Dr. Simpson was involved in a multifaceted mix of activities that included participating in sports such as football, track and field, and pole vaulting, playing the clarinet, and working in his father’s grocery store/butcher shop. “I learned to be independent at a rather early age,” said Dr. Simpson, who attended high school with basketball great Wilt Chamberlain.

“From the time I was very young, both my mother and father worked together in the business, so I more or less took care of myself,” he added. “They left early in the morning and came home late at night. I usually made dinner for myself or waited for my parents to come home, which wasn’t until 7:00 or 7:30 p.m. I had no problem doing housework as a child.
because I used to clean my room, make my bed, and cook breakfast for myself because by the time I got up to go to school, my parents were already on their way to work. It taught me to be self-reliant, which was a good lesson.”

Learning to master the clarinet, which was his father’s idea, also took up much of Dr. Simpson’s free time. In fact, he became so proficient with the instrument that a career in the musical arts seemed a certainty—until he finished high school, that is. “I performed a solo number at both my junior high and high school graduations and played with the All Philadelphia High School Orchestra, where I sat ‘first chair’ for four years,” admitted Dr. Simpson, who also performed many solos at the Academy of Music in Philadelphia. “There was even talk of me going to the famed Julliard School in New York to become a concert clarinetist. But after I graduated from high school, that was the end for me because I simply lost interest.”

His career as a clarinetist may have ended before it began, and his pursuit of a medical career still lay many years in the future. Consequently, with no clue as to what loomed ahead professionally, Dr. Simpson decided to attend Temple University and pursue a degree in accounting, which is a decision he quickly reconsidered after just one agonizing semester. “I had absolutely no idea what I wanted to do, so I started out as an accounting major and hated it,” said Dr. Simpson, who is the proud father of five children. Thankfully, a quick switch to another major proved to be much more fulfilling, and in 1959, Dr. Simpson graduated from Temple University with a bachelor’s degree in marketing.

**Medical School Beckons Dr. Simpson**
The next decade would prove to be a busy one for Dr. Simpson, who got married, had three children, and pursued various career paths such as advertising, expanding his father’s business, buying an auto leasing franchise, and dabbling in construction. Still, no matter how successful his business ventures became or how satisfied he was at home, he couldn’t shake the sense that something was missing from his life. “I wasn’t really happy or satisfied, and I didn’t know why,” he explained. “I was happily married, had three great kids, and was making a good living. I had a good life, but I wasn’t content.”

It took a chance conversation with his next-door neighbor’s son, who just happened to be a first-year student at Philadelphia College of Osteopathic Medicine (PCOM), to awaken a long-dormant desire hidden deep in Dr. Simpson’s subconscious. “I had two uncles who were doctors—a pediatrician and an oral surgeon—and I spent some time in their offices when I was a child,” he said. “I had thought about doing something in medicine from the time I was 9 or 10 years old. But between the clarinet, sports, girls, working, and everything else, it was never a priority in my life.”

The conversation with his neighbor’s son changed all that—and quickly. “He told me there was an accountant who was in his first-year class. So I said, ‘If an accountant can go to medical school, why can’t I?’ The first thing I did was talk to my uncle, the pediatrician, and we had a long heart-to-heart. By the end of that conversation, I realized what was missing in my life. It was the ability to do more than just make a living. I needed to give to the community, to humanity, to the world. So I made a decision to see if I could get accepted to medical school.”

Thanks to a connection his uncle had at PCOM, Dr. Simpson was able to meet with Nicholas Nicholas, D.O., who was chairman of the OPP department at the college. “I didn’t really know anything about osteopathic medicine at the time I met Dr. Nicholas,” admitted Dr. Simpson. “But once we got together he explained it to me, and I was sold. The whole concept made perfect sense to me.”

After completing his medical school prerequisites, Dr. Simpson was accepted to PCOM and began attending first-year classes in September 1970. However, while he was in the midst of completing his second year, a tragic event occurred that would alter his perspective on life and precipitate a move from Philadelphia to South Florida once he graduated from PCOM in 1974.

“I was just finishing up my second year of school when my sister-in-law came over to the house and asked me to look at a lump she had discovered in her breast, which turned out to be cancerous,” he explained. “I became very
involved in her care and even scrubbed in when she had surgery at the University of Pennsylvania. After she passed away six months later, my wife and I decided to start a new life after I graduated and move to Florida.”

As has been the case so many times, an osteopathic trailblazer named Morton Terry, D.O., who established Southeastern College of Osteopathic Medicine (SECOM) in North Miami Beach and the Health Professions Division at NSU, provided Dr. Simpson with an invaluable opportunity to further his career. “I had a friend who was a family practitioner in Cherry Hill, New Jersey, and he knew Mort Terry,” he stated. “After an introduction was made, I was accepted to do a general rotating internship at Osteopathic General Hospital, which was the forerunner of SECOM.”

**Medical Crisis Leads to Opportunities**

After completing his internship in 1975, Dr. Simpson opened a successful private solo family medicine practice in Hollywood that remained in existence until 1986. Unfortunately, his professional success came at considerable cost to both his health and personal life. “After I went into practice, I would leave the house at 6:30 each morning and come home at 9:30 each night,” he said. “I barely ever saw my wife or my kids as they were growing up because I worked seven days a week and was the sole income producer for the family at that time. I also covered other practices, made house calls on numerous nights and weekends, and worked in an emergency room two nights a week.”

Because of the various stressors, his 16-year marriage eventually crumbled, as did his health following his nuptials to Alana, his current wife of 22 years. On the fateful morning of May 16, 1986, the unrelenting pressure of having a solo practice, working seven nights a week, and taking no vacation time took its inevitable toll when Dr. Simpson suffered a massive heart attack.

Twenty-one years later, the memories of that frightening experience are still indelibly etched in his psyche. “I had made a delicious dinner of pasta with Gorgonzola cheese dressing, so when I woke up at 3:00 a.m. with a bit of chest discomfort, I just thought I had indigestion,” he stated. “It very quickly progressed to major chest pain, so I went to the hospital.” What followed were several near-death experiences that resulted in his lapsing into a coma and being placed on a respirator for a week. “I eventually learned that Alana was called twice by the hospital to let her know I may be dying because I ‘coded’ twice,” he recalled. “I actually had the out-of-body experiences that people who almost die frequently talk about. One time, I was floating above the room and could actually look down and see myself lying in the hospital bed. The other time, I witnessed the light at the end of the tunnel and saw my deceased sister-in-law with her hand out, gesturing for me to join her. But I refused to take it.”
During his three-week hospital stay, Dr. Simpson also developed a debilitating case of phlebitis that required about six months of grueling physical therapy to help him recover full use of his leg. Unfortunately, by the time he was well enough to return to his practice, it had essentially fallen apart. “Because I was in a solo practice, my patients had gone elsewhere because there was no way I could contact them when I was sick,” he explained. “In the end, I decided to not restart my practice because of the stress involved and the grind of enduring a seven-day workweek,” he explained. “I knew I would probably have a second heart attack and die, so I stopped. My wife took a one-year leave of absence from teaching to take care of me, which is when she became pregnant with our daughter Sloan. After giving birth, Alana went back to work, and I stayed home and took care of the baby for the next three years.”

**Dr. Simpson Launches NSU-COM Career**

After regaining his health, Dr. Simpson dabbled in several entrepreneurial endeavors but basically remained semi retired until he received an unexpected phone call in 1991 from Matthew Terry, D.O, who was dean of SECOM at the time. “During our conversation, he said, ‘I know you’re not practicing right now, so would you be interested in coming to work for the college?’ While I was in practice, I had served as a clinical preceptor by allowing students from SECOM and other schools to rotate through my office,” he explained. “I thought about it for awhile and talked to Alana, who said, ‘You’re not doing anything right now, so why not?’”

In September 1992, Dr. Simpson joined the SECOM faculty as an instructor in the Department of Family Medicine and worked in the North Miami Beach clinic, where he saw patients and helped train students. “I was also asked to take over the first-year history and physical exam course,” he stated. “I also developed a second-year course, which is now called Principles of Clinical Medicine.”

Following the merger with Nova University in 1994 and the subsequent relocation to the Davie campus in 1996, Dr. Simpson was elevated to the rank of associate professor, which is a position he still holds today. “I feel privileged to be able to help contribute something to our students and the progress of the college,” said Dr. Simpson, who also performs amateur boxing physicals and is a ringside doctor for the Florida Boxing Commission in his spare time.

“I’m not the type of person that is happy sitting around and vegetating. I can’t do that,” he said. “I’ve had a love of medicine for almost 40 years, so I don’t see myself retiring or doing anything else. The satisfaction I get from watching the students progress from being novices to well-trained physicians is so rewarding. In fact, I find it just as rewarding as saving the life of a patient or helping a patient feel better.”
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**Florida Society ACOFP Convention**

**July 25-29, 2007 — Orlando, Florida**
Reza Behrouz, D.O. ('01) was recently appointed as assistant professor of neurology at the University of South Florida College of Medicine in Tampa, Florida. Dr. Behrouz, who subspecializes in stroke and cerebrovascular diseases, did her residency training in neurology at the University of South Florida College of Medicine and then completed a fellowship in cerebrovascular diseases at the University of Florida College of Medicine.

Tyler Cymet, D.O. ('88) was quoted in the October 2007 issue of O, The Oprah Magazine, where he defended his thesis that highly stressed people turn gray sooner than less-stressed individuals.

Robert Gotlin, D.O. ('87) served as editor of the Sports Injuries Guidebook, which is a compilation of over 100 injuries and treatment options common to the weekend warrior and recreational athlete. Dr. Gotlin, who serves as director of orthopedic and sports rehabilitation in the department of orthopedic surgery and coordinator of the musculoskeletal and sports rehabilitation fellowship training program at Beth Israel Medical Center in New York, also hosts the Dr. Rob Says...Sports, Health, and Fitness Show, which airs live every Saturday from 7:00 to 8:00 a.m. on 1050 ESPN Radio.

Earle Hayes, D.O. ('02) completed his critical care fellowship in June 2007 at New York’s St. Vincent’s Hospital Manhattan and recently accepted a position as medical director for Jacob Perlow Hospice Corporation/Beth Israel New York, Brooklyn, and Queens team/inpatient hospice at Long Island College Hospital. He also received a faculty appointment as assistant professor at Albert Einstein College of Medicine of Yeshiva University. In addition, Dr. Hayes is working as an intensivist for Yale-New Haven Hospital and serves as assistant clinical instructor at the University School of Medicine.

Class of 2001 graduates Matt Hesh, D.O., and James J. Hsiao, D.O., have accepted positions at Florida Radiology Associates, Inc., which is a large group practice in Altamonte Springs, Florida. Dr. Hesh recently completed his MRI body fellowship at the University of Pennsylvania, while Dr. Hsiao completed his neuroradiology fellowship at the University of Texas in Dallas.

Chris Kelley, D.O. ('00) is currently a Critical Care Air Transport Team physician with the U.S. Air Force and is serving a six-month deployment to the Operation Enduring Freedom Theater based out of Bagram Air Field in Afghanistan. In the summer of 2006, he relocated to Davis, California, to begin working at the David Grant Medical Center at Travis Air Force Base in Fairfield as a pulmonary/critical care and sleep medicine staff member.

Will Kirby, D.O. ('00), who practices clinical and cosmetic dermatology in Los Angeles, California, has added another notch to his professional resume by becoming a featured physician on the new season of the popular television show Dr. 90210, which is broadcast on the E! network.

Stephen MacDonald, D.O., M.P.H., M.B.A., FAOCOPM ('90) was recently elected president of the Florida Association of Occupational and Environmental Medicine (FAOEM), which is the state society of the American College of Occupational and Environmental Medicine. His brother Michael, who also is a 1990 NSU-COM graduate, was named president elect.

Glenn K. Moran, D.O., FACOFP ('88) was named Family Physician of the Year at the 27th Annual FSACOFP Convention, which was held July 25-29 in Orlando, Florida. Dr. Moran was recognized by his peers for his service to the medical profession on both the local and state level. “On behalf of NSU-COM, I congratulate Dr. Moran on his dedication to his patients, his many years of teaching medical students the scientific and compassionate practice of medicine, and his personal commitment to aid the public by serving on the Florida Board of Osteopathic Medicine for seven years,” said Dr. Anthony J. Silvgagni, NSU-COM dean. “He has provided selfless dedication to the practice of osteopathic medicine and has set a great example for future physicians in this area of medicine.”

Lieutenant Lynita Mullins, D.O. ('06) was relocated to Kaneohe Bay in Hawaii by the U.S. Navy, where she is now medically in charge of a marine battalion.

Michael X. Rohan, Jr., D.O. ('01) completed his orthopedic surgery of the spine fellowship in orthopedic surgery on July 31 and recently joined Spinal Associates in Panama City, Florida. He will also serve on the staff at Gulf Coast Medical Center.

Christopher Zub, D.O. ('99) experienced the thrill of a lifetime earlier this year when he and a group of friends traveled to Pamplona, Spain, to participate in the world-famous Bull Run.
In the spring of 1999, NSU-COM launched an alumni-based fundraising effort to generate dollars that would be used to create an endowment fund to reduce future tuition costs for NSU-COM students and produce a funding pool that would be utilized for discretionary purposes as determined by the Alumni Association Executive Committee. Every effort has been made to ensure the accuracy of the following list of donors; however, if you notice an error or omission, please contact Lynne Cawley in the Office of Alumni Affairs at (954) 262-1029 to rectify the matter. For example, the college has received a number of donation cards with credit-card pledges where no name is listed. The Office of Alumni Affairs cannot process the credit-card donation without a name indicated, so if you have not received a letter of thanks from NSU-COM but know you have made a credit-card contribution, please contact Ms. Cawley at the aforementioned phone number.

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Save the Date
NSU-COM Fourth Annual Golf Tournament
May 19, 2008
Grand Oaks Golf Club
Davie, Florida

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If you are a member of the NSU-COM or SECOM alumni and require verification of graduation, are seeking licensure, or need your dean’s letter mailed out, we ask that you contact the Office of Student and Administrative Services and the Office of Alumni Affairs for processing. Please fax all pertinent information, including where it needs to be sent as well as your contact information, to (954) 262-2544. You may also email the information to Leslie Jones at jleslie@nova.edu.
Why did you decide to attend NSU-COM?
When I went on my interview at NSU-COM, I was in awe of everything (except for the old RecPlex). I remember reading about the medical mission trip to Guatemala in COM Outlook and all the other activities that students engaged in. It seemed to be a good fit for my personality.

Why did you decide to pursue a career as a physician?
I always knew I had an interest in the health care field. After college, I applied to the Physician Assistant Program at Emory University and had been accepted. I had just started working in a cardiac catheterization lab when I was accepted to Emory and began working directly with physicians. That’s when I realized I wanted to become a physician. So I declined my acceptance, started over, took the MCAT, and applied to medical school.

Had you ever heard of osteopathic medicine before applying to medical school?
Prior to applying, I had never heard of osteopathic medicine. I grew up in Buffalo, New York, went to college in Syracuse, and then moved to North Carolina, where I worked at Duke Hospital. During that entire time I never encountered or heard of an osteopathic physician.

How did you learn about the osteopathic profession?
I moved to Florida to apply to medical school and my brother, who is an attorney, kept suggesting that I shadow a D.O. I was not even sure what it was, but he was persistent about it, so I ironically ended up shadowing an E.R. physician at Sun Coast Hospital. It was the internal medicine residents who really impressed me there and encouraged me to apply to an osteopathic medical school.

What did you enjoy most about being SGA president in the 2006-07 academic year?
Being able to travel and meet with other students from all the other osteopathic schools was an amazing experience. It was a great feeling to be in a room full of students who shared the same passion and commitment as I did for our schools and to do what is right for students.

What has been the most enjoyable aspect of your NSU-COM education?
The friends that I have made during my time at NSU-COM has been—hands down—the most enjoyable aspect. The experiences you go through in medical school are emotional, stressful, and unforgettable. I have been very
Student Snapshot: Kathryn Rooth

fortunate to find a group of friends that has supported and stood by me throughout it all.

What has been the least enjoyable aspect of your NSU-COM education?
Monday tests every week were never really that enjoyable. With the exception of Tyler Montaldi wearing his superman outfit first year and the YMCA production right before we took our second-year final, the rest of the tests were nerve racking.

If you could be dean for a day of NSU-COM, what would be the first change you would implement?
If I answer this, Dr. Silvagni might not like me anymore! Just kidding. If I were dean for a day, I would provide breakfast before class began. During breaks between lectures, I would let everyone ride around on my Harley. And at the end of the day, I would have everyone out on my boat! As an aside, there is no one who supports NSU-COM students as much as Dr. Silvagni does. He puts his heart and soul into his job.

The medical school experience can be overwhelming for a new student. What advice would you give to future NSU-COM students about coping with the stresses and challenges of medical school?
The first two years of school are the hardest. Being in the classroom all day with your face in the books is overwhelming and stressful. It’s hard to put things into perspective, but each year it gets better and becomes much more enjoyable. I would say find an outlet that keeps you going that has nothing to do with medicine. I found a local running group, and I never talked about school. It was a nice break from school and everything that goes along with it.

My peers would be surprised to know this about me:
That I no longer need a portable fan with me when I study.

The funniest thing that ever happened to me:
I think there are a lot of funny/embarrassing things that I have gone through. On the last day of exams at the end of my first year, when I went to hand in my exam, Dr. Eric Shamus pointed out that I was wearing two different sneakers. I had no idea. Of course I had no choice but to proceed on to the lab practical exam wearing two different sneakers.

Once I graduate, I plan to pursue a career in:
Internal medicine/pediatrics
On August 4, the incoming M1 class experienced the invaluable opportunity of relaxing and mingling with M2s, family, and friends at the annual Osteoblast, which was held on the grass courtyard in front of NSU’s Alvin Sherman Library, Research, and Information Technology Center.

This year, for the first time ever, the Undergraduate American Academy of Osteopathy (UAAO) joined with the Student Osteopathic Medical Association to co-host the event and put the “Osteo” back in Osteoblast. “The event was a huge success and met our goal of getting students excited early on about osteopathic manipulative medicine,” said UAAO President Jessica Anderson. “It also allowed the students and their families to learn about osteopathic manipulative treatments (OMT) and actually see a demonstration performed by Dr. David Boesler, who is our UAAO adviser, and current OPP fellows Woody Weeks, Joy Kang, Jenisa Oberbeck, and Cori Chase.”

In addition, students and family members were able to experience OMT firsthand as second-year students and fellows performed osteopathic soft-tissue techniques. “It really was an excellent opportunity to expose friends and family to an aspect of our profession that makes us unique,” stated Jessica Cuello, who serves as the college’s UAAO vice president. “Many individuals are still unclear as to what a D.O. actually is, so this was an excellent opportunity to showcase our skills.”

UAAO officers share a laugh with their UAAO adviser, David Boesler, D.O., who serves as an associate professor in the Department of Osteopathic Principles and Practice.