July 2020

SGA Rounds

Student Government Association Newsletter

NSU Dr. Kiran C. Patel College of Osteopathic Medicine



Letter from the Editor in Chief

By OMS-IV Jackleen Glodener, SGA Administrator of Public Affairs



Hello all, and welcome to my final edition of SGA Rounds as the editor in chief before I transfer my responsibilities to the incoming SGA administrators of public affairs, Mariah Zakharia and Simrun Uppal. I would like to em-

phasize my appreciation to both the readers and the writers who have contributed to this flourishing publication.

We have been through an eventful few months together. As medical students, we have experienced changes in our education that reflect the evolving atmosphere of the COVID-19 pandemic. It was no secret that medical school would be an immense challenge, but this health crisis has demonstrated the

even-greater challenges we will face as future frontline health care workers.

Experiencing a pandemic that highlights the strengths and weaknesses of our health care system can be an educational opportunity. Every few years, endemics and pandemics arise, and as the health care front line, we have to educate ourselves on our roles. One day, we will tell stories about the worst pandemic of our lifetimes and the lives that were lost.

For now, we are learning how to adapt and how to continue to grow and learn during these unprecedented times. As future physicians, we will continue to implement what this pandemic has taught us—to stay focused in striving for personal and professional growth and to keep trekking forward through the unexpected.

I would like to thank Scott Colton, our KPCOM/HPD director of medical communications and public relations, and Gayl Canfield, Ph.D., the *SGA Rounds* faculty adviser, for their efforts in publishing *SGA Rounds*. If you have any questions or would like to learn how you can submit your articles to *SGA Rounds*, please contact Mariah Zakharia at *mz248@mynsu.nova.edu* or Simrun Uppal at *su99@mynsu.nova.edu*.

KPCOM Students Dominate at SOSA Spring Convention Awards Ceremony

On February 29, KPCOM students claimed first place in four out of five categories at the Student Osteopathic Surgical Association (SOSA) Spring Convention poster competition held at Des Moines University in Des Moines, Iowa.

OMS-II Nicholas Lampasona received the Outstanding Research Award in Clinical Case Studies/Literature Review for his poster "Posterior Tilt Predicts Failure in Garden I and II Femoral Neck Fractures," while OMS-II Taylor Mazzei earned the Outstanding Research Award in the Anatomy Case Study category for his poster "An Incidence of Duplicated Priceps Pollicis and Radialis Indicis Arteries."

OMS-II **Oleg Tsvyetayev** received the Outstanding Research Award in Public Health for his poster "Dietary Views and Habits of Health Professional vs. Non-Health Professional Students," while OMS-III E**velina Arzanova** was honored with the Outstanding Research Award in Original Clinical Research for her poster "Normative Values for Inter-Hand Tissue Dielectric

Constant Ratios with Possible Application in Post-Mastectomy Lymphedema." *Pictured from left are Nicholas Lampasona*, *Oleg Tsvyetayev*, *and Taylor Mazzei*.



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COVID-19 Perspectives

When the COVID-19 pandemic escalated in mid-March, NSU made the prudent decision to convert to a telework and online class model to ensure the safety of its workforce and student body. As events were canceled and the United States went into lockdown, I reached out to the amazing network of students, faculty and staff members, and alumni who comprise the Dr. Kiran C. Patel College of Osteopathic Medicine (KPCOM) family for COVID-19-related content for the summer-fall issue of COM Outlook.

Within days, I was flooded with responses from interested students who wanted to share their stories. Due to the high volume of submissions I received, coupled with COM Outlook space constraints, a number of the articles had to be transitioned to SGA Rounds to provide a venue to share these interesting insights. Thanks again to all the students who took the time to share their engaging stories.

Scott Colton, B.A., APR

KPCOM/HPD Director of Medical Communications and Public Relations



Feathered Friends Provide Vital Solace

By OMS-II Lauren Brown



The scope of my activities while preparing for board examinations limited me to my apartment, the Martin and Gail Press HPD library (begrudgingly), the gym, other NSU libraries, Publix, Trader Joe's, and the occasional trip to Costco. Then came the COVID-19 pandemic.

My already-restricted rotation between my apartment and the

public places I previously mentioned was now just my apartment. In an effort to break the monotony of traveling from my bed to the kitchen to the couch and back to the kitchen, a friend and I started to go for daily walks through the NSU Fort Lauderdale/Davie Campus.

To honor her anonymity, as she may be slightly embarrassed as I share this story, we'll call her Shbrooke Shlandry. When it started, Shbrooke and I really looked forward to our daily walks as we admired our well-groomed campus and explored parts of it we would never have seen in a non-pandemic state.

We also liked to see the campus ducks in various locations around campus. This progressed to familiarity with all of the duck hot spots, which further progressed to knowing which ducks hung out where and with what other ducks. Things escalated exponentially when we started bringing oats to feed the ducks.

There was no turning back, because we became wholeheartedly invested in the ducks. It was no longer just a walk through campus for exercise experience—the ducks were now the highlight of Shbrooke's and my days. They would usually see us coming and waddle toward us, at times taking short bursts of flight.

Some days, they would appear out of nowhere, as if they had sensed us traversing the campus. Another day, they spotted us from across the big pond behind the Don Taft University Center and paddled to us, only to cross back again as we circumvented their aquatic home. We even tracked the recovery of a duck with a lame foot, who is doing great now.

We loved the ducks, and the ducks loved the oats. I don't care to admit how many other campus pedestrians have witnessed Shbrooke and I hinged at the waist in full, one-sided conversations, but I am proud to proclaim my appreciation and love for the campus ducks. So thank you, NSU ducks, for providing a welcomed distraction from the stresses of studying, which were compounded by the uncertainties of this pandemic.

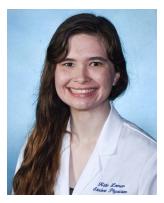
Thank you for reminding Shbrooke and I to appreciate the simple things in life, including, but not limited to, friendship (duck-duck, human-human, human-duck) and the value of being kind to one another (both inter and intraspecies).

Be warned. If you see two women on campus who seem to be deep in conversation directed toward the ground, don't be alarmed. We are just catching up with our shorter, feathered friends.



Coping in a Time of Uncertainty

By OMS-II Katie Lamar



In this time of great uncertainty, I think we need to ask ourselves about what actions we are taking to protect ourselves against "just-in-case events?" There are certain values I uphold based on what is expected of me, as well as what I want to be. However, this pandemic has shed a new light on prioritization and purpose for what I want to do

and who I want to be.

As an NSU Dr. Kiran C. Patel College of Osteopathic Medicine student, I have faced many challenges during the past years. None, however, has caused me to reassess my life values quite like what we are facing now.

The D.O. program relies heavily on self-study, so my class environment has stayed the same. My biggest question—my biggest just-in-case proposition—isn't about how I can continue to succeed as a student. It's about questioning if being the best student is truly in my best interest right now?

My parents have always been my number one support structure, instructing me to prioritize school now for a brighter future tomorrow and focus on whatever challenges my education brings me. Only now, the challenge the world faces has one terrifying question: Who will survive to the end of this pandemic?

As is the case with the majority of my classmates, my parents are much closer in age to those who have to be worried about COVID-19 than I am. Thankfully, while they do not have declining health, the question that still keeps me up at times is this: Will the people who are my foundation be okay?

As most students can attest, studying from home is much less productive for me. I went home during spring break and got less than half the average day's work done. I have always treated home as a vacation from medical school—the one place left I can truly relax.

However, the college has moved its curriculum online in the face of this crisis, so now I must ask the question: Should I stay away from home to prioritize my work and future? Or go home to spend the time I have with those I love because of a simple worry, just in case? Board exams are coming, and my studies grow more challenging each day, so there is a lot of pressure behind my decision of what I should do in regard to the future I want.

The COVID-19 pandemic has led us all to ask ourselves how we should prepare for the uncertain. Should I stock up on supplies just in case they run out, even though this may starve others? Should I continue taking action to better my future or secure my present just in case this does not end?

Should I volunteer to help others, or should I stay sequestered at home to prioritize my own health just in case it is jeopardized? Should I stay where I can focus on my studies, or should I go home to my loved ones, just in case?



The Distance That Holds Us Together

By OMS-III Jay Patel



Jay Patel and his fiancé Roshni keep their long-distance love alive via frequent virtual chat sessions.

In the times of COVID-19, so many of us find ourselves distanced from our loved ones. Don't get me wrong: FaceTime and Zoom have been a lifebelt, but eventually the 2-D image gets disheartening.

My fiancé Roshni and I have been in a long-distance relationship for almost three years. She's an optometrist in Pennsylvania, while I have been in Florida completing my third year of clerkships. During the past three years, we have seen each other for a few days every month or two. This, of course, has given us plenty of time to figure out how to stay connected—something many might be seeking during this time.

Organize time to speak and celebrate the small things. Scheduling a specific time to speak throughout the day is so important. It allows us the time and space to do our own thing, but also commit to a dedicated time for one another. Secondly, celebrating the small things every day through verbal communication allows the other person to feel the appreciation they would otherwise only know through physical connection.

Plan ahead for the next trip before the current trip ends. One thing we love to do is to plan for the next time we are going to meet. First, having the dates picked out for when our schedules can align to meet up is essential. We then plan the details of each day. Normally, our days are planned around meals, but some of the experiences we have done range from rock climbing to boardgame nights with the family. By planning beforehand, when the weekend arrives, we can get straight to our experiences without wasting our precious time to think about what we should do. Lastly, we like to plan our life for when we will start living together.

Speak your mind, even about the hard things. We hold as a sacred code this one thing. Being there in person with someone

Again, it's a reminder that the long distance won't last forever.

allows key nonverbal communication to occur, allowing the other to sense your emotions. With distance, the other individual is only aware of what is explicitly said.

Take time for personal growth. Sometimes, the distance makes you feel like you don't have control over the relationship, so you try twice as hard to hold it all together. We realized quickly that this was a mistake. We were our own individuals outside the relationship, so we spend time pursuing our individual hobbies, goals, and other relationships with family and friends. Instead of holding each other back, we encourage the other to have incredible experiences.

Overall, I don't think the distance is difficult if you communicate openly and effectively and organize your time for one another. The best thing is knowing that this pandemic, like our long-distance struggles, will come to an end. The appreciation we gain from our times apart will provide for an even more rewarding experience with our loved ones in the times ahead.



Baseball, Medicine, and Lessons Learned

By OMS-I Joseph L. Aklinski



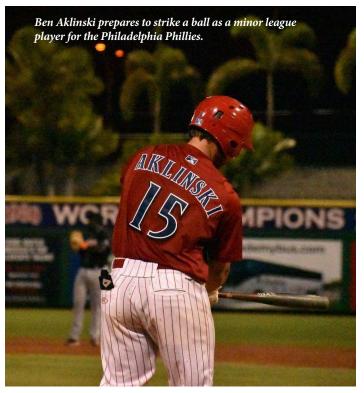
The road to Major League
Baseball (MLB) is a torturous and
unpredictable path, much like the
route many medical students face as
we work up the ranks. My brother
Ben, a minor league player for the
Philadelphia Phillies, is no exception.

On March 12, Ben found himself in an unprecedented position when the MLB announced the

indefinite suspension of baseball in response to the COVID-19 outbreak. Not surprisingly, he didn't know what to do next. Should he return home to Phoenix, Arizona, and retrace the 31-hour drive he made a few weeks earlier? Or should he find a place to stay in Clearwater, Florida, hoping the situation would resolve within the next several weeks?

I didn't have the answer, but I offered him the opportunity to stay on a cot in my living room until we could figure it out. I knew the quarantine order could change at any moment. Besides, having company during such a lonesome time would be an added bonus.

The next concern was keeping him in shape. It wasn't difficult at first. A local batting cage was allowed to keep its doors open to private lessons. Explaining his difficult situation, the owner agreed Ben could use the facility, because he understood the importance of professional athletes maintaining their phy-





sique. However, over the next few weeks, cases began to spike across the country, forcing businesses like our batting cage to close their doors.

My brother and I sat at home, brainstorming and comprising unique ways to build gym equipment. We went to The Home Depot to purchase five-gallon buckets, cinderblocks, metal pipes, cement, rebar, sand, and duct tape. It was time to get inventive. We taped up a sandbag into a sturdy medicine ball, using several rolls of tape between it and the cinder blocks we padded for rucking. Next, we focused on making dumbbells.

Maintenance workers laughed as they watched us pour cement in the back of my apartment early one morning. I couldn't help but grin as we filled the two five-gallon buckets and centered a metal pipe in each. We now had the equipment needed. It wasn't pretty, but it was more than enough.

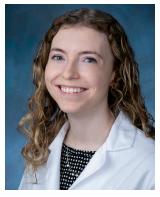
Our daytime workouts have consisted of throwing, hitting, and fielding drills at a nearby dirt lot, along with heavy weightlifting at home. At night, we venture out to a local parking lot for car pushes, wind sprints, and heavy cardio lifts. Each session has left us bruised and beaten, but more resilient to the struggles we could face in the next several years.

Our recovery toward returning to minor-league baseball, standard medical school curriculum, and society as a whole is still unknown. However, enduring such isolation over the last several months has been a constant and necessary reminder that life is difficult, and adaptation is a skill necessary in all occupations.

To achieve your highest goals, it sometimes requires taking the road less traveled. My brother and I have decided to welcome those challenges with open arms.

Embracing Joy and Appreciating Life

By OMS-I Paige Webeler



Dealing with the COVID-19 pandemic has been all about balance—balancing the uncertainty of the future with the belief that things will get better. While the media shouts doomsday, I have seen the quiet strength and hopefulness of those around me. Even while in line at the grocery store, people laugh and joke to show that

that joy can't be shut out.

My family recently adopted a puppy, who is a shining example that joy can still be found in this pandemic. Pepper lives her life boldly, radiating happiness, and doesn't let things get her down for long. Though she is a lot of work, she is a refreshing reminder of hope.

Life was shaken up and given a slower pace. This time of staying home has made me more appreciative of life's little joys and the things I took for granted in my normal life. At night, my mom and I go for a walk along the paths by our house. Taking time to enjoy my mom's company without distraction has been a wonderful experience. It's time that I wouldn't trade.

Those walks also gave me the chance to enjoy nature. In general, I enjoy spending time outside, but every so often, I let other things distract me from enjoying its pure beauty. However, being at home in the spring where the wildflowers are blooming and the trees are vibrant shades of green, I would be remiss if I didn't take time to enjoy it.

This time of quarantine has given me time to have peaceful self-reflection while watching the sun go below the horizon. To laugh with the ducks as they strut, and to cheer for a squirrel when he lands a daring jump. Observing nature reminds me that we aren't stuck in this situation, that change comes every day, and that the sun will rise again.

This COVID-19 season is also a time to evaluate and recalibrate the balance I want in my life. Quarantine has given me the chance to set a new balance and to be in simple moments. I've seen the signs that people put up in yards and street corners, rallying each other and building each other up. Food banks in my area are so filled with volunteers that they've started turning people away.

This time has brought people in the community together to help other people in the area. Although these times are hard, enjoying the outside, spending time with family, and seeing the kindness of others make it doable. Going to the grocery store has never been more of adventure, nor has takeout food ever tasted so good.



COVID Chronicles with Six Barnacles

By OMS-I Katherine Taylor



Maybe I have seen too many
Octonauts episodes, but we're six
barnacles here in this ship.
We've been inside, for months on
end, going only for short walks or
an occasional grocery trip.

There's Baba and Mama (me) and Aleena and Zahra and my wonderful parents-in-law.

What have we done with our time? Here is a summarized list.

We celebrate the things we have done, joyfully.

We share these—and not what we might have missed.

We were primarily preoccupied with work and with school.

The kids managed to read, run, and traipse up to bed.

After long days of jumping and hide-and-go seeking.

And wearing the most fashionable Olaf costume head.

We danced. We baked. We constructed. We destroyed.
We drew. We wrote. We multiplied. We annoyed.
We stacked. We fantasized. We created. We learned.
We bicycled. We planted. We bird watched. We Netflixed.

We deciphered fake news and consumed meme after meme.

We Amazoned. We Freshed. I still don't know how to Door Dash.

We Zoomed. And we Zoomed. And we Zoomed.

We made so many nouns into verbs in these months; the English language could shortly be doomed.

We Ramadaned. We celebrated the end of each fasting day in the best ways we possibly could.

With a meal and a family prayer. Without excess, in simplicity, together.

I will toot the horn for my in-laws' chef skills. Their pakoras deserve an award.

We reminisced. We read and told stories. Like the one of our family's lost Mughal Emperor's sword.

We explored new ways to do good and help others.

We attempted, and so far succeeded, to not utter the phrase, "I'm bored."

Our eldest barnacle was much better at reciting, and praying, and attending her spiritual talks.

But our youngest learned good lessons, too. These were brightened with a set of eclectic, polished rocks.

They had a new one presented in the a.m. each day, on their petite, wooden rock treasure box.

The very best thing in my quarantine was seeing this daily small joy on their little faces.

In the end, I hope we will remember this as an oddly prescribed togetherness time.

We should always have somber remorse for those lost, those whose lives were cut way too short.

But my coping mechanism is primarily of the humorous sort.

So, of course, we can't forget to also remember our

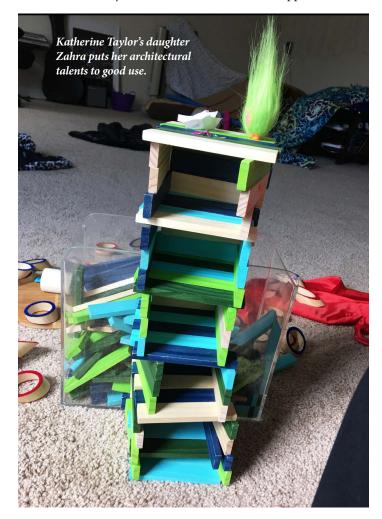
most awesome furniture fort.

These six barnacles will remain here together.

We will laugh and discuss and retort.

Until it is safe in larger society once again.

We wish you much love, kindness, and support.



COVID-19: From Asia to the United States

By OMS-I Ting Yu Wu



This article was inspired by the COVID-19 situation in Taipei City, Taiwan, which is where I grew up before moving to the United States on my own when I was 15.

When reports of the coronavirus first came out, my family had just returned to Taiwan from a vacation in Thailand. In the days following January 1, the Taiwanese govern-

ment had decreed the virus a nationwide pandemic. Having had experience from SARS in 2003, the first thing the government did was take control of the manufacturing and production of personal protective equipment.

When this occurred, I had just started my second semester at NSU's Dr. Kiran C. Patel College of Osteopathic Medicine. I received numerous phone calls from my parents, who were concerned about the situation abroad. In the United States, however, it seemed as if we were insulated from it all.

In early February, my mother sent 10 masks over from Taiwan—the only masks she would be able to mail me as the crisis worsened across the globe. I remember telling her that she should keep them because it was worse in Asia than it was here. She sent them anyway. Of course, I had no clue that the virus would go on to reshape my day-to-day life in the United States.

About a month later, I called a close friend in Germany. She began by telling me how the virus had spread to Europe and caused the medical school curriculum throughout the European Union to be revamped. She then asked about my family in Asia.

"They're doing well," I said. "Mom keeps joking that I should be home, because they have all the right equipment in preparation for respiratory emergencies there, as lessons from SARS a decade ago remained an active topic. She tells me that they can save you if you get the virus here."

Amidst the pandemic, Taiwan became known for its resource-fulness in its proactive intervention in regard to the COVID-19 pandemic. Masks were distributed by government agencies and limited to 5 a week per citizen and 10 a day per local clinic. Only a few places went into lockdown.

For most people, life in Taiwan was the same as it was before—but with added restrictions. Students wore masks and attended school, and people wore masks and went to work. Jobs, shops, and even restaurants stayed open, although business was limited.

In the following months, a lot has changed in the United States. Florida went into lockdown and most schools went online. I remained in Davie for the rest of the semester. Perishables from masks to toilet paper ran so low that eventually I had to go on eBay to buy rolls of toilet paper.

As the spring semester progressed, life in the United States became dominated by practices of social distancing, self-quarantine, and working from home. Through FaceTime calls with my family, I learned that the pace of life in Taiwan was gradually returning to normal.





The Energizer Bunny: Zoey

My eyes strain to stay focused as I study for my cardiology exam tomorrow. Twelve hours of studying today has taken its toll. Just as I'm ready to give up, a pair of fuzzy paws makes their way onto my lap. Zoey, my eight-month-old Miniature Australian Shepherd puppy, has brought her toy and is ready to play. Her happy smile and loving eyes make it hard to say no. A 10-minute study break is just what I needed.

While 10 minutes may not seem like much of a break, it was enough to push me to keep going for the remainder of the night. It is easy to forget the importance of taking breaks, whether it is for exercise or to just enjoy the things around you in medical school. Our dogs remind us that there are more important things in life than trying to get a 100 on an exam—like smiles, unconditional love, and spending time with family. —Kristina Novotny

My Dog Parent/Friend/ Life Organizer: Frodo

It's easy to oversleep when there is no place you need to be on time. Hitting snooze for the third time is not an option for me anymore. Since social distancing protocols have been put in place, my Welsh Corgi ensures I get up.



If I hit the snooze button for the second time, he sits up in his kennel and begins to make small barking noises. Not to annoy me, but to remind me that I am supposed to be getting up by now. He has basically taken the parental role in the morning, making sure I get up and eat, feed him, take him outside, and spend 10 minutes playing with him.

He then naps until I finish my studying and conveniently wakes up around lunchtime to jump into my lap, give me a laugh or two, and a few smiles. I almost think he can tell time, because every day around 5:00 p.m., he starts running around the house or back and forth in front of the door. Time to take him out for his daily walk.

After the walk, it is time for dinner. And if I haven't started getting ready for bed by 11:00 p.m., he starts huffing and puffing and turns into a looney dog barking and rolling around on the floor. Time to go to sleep, I guess.

The first week or two without a school/study routine outside of my home was difficult to adjust to. I forgot how hard not having a strict routine is, so part of creating a new one at home all day, every day, is partially attributed to my dog and his self-appointed responsibility to keep me on task. —*Kristina Fritz*

Mental Health **During COVID-19**

Infectious disease outbreaks pose more than just the physical stress of being infected. Families of those infected, first responders, individuals at home, and those who are at little to no risk of getting sick can, and often, suffer from mental distress. Additionally, the changes in individual, family, and society routines, as well as income and way of life, have added to mental distress.

The Centers for Disease Control and Prevention (CDC) has provided informational pamphlets about stress and coping on its COVID-19 information page that discuss ways of getting and seeking help during this time. Although the CDC didn't describe caring for a pet as a way to relieve stress, many in the community are turning to pets to help them cope.

The Community Chooses Pets as Stress Relief

Amidst the COVID-19 pandemic, there has been an increase in pet adoption and fostering and shelter volunteering. Pets, from dogs to goldfish, have been shown to benefit people's mental health by providing calming support, a distraction, and routine or behavioral activation, as well as helping maintain a positive self-identity or sense of self.¹

We have seen news stories of shelters emptying and celebrities advocating for pet adoption and emotional support. It seems that during this pandemic, we are witnessing the community's choice of furry friends as a way of coping with the stress of the time.

Our stories are probably two of many that describe a pet's stress-relieving, routine-providing, and identity-maintaining benefits. We are so thankful for our pets Frodo and Zoey during this time. We hope you have also found a way to help cope with this pandemic, as well as the additional stress of medical school.





"The diversity at NSU is one of the many things I love about being here. As an Afghan American, it has been a blessing to find other students in my program who are familiar with my culture, language, and background. It was truly an honor to work with students across the nation, and within our class, to help give back to the land our parents came from. –Aneil Tawakalzada

44 years ago, my mother packed her bags, hopped on a plane, and left the land she was born in. At the age of 13, she wandered the streets of Flushing, New York, in awe of the world around her. She did not speak the language, did not recognize the food, and certainly did not recognize the people.

She fled her native land, Afghanistan, to provide her children with opportunities unavailable to her. She fled her native land for me.

As Afghan Americans, most of our families came to the United States after the Soviet Union invaded our country. Our families were refugees who left their homeland to protect themselves, their families, and their futures. Unfortunately, my mother and her story are not unique for Afghan Americans, as many of our families have faced similar hardships throughout their lifetimes.

With nothing more than a few dollars in her pocket and some broken English, my mother quickly found a job and started a new life for herself. She later got married, moved to Virginia, and gave birth to two healthy twins—my sister and I.

26 years later, here I am—an Afghan American medical student living in Florida. The further I advance through my medical career, the greater my longing for giving back becomes. It is the reason I went into medicine—to help.

After more than three decades of continuous war, many parts of the world turn a blind eye toward Afghanistan, especially when it comes to health care. The lack of health care in Afghanistan is further illustrated by the fact that it is one of only three countries in the world that still suf-

fers from cases of poliovirus. Furthermore, media and news outlets often paint a dark image of our war-torn, but misunderstood, country, leading to a skewed image of our land and our people.

"As an Afghan American in the field of medicine, I always think about how my patients will perceive me, based on my background. What will they think when I tell them I am from Afghanistan? Oftentimes, people have misconceptions of Afghans from what they see in the media," said OMS-II Saleena Nasary when she was asked about her perspective on being an Afghan American medical student.

"The misrepresentation of our people has a massive impact and affects us not only daily, but also in our profession. While our generation continues to carry the heavy burden of this misrepresentation, many of us use this as a tool to drive our passion toward helping our people," she added.

Over the past few months, COVID-19 has quickly spread across the world,

changing nearly every aspect of our daily lives. In March 2020, The Afghan Health Ministry estimated that about 25.6 million Afghans would be infected, and approximately 110,000 Afghans would die from COVID-19. On March 27, the Afghan government announced a lockdown across the country, leaving millions of daily wage earners without any means to pay for food, water, or shelter.

After learning how severely COVID-19 would impact Afghanistan, I felt it was our duty, as Afghan Americans, to come together to help make a positive impact on the world. In order to help give back to the people of Afghanistan, I partnered with fellow medical students, undergraduate organizations, and the nonprofit WISEafghanistan to create the COVID-19 Relief for Afghanistan Initiative.

With our combined efforts, we were able to raise more than \$6,000. This was enough to provide about 100 families in Afghanistan with a one-month supply





of rice, flour, oil, beans, sugar, soap, tea, toothbrushes, toothpaste, and more to help prepare for self-quarantine.

"The people in these villages were so appreciative," said a representative from WISEafghanistan. "Our volunteers were telling us the kids started crying when they saw the food packages. Most of them had been hungry for days."

When interviewed about her contribution to the initiative, OMS-II Mursell Khairzada said, "There are people all around the world who have struggled to survive, even before COVID-19 entered their lives. As this virus continues to turn our lives upside down, it seems unimaginable to think about how regions already lacking daily resources are coping with these changes. As an Afghan American, I feel very connected to the struggles faced in the country my parents grew up in. I am very invested in doing all I can to help make a difference."

According to OMS-III Morsal Osmani, who also contributed to the initiative, "As an Afghan-American, I constantly try to find ways to feel connected to my birthplace. When COVID-19 emerged, I felt saddened to know it would devastate so many people. More so, I thought about the families and

children in Afghanistan and the impact COVID-19 would have on them. I am so happy we were able to come together to play a part in helping our fellow Afghans."

OMS-II Zakia Jabarkheel provided the following feedback. "Shortly before I was born, my parents had to emigrate from Afghanistan because the infrastructure there was deteriorating due to foreign invasion and internal radicalism. I am fortunate to have had the opportunity to grow up in America, but it is disheartening to think of the many disenfranchised groups in Afghanistan that still need help. I am grateful the COVID-19 Relief for

Afghanistan Initiative was created to ease some of the devastation the virus has had on the country."

The diversity at NSU is one of the many things I love about being here. As an Afghan American, it has been a blessing to find other students in my program who are familiar with my culture, language, and background. It was truly an honor to work with students across the nation, and within our class, to help give back to the land our parents came from.

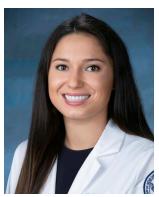
As Afghan American medical students, we will continue to work together to help give back to the land we live in, as well as the land our parents came from. While we often find our parents searching for remnants of their childhood in foreign films and the international food aisle in supermarkets, their perseverance, tales of fresh pomegranate in the mountains of Afghanistan, and passion for the music of the legendary Ahmad Zahir will forever live on through us.

We welcome adversities with open arms, just as our parents did, and we will continue to overcome any obstacles thrown our way. After decades of war, we are the generation that can help make a difference for the land of our parents. We will paint a new picture for the world to see—one of positivity and resilience. We will be the change, one step at a time.



Eye Aggravation: Lessons Learned

By OMS-I Mariah Zakharia



On April 15, I woke up with my right eye red and swollen and thought to myself, "Oh no, not this again." I woke up the same exact way a year and a half ago and was diagnosed with a corneal abrasion; however, this time was different.

The pain I was experiencing was more of a discomfort, as if something was in my eye—not a

burning pain like I had experienced before. I also had a white spot on my cornea, which I thought was eye discharge. When I went to remove it, however, I could not. I did what any medical student would do and searched on Google. After a few seconds of research, I diagnosed myself with a corneal ulcer.

I made multiple calls to local ophthalmologist offices and finally found one that would see me as soon as possible. Oddly enough, my physician used to be an assistant clinical professor at NSU. He dyed my eye with a fluorescein stain and used a slit lamp to see if any corneal damage was present—indicated by a color change to green. Green was visualized, confirming my diagnosis of a corneal ulcer.

I got the ulcer from sleeping in my contacts, which I do a lot, and is the same reason why I got my corneal abrasion the year prior. I am already at an increased risk of developing corneal ulcers simply because I wear contacts. Since I sleep in my contacts, I further increase my risk. Due to my contact misuse, a bacterium known as Pseudomonas aeruginosa grew in my eye, resulting in an ulceration.

I was prescribed Besivance to treat the bacterial infection, and Atropine to dilate and relax my eye. In addition to these ophthalmic solutions, I was also doing cold compresses three times a day and avoiding any direct sunlight. My usage of these drugs changed depending on my progress. Once my eye healed, I was left with a tiny scar, which luckily did not affect my vision due to its location. It has been more than a month now of no contact wearing. I guess I am a glasses girl now, which is definitely for the better.

This experience has been extremely "eye opening," to say the least. It made me realize the dangers of misusing contact lenses. I could have lost my vision because I was too lazy to take my contacts out before going to sleep. This experience also introduced me to the field of ophthalmology, which I am very interested in learning more about.

Our eyes are not something to take for granted. We depend on our vision every day to take in information about the world around us. To be without it would be difficult, scary, and life changing. A lot was gained from this very long and painful journey, but it is safe to say that I will NOT be sleeping in my contact lenses ever again.



KPCOM Students Shine at IPOF Gala



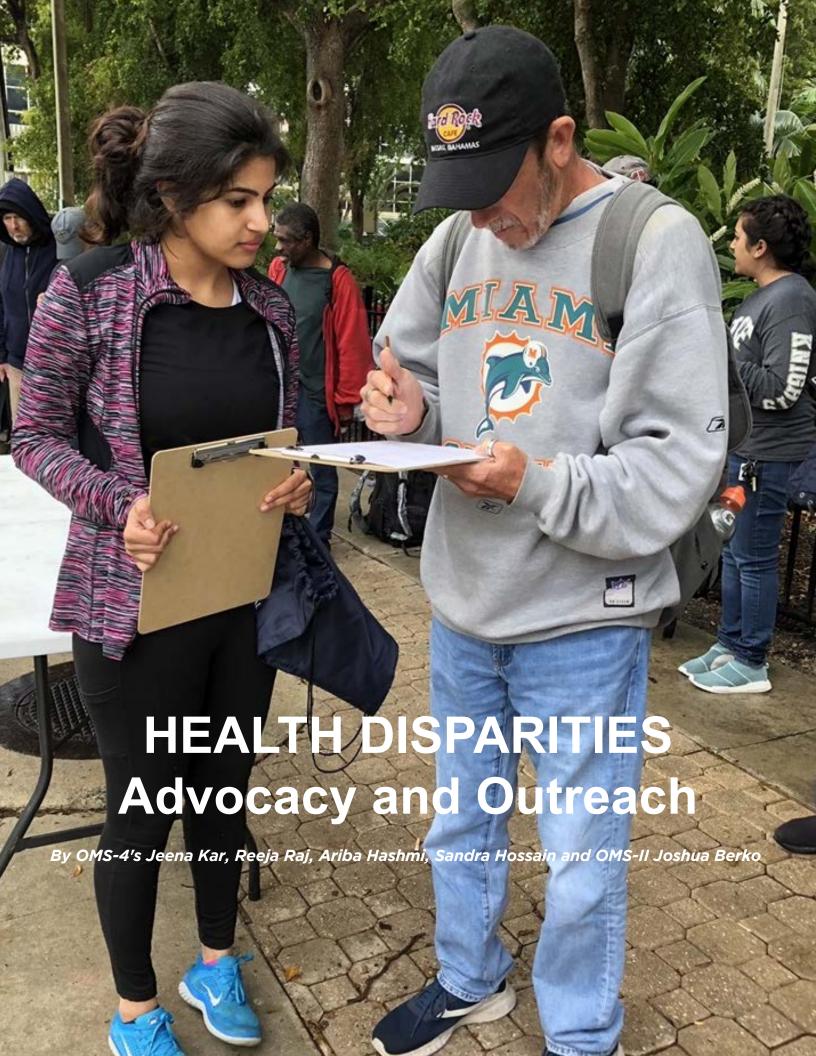
Three KPCOM students—OMS-II Shivanie Ramdin, OMS-III Divy Mehra, and OMS-II Prachi Singh—emerged triumphant at the young

investigator research competition held during the Indian Physicians of Florida (IPOF) Gala on February 8 at the Signature

Grand in Davie, Florida. The students, who are members of the KPCOM's IPOF student club, each received \$500 for their award-winning projects.

Ramdin earned the first-place prize for her project "Assessing the Awareness of Cardiovascular Disease Risk Factors Among Asian Indian Americans in South Florida." Mehra earned second place for his research on "Idiopathic Macular Telangiectasia in RA," and Singh claimed third-place honors for her project "Interprofessional Community Outreach Experience."

Anjali Bhasin, M.D., assistant professor of internal medicine and faculty adviser for the college's IPOF student club, serves as an IPOF executive board member.



During the past two years, our team of medical students has been working with the homeless population in Broward County. Our adviser, Joseph DeGaetano, D.O., and our statistician, Patrick Hardigan, Ph.D., helped us take a community service endeavor we were passionate about and transform it into a full-blown research project. We would like to share some of the data we found in order to highlight the state of this public health issue in Fort Lauderdale.

We went out into the community and did hands-on field research at homeless meal sites, which we accomplished by collaborating with Project Downtown and the Jubilee Center. The study's purpose was to assess mental health disparities and raise awareness about specific challenges this population might face.

Not surprisingly, 100 percent of the participants surveyed had an income below \$12,488, thereby falling in the Affordable Care Act coverage gap. Regarding insurance coverage, 66 percent selected none, and 67 percent screened positive for depression on the PHQ-2 mental health questionnaire.

Individuals who had adequate access to prescription medications scored 1.23 points lower on the PHQ-2 than individuals who were unable to get their medications. Also notable was that individuals who admitted to a history of binge drinking, usage of illicit drugs, and thoughts of suicide scored 1.21 points higher on the PHQ-2 than those who responded no. From the data collected in this study, it is evident that depression is a serious problem affecting much of our homeless population. Despite available community resources, there is a drastic underutilization of them.

In addition to attempting to understand the disparities in mental health in this population, we tried to go a step further by trying to offer some solutions. We provided maps with bus routes to get to locations that offer free mental health services, and we created brochures on coping skills specifically for the homeless population given the unique barriers they possess. However, we recognize that any outreach we do has its limitations. Without extreme changes in public health policy, this population will remain vulnerable to mental and physical health disparities.

Because we are future osteopathic physicians, it is increasingly important that we conduct research and outreach for the underserved. We hope that sharing this information will create an interest within the NSU student body to advocate for our community.

While we as students have consistently learned about the importance of advocacy in medicine, physicians have mostly fallen short in their ability to get involved in politics due to the busy nature of the profession. The American Osteopathic Association (AOA) states that out of the 535 members of the House and Senate, there are only ever a handful of physicians and health care experts serving—generally fewer than five percent.

Let's all find an aspect of public health that we are passionate about and find ways to represent that population. Although the homeless are often overlooked, they will comprise a large number of the patients we treat, regardless of what specialty we chose. As part of the NSU student body, we can make a big difference in health policy simply by choosing to get involved.

"You are the best advocate for the osteopathic profession, and your elected officials must hear from you. Your experience and firsthand knowledge—whether you're an osteopathic medical student, resident, or 20 years in practice—can help guide lawmakers at all levels of government craft impactful health care legislation." –AOA

So, what does this really mean? In other words, what kind of policies should you look into learning about? For



example, you can advocate for sustained and sufficient funding for research into preventing and eliminating health disparities, including

maintaining the Prevention and Public Health Fund

inclusion of groups affected by health disparities in federal collection standards

sustained investments in National Institutes of Health research

prevention efforts at the Centers for Disease Control and Prevention

These are objectives and standards outlined by several major medical communities, such as the American Psychiatric Association. If you feel lost on how to get involved, looking into the policies backed by your respective medical society can be a great place to start as a medical student.





Most acid attacks are committed by someone who knew the victim, with women and children most often targeted due to rejected marriage proposals or domestic disputes (Kuriakose et al., 2017). Unfortunately, these attacks are not uncommon in India, with more than 300 acid attacks reported every year (Singh et al., 2018).

What were you doing when you were 16 years old? Probably shopping with your friends or headed to the movies? Enjoying the rest of your childhood before leaping into adulthood?

Laxmi Agarwal was robbed of that innocent time. At the age of 16, she attempted to fend off the romantic advances of a family friend who was in his 30s. This man and his two friends retaliated by throwing acid on her face and body, leaving her in the street writhing in pain. Agarwal was hospitalized for two months and underwent various surgeries over several years, but the attack left her disfigured for life.

Most acid attacks are committed by someone who knew the victim, with women and children most often targeted due to rejected marriage proposals or domestic disputes (Kuriakose et al., 2017). Unfortunately, these attacks are not uncommon in India, with more than 300 acid attacks reported every year (Singh et al., 2018).

This estimate is likely much lower than the actual number of acid attacks per year due to underreporting and poor surveillance (Singh et al., 2018). Underreporting also leads to a lack of prosecution for these attacks. Although Agarwal eventually saw justice, as her attacker was sentenced to 10 years in prison, recent data shows that this is not the norm. According to the National Crime Records Bureau of India, there were 228 acid attacks reported in 2018, but only 19 of those cases ended in a conviction (Roy, 2020).

The Stop Acid Attacks campaign gained momentum in 2013 with the creation of the Chhanv Foundation in New Delhi, India. The movement aims to increase awareness, provide legal aid and medical care to survivors, help women integrate back into society, and advocate for new laws that protect victims, ban acid sales, and increase jail time for acid throwers. This movement successfully resulted in legislation that banned shops from selling acid and increased the punishment for offenders who throw or attempt to throw acid at another person (Kapur, 2018).

However, these laws have not been readily enforced, as sulfuric acid can still be found at local shops, and acid throwers can be released from jail before the victims get out of the hospital (Singh et al., 2018). The fight to stop acid attacks must continue until the laws are fully enforced, and until survivors are guaranteed compensation for medical care after these attacks.

Acid-attack victims need lifelong care that involves reconstructive surgeries, physical therapy, and many other services that can be difficult to find or afford. Survivors are often left handicapped and dependent on others for daily activities,

which also results in difficulty to find employment. These physical and financial hardships affect caretakers and can lead to abandonment of the survivor.

Survivors also face social isolation due to their physical disfigurement, as they are often ostracized from society. Therefore, they need psychological rehabilitation at each step of their recovery process.

A case study by Axam and Bahauddin (2014) found that 70 percent of acid-attack survivors report negative mental health effects that are largely due to "sympathetic behavior of family, ignorance of children, and taunting behavior of relatives." Another case study found that 60 percent of acid-attack victims reported feelings of helplessness and hopelessness that came from being ignored by family members and isolated from society (Kuriakose et al., 2017).

These major life changes result in severe anxiety, depression, low self-esteem, and feelings of isolation, which lead to an increased risk of PTSD and suicide (Axam





and Bahauddin, 2014). The economic implications of these attacks are also worth noting. Acid-attack victims are more likely to drop out of school due to bullying, leaving them with less education and skills for the workforce (Kuriakose et al., 2017). Even as skilled workers, firms often reject them for employment due to their physical appearance. Consequently, the cycle of poverty and depression continues.

There are many ways to get involved and help acid-attack victims. The Chhanv Foundation is the major nonprofit organization in India that provides legal and medical aid to acid-attack survivors. It also helps survivors with the reintegration process through their Sheroes Hangout in Agra, India.

The Rise Coalition is a nonprofit organization based in the United States that also provides medical care and financial help to victims of acid attacks. The Stop Acid Attacks Banquet held in October 2019 by the NSU-KPCOM Indian Physicians of South Florida (IPOF) club raised \$1,500 for these two organizations.

IPOF sent \$800 to the Rise Coalition to help the nonprofit start a new global

surgical camp that will allow free access to the reconstructive surgeries that acidattack survivors need. IPOF sent the other \$700 to Chhanv to provide medical care and rehabilitation services to acid-attack victims in India. In addition to financial support, we also need to continue spreading awareness while we support survivors. With stronger advocacy, real change can occur to ensure survivors get the care they need and the compensation they deserve.

Resources

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Focusing on the Future

By OMS-II Nathan Badillo



From my earliest memories, I remember telling my parents that I wanted to be the Red Power Ranger. When I was about six, I often dressed up in my red rangers costume, played the *Power Rangers* tape with all the episodes of that year, and tried to imitate all the moves the rangers did to defeat the bad guys. Those were much simpler times for sure.

While the *Power Rangers* series had countless iterations, each had an episode or two about a child, around elementary school age, who was saved by the Rangers or inspired by their duty to embark on their own journey toward making the world a better place. As future doctors, we are just a small part in a world that is doing its best to create a better place by not only improving the lives of our patients, but also creating a healthy future for the next generation.

The summer before my sophomore year of college, my cousin and I volunteered at a MEDLIFE medical volunteer trip in Lima, Peru. During the first morning there, our guide Christian Moreno emphasized an important point regarding interacting with the locals. "Don't focus on the adults," he said. "Their values are already set in stone, and they are not going to change. Focus on the children instead." Those words still ring true to me today.

Before I started medical school, my parents told me to keep my mind and options open because I may not know where I will end up. They were right. As of now, I do not know what I will like or not like in terms of medical specialty or residency. However, ever since I decided to put myself through this journey toward becoming a physician, I have known that my focus would be working with kids.

Throughout and after college, I interacted with kids in Special Olympics, First Tee of Delaware, in a service program at my old high school while coaching the golf team, and in the emergency department at the Children's Hospital of Philadelphia. Reflecting on my experiences working alongside these kids, I realized that a theme in my life thus far, and that I wish to continue, is to have a positive impact and be a part in children's decisions to change something in their lives that will make them better and healthier.

As a big foodie, one of my favorite shows on Netflix is *Ugly Delicious*. It is a food documentary hosted by Momofuku restaurant chef David Chang. Each episode centers around a different food, cuisine, or other topic and its impact on culture, relationships between others, travel, and the world.

In the first episode of the second season, titled "Kid's Menu," segments included baby food, Chang having his first baby boy,

and other chefs around the world discussing how they have adapted to balancing their restaurants and raising their children. As someone who is still balancing the pros and cons of working with kids for the rest of my life, a segment from this episode made the pros section in my hypothetical table a lot denser.

It featured chef Dan Giusti, the founder of Brigaid. The idea behind Brigaid was to assemble a team full of inspired chefs to use their culinary expertise to serve the community by cooking lunches for school children from scratch. The poor nutritional value in school lunches in the United States is well known, and Giusti decided to stand up and do something about it.

As a former head chef at Noma in Denmark, which is currently the number two restaurant in the world with three Michelin stars, Giusti decided that serving children was more important and fulfilling for his skills. The quote that hit me the hardest was when he said that, "The ones that need to be fed the best are fed the worst." The quote reminded me that in order for preventive care to be most effective, as doctors, we need to spread that message of good health and nutrition as early as we can in our patients' lives.

As I have grown, I have noticed that the values my parents instilled in me have become a bigger part of my life. One of those values, which I watched to be lived out at a young age by the *Power Rangers*, and that I try to live by today, is to create a better world for the generation that comes after you through actions.

As I mentioned before, I do not know if becoming a pediatrician is my destiny right now. Perhaps something will intrigue me more and pull me in a different direction. Whatever path lies ahead, I hope to have the opportunity to become a positive role model for kids, because in order for the world to have a brighter future, we have a responsibility to teach the generation after us what it means to be a good person who is healthy and ready to tackle any challenge the world throws at him or her.



STRANAHAN HIGH SCHOOL Tomorrow's Health Care Professionals

By OMS-II Maria Rodriguez and OMS-II Mihir Shah



"Education is the passport to the future, for tomorrow belongs to those who prepare for it today." —Malcolm X

Do you remember when you first thought about entering the health care field? For most, it was either high school or college, but there are students who decided in middle school.

Stranahan High School in Fort Lauderdale, Florida, is a well-known high school that allows students to choose a medical science-geared curriculum. They learn about the various medical sciences, as well as receive opportunities to visit Broward Health Medical Center. We had the amazing opportunity to host them in March 2020.

The NSU-KPCOM chapter of the American Medical Student Association (AMSA) has a long-standing relationship with Stranahan High School. Annually, AMSA and Stranahan High School collaborate on many events throughout the academic year, such as Disaster Day, Career Day, a suture workshop, and CPR training.

Attending the KPCOM exposes us to resources and opportunities beyond that of most medical schools. From the beginning of our curriculum, we are exposed to standardized patient labs, where we have the opportunity to learn about patient interaction and physical examinations that will allow us to properly examine patients when we go on rotations.

Additionally, we have a state-of-the-art robotics lab where students are exposed to realistic scenarios from burn patients to cardiac examinations for murmurs and other abnormalities. In addition, we get opportunities to work with students from different schools within the Health Professions Divisions on various clinical scenarios. One of the newest additions to the robotics lab includes the spectacular virtual reality (VR) goggles that allow students to experience surgeries and play-by-play deliveries.

While these opportunities are amazing for medical students, KPCOM faculty

members Michelle Johnson and Noel Alonso also provided these perspective-changing opportunities for high school students. Stranahan students have embarked on a journey to look forward to higher education and potentially pursue a health care career. Offering them this opportunity so early in their academic lives could assist them in determining what they want to do for the rest of their lives.

Most of the time, medical students have to know early on in college if this is what they want to do—and prepare their future coursework accordingly. However, knowing in high school is getting that step ahead, giving them a competitive edge and a drive to pursue their dreams.

In the prior month, we gave students a presentation on the typical journey to medical school and ultimately becoming a physician. This involved mentioning how long the medical journey takes, and the students felt deeply discouraged. However, after being exposed to a day filled with activities, some students who wanted to be OB-GYNs or surgeons knew that it can be hard, but could see themselves doing it.

If you were lucky, you were able to dissect a frog or other animal in high school biology class. For many, this was the first time putting on gloves or holding a scalpel. The Stranahan students have been fortunate enough to have a STEM-directed curriculum starting in ninth grade. Many who want to be future physicians or nurses had their first opportunity to put on gloves and hold a needle at our suture workshop. Students had an amazing opportunity to learn from faculty member Nicholas Lutfi.

Lutfi is an educational advocate who is dedicated to bringing his knowledge of anatomy to future physicians and professionals alike. He was very excited to bring this opportunity to the younger generation, and to introduce them to this fascinating field.

He taught the high school students about the importance of proper suturing



techniques, safety, and the art of suturing. This workshop was not only exciting for students, but it also served as motivation to keep working hard and dream big. With the help of a high school teacher, they saw that all of the hard work they have been putting in since before high school has, and will continue to, pay off.

As medical students, it's easy to have one focus—health care. We can often leave out other aspects of medicine, especially education. Education is "the process of giving and receiving instruction." You will be surprised by how much you will receive when giving.

We encourage everyone to reach out to their community and educate people, because as future health care professionals, our goal is not to fix or cure, but to educate our patients on how we can better help them. Educating the next generation can have an impact that will last a lifetime.

As medical students, we often find ourselves focused on what's next—the next exam, the next class, or the next step. We get so focused that we lose track of why we are doing it all. Clinical opportunities, especially those that are hands-on, provide us with a reminder as to why we started our journey. Like us, the Stranahan students were reminded that while they are working extremely hard, they will get to the light at the end of the tunnel.



BATTLING BIAS Not Your Stereotypical Medical Student

By OMS-1 Erica Pieper





I remember the first time I told someone I wanted to be a doctor. I was 18 years old, in my first semester of

college and working part-time waiting tables at Applebee's. Mike, the dishwasher, asked me what I was going to school for. When I told him that my plan was to be a doctor, he responded with a laugh and a patronizing voice, "Aww, how cute, Doctor Pieper."

For the rest of my shift, every time I walked through the kitchen, he would exclaim, "Paging Doctor Pieper...Paging Doctor Pieper!" followed by an obnoxious cackle. It was quite humiliating and not the reaction I had hoped for, especially after declaring that I was going to pursue one of the most difficult, noble, and respectable professions.

After all, who really cared what this guy thought of me? It only gave me more motivation to pursue my dreams and get into medical school. However, that was really just the beginning of a string of negative reactions to my declaration of wanting to attend medical school and become a doctor.

I would get responses like, "You know, medical school is really hard?" and "Aren't you worried about how long medical school is, your biological clock is ticking.' My favorite, and by far the most common of the responses, was, "Oh, you mean like a nurse?"

As a first-year medical student this past year, the responses really have not improved. Typically, when I am out in public, proudly sporting my ceil-blue scrubs and on my way to school, I get approached with questions such as, "nursing school?" or even "home health aide?" from some random stranger.

I politely respond with a passive and insecure, "No, medical school." The stranger typically responds with a look of disbelief and says, "Oh, good for you" as he walks away. Not that there is anything wrong with either of those professions, but I have to wonder if my colleagues get these same inquisitions from random people.

Recently, I was at Publix with my fiancé, and we ran into some friends from a past job. After making small talk, they asked, "So, what are you guys up to now?" I took the initiative to respond first with, "I'm going to medical school in Fort Lauderdale."

What I got in return were puzzled looks and awkward silence. My fiancé, however, responded to the question with, "I just got a job bartending at The Hub on Siesta Key." The reaction to his response was warm and welcoming. "Oh wow, that's fantastic! I heard the Hub is a great place to work."

I was left feeling embarrassed and uncomfortable. How dare I, a young female named Erica Pieper, venture off into a career anything more than waiting tables. It's not like I was expecting a congratulatory parade, but I would like to speak about my utmost accomplishment in becoming a successful medical student without feeling out of place.

It is not entirely other people's fault that they are ruled by age-old stereotypes, which suggest that doctors are supposed to look the opposite of how I look. A doctor is a six-foot tall, athletic male. Of course, I'm not trying to offend my colleagues who fit that description perfectly. I have the utmost respect for all of my fellow classmates.

However, before you say it's 2020, women have been doctors for many decades, and those kind of prejudices don't exist anymore—trust me, they do exist. A few years ago, a coworker who had recently visited a friend in the hospital told me that she seriously thought that all the men working there were doctors and all the women working there were nurses.

Aside from that incident, I witnessed the same attitude from a number of patients I saw while working as an emergency room medical scribe. The patients were being taken care of by female doctors, who I respected and who deeply inspired me. These female doctors would often receive a degrading question such as, "Are you a real doctor?" or "When is the doctor coming in? I want to see the doctor."

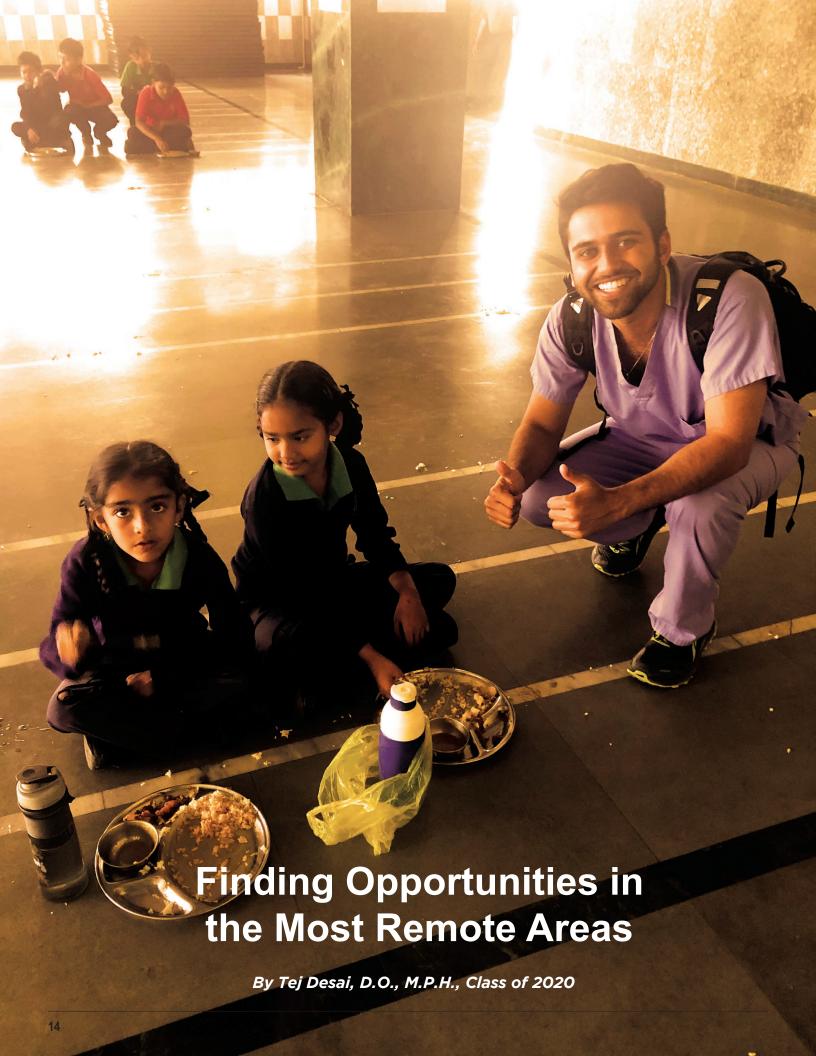
The point is, as I am completing my first year of medical school at NSU, I often find myself thinking about the future. I get apprehensive about the usual things all medical students worry about, such as taking boards, matching, and being able to provide the best medical care for my future patients.

In addition, I worry that I may not ever receive the trust and respect that is necessary to be successful in this career. Nonetheless, I don't mind proving myself, and I know that respect is earned, not demanded. Sometimes, though, people make up their mind about me before giving me the chance to prove myself.

It also does not feel good to constantly be underestimated and questioned. In the end, all I can really do is try my very best and know that everything will work out the way it is meant to. This article is intended to be lighthearted and an outlet to share some of my experiences and struggles.

If you are reading this and have had similar experiences, just know that you are not alone. We got this. We are going to be doctors.





Many of us are drawn into medicine through the lens of making global change—working in developing countries to serve those who have limited means. This past spring, I was able to experience an incredible month doing exactly that through the KPCOM's India rotation.

Spending time in a hospital in Mota Fofalia—a village 60 kilometers away from Vadodara—was an eye-opening experience. Beyond the clinical experience of working in a remote village where a majority of patients are asymptomatic tuberculosis carriers, and where anemia is more of a mainstay, I found that there were vast opportunities to make real change in the school across the street.

On a campus that houses both a hospital and one of the country's top sports centers, headed by our school's benefactor—Dr. Kiran C. Patel, M.D.—there is a boarding school that provides education to 1,300 kids from across different villages and the country. It is here where I saw a great need to educate the children regarding the importance of healthy hydration—especially for the need to prevent urinary stones and dehydration.

In the United States, pediatric kidney stones are on the rise, with estimates of its incidence increasing 4 to 10 percent every year for the past two decades. It is even more problematic during adolescent years, when pubertal changes require increased metabolic demands.

Extrapolated to a remote village of the developing world where kids face a harsh, hot climate and where clean water can be an issue, there is an increased need for education. After learning about the somewhat-common effect of students fainting from dehydration, I knew I wanted to make this community health project a reality.

Coming into my India rotation, I had done some previous work as part of my M.P.H. in a central Florida clinic, where I trained pediatricians to become

advocates of healthy hydration for their patients. However, the needs for making similar changes at a school level proved to be more intricate.

Before I started, I collaborated with the school's principal, who told me of the common health ailments his students faced. He explained that, although the school luckily had clean drinking water, children were still prone to dehydration and urinary stones due to being outside for a majority of the day.

Many school activities, including assemblies, sports, and cultural education, were all done outdoors—meaning that students were subjected to the intense Indian sun for large periods of the day. From working in the hospital and talking to my preceptors, I also learned that many students and nearby villagers were commonly diagnosed with urinary stones for similar reasons. Thus, through collaboration, I understood what I needed to discuss. Now, however, I needed a way to implement my project.

Although I could speak the native Gujarati language, I was by no means an expert, especially when it came to explaining public health topics to children. As such, one of the teachers graciously volunteered to work with me.

Our plan consisted of me explaining the importance of hydration, including ways to increase water intake, while she translated. The principal also helped set up the school's gymnasium with a projector so I could provide visuals.

As I prepared for our big day, I also had the support of a couple of professors who assisted me in the process. I had been working with Maria Montoya, Ph.D., M.P.H., who served as my mentor from the KPCOM's Master of Public Health program, as well as an associate professor from Stanford University, whose expertise includes promoting water consumption in vulnerable populations.

During the big day, we were able to get the entire school to attend the presen-

tation—seeing more than 1,000 kids in one room was staggering. We discussed healthy hydration, including the etiology of pediatric stones, the importance of drinking water, and easy ways for them to increase water intake.

More importantly, I was also able to integrate my teaching points into the school's standardized curriculum with the help of the principal. This ensured that the students would receive sustained education on the subject, which is a vital part of any community health project.

Being at the forefront of a project of this magnitude not only gave me the basis of how to develop and implement a community health project, but it also gave me the foundation of serving the most vulnerable populations. When I decided to pursue medicine, I did so with the idea to practice in a global setting to reach even the most remote areas.

As students being swept by the frantic pace of trying to excel in lectures, exams, and clinical rotations, we are prone to forgetting why we ultimately decided to pursue this field of service. Having these issues compounded by the rat race of residency, fellowship, and then trying to pay off student loans, make it even more difficult to regain this primordial drive.

However, when we do have opportunities to make change, it is important to take them and run with them, whether it is to make one more patient smile or to reach a remote school.



Letter to My Former Self

By OMS-IV Bryan Slootsky



I cannot believe I am about to enter my fourth year of medical school. It seems like just yesterday when I found out I was admitted into NSU's Dr. Kiran C. Patel College of Osteopathic Medicine. Shortly after, however, I

discovered that the amount of studying I did as an undergraduate was insufficient to succeed at NSU.

In college, I wanted to do well in classes and score high on my MCAT to get accepted into a medical school. But once medical school started, I still needed to do well to ensure my applications for residency would be competitive, not only with my friends from NSU, but with all OMS-IV students applying for the same residency programs I will be pursuing.

As a first-year student, I wish I would have planned ahead a little bit better. I wish I spoke to upperclassmen more frequently to get their advice on topics such as attending more medical conferences in the fields of medicine I may want to practice in. I would have also tried to shadow physicians in different special-

ties that are not offered to us as OMS-IIIs, such as dermatology, orthopedic surgery, and physical medicine and rehabilitation.

I would have asked for letters of recommendation from our professors if I made a connection with them early on during my first two years. I would have gone on medical outreach trips that offered students an opportunity to participate. I would have looked for research earlier on, as well as writing a case report on a meaningful patient.

For those of you who are first-year students, it is important to make friends with your classmates. They will become your confidants, study buddies, psychologists, workout partners, movie friends, and so much more. I also recommended that first- and second-year students take a look at the residency applications and plan ahead. Additionally, speak to upperclassmen for advice.

Most of us will be happy to answer your questions without judgment. We were in your shoes a very short time ago. I would be happy to do whatever I could to help guide you as my way of paying it forward. And when you are a third- or fourth-year student, you can be the "expert" and help your younger classmates.

When you have free time, take breaks from all of the above to exercise, go to movies, watch your favorite TV shows, spend time with family, and eat a good meal.

If I could give one final piece of advice, I would recommend that you consider lifestyle prior to deciding what specialty you want to pursue. Making money is nice, but it's not everything. Having a good balance in life is very important.

KPCOM Students Excel at AAO Convocation



During the annual American Academy of Osteopathy
Convocation held March 11–15 in
Colorado Springs, Colorado, OMSIII and predoctoral OPP fellow **Kevin Marfiak** (pictured left) won
the A. Hollis Wolf competition,
which is presented to a researchoriented platform presentation
about an interesting osteopathic

principles and practice patient case. This marked the first time the KPCOM won first place in the competition.

Additionally, Marfiak received the A.T. Still Memorial Scholarship—a nationally awarded scholarship presented to an applicant who best details a case where osteopathic manipulative treatment was used on a patient with successful outcomes.

Additional KPCOM success occurred at the symposium, as several third-year predoctoral OPP fellows from the current and previous year participated in the Louisa Burns Osteopathic Research Committee and National Undergraduate Fellows Association student poster competition.

Nick Wawrzyniak's poster "Sphenobasilar Synchondrosis Dysfunction as a Biomechanical Etiology of Post-Concussion Alice in Wonderland Syndrome" earned second-place honors, while Gabriella Teixeira (lead author), Gabrielle McDermott, and Robin Mata's poster "Silent But Chronic: The Debilitating Disease of Myalgic Encephalomyelitis/Chronic Fatigue Syndrome and the Power of OMT" came in third.

Thank You, Mom and Dad

By Sahil Batra, D.O., Class of 2020



I want to wish you both congratulations. We have done it. I am finally graduating medical school. This was a joint accomplishment, and without support from you both, I don't know if it would have been possible.

This used to be a dream for us. The difficult journey I had getting into medical school challenged

this dream at times. You both have provided unwavering support throughout my life, but especially during this time. I almost felt like giving up until I received that phone call in June 2016 from NSU granting me the key to unlock and realize our dream. Now, our dream is a reality.

Mom, no amount of words will be adequate in describing your role in getting to this day. You are an amazing human being, and your care and concern for others and ability to put others' needs before yours is truly an example I will follow for the rest of my life. You sacrifice everything just to make sure our family is cared for each day. You've always thought ahead and known what is best for me and guided me in that direction. Your every move has involved thinking about what is best for me.

Dad, I remember being lectured by you on the drive to high school each morning on what I should focus on and things I should



avoid. I never properly thanked you for your advice over the years. I want you to know that I always listened, even when it may have seemed like I wasn't. You have always provided solid and

timely words of advice, especially during the tougher parts of medical school. You have always been there to help me in every way.

I know your lives have always been, and continue to be, difficult, but I hope this achievement gives you an opportunity to pause and celebrate the fruits of your labor. I want you to know that your hard work and sacrifice resulted in this accomplishment. You have worried, cried, worked, and done just about everything else to make this happen.

You have both been untiring in your commitment and dedication, and for that I am forever appreciative beyond what words can express. I owe you a lifetime of indebtedness for your support.

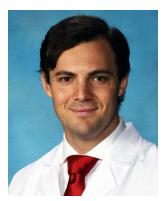
The best way I can thank you is by promising to work hard to become a compassionate and knowledgeable physician. I will make you proud of the doctor I become.

I love you both.



Life Lessons from Anesthesiology

By OMS-III Grant Myres



I became interested in anesthesiology shortly after I began osteopathic medical school. Different factors influenced this decision. For example, my greatuncle was an anesthesiologist; my mind appreciates anesthesiology being the intersection of real-time physiology and patient care; and I fit in well with the relaxed yet rapt

personality this specialty attracts, among many other reasons.

In addition to everything I already liked about anesthesiology, my firsthand experiences as a third-year medical student in the hospital and seeing anesthesiologists in action confirmed my inclination in a way I didn't foresee. Anesthesiology seemingly contained lessons for life in its principles.

While I spent time with anesthesiologists, we showed up early at the hospital to meet with the patient, take a meticulous history from the patient, and review his or her past medical history for anything concerning. We went to the operating room beforehand, laid out medications we'd want to have handy, and readied the equipment.

There was a careful, methodical approach to it. The labor was front heavy for the anesthesiologist, and rightfully so, because all the seemingly excessive prior preparation is what allowed the procedures to go smoothly. I was struck when I reflected how life favors the prepared.

Abraham Lincoln famously said, "Give me six hours to chop down a tree, and I will spend the first four sharpening the axe." So, too, will the anesthesiologist attest that taking the time to carefully plan and prepare in life will also yield superior results.

As a procedure draws on, and the surgeon is perpetually busy at the operating table, the anesthesiologist is coolly watching the patient and the patient's vitals. When needed, the anesthesiologist steps into action without missing a beat. Instinctively, the physician knows how to reestablish an airway or which medication to reach for.

The anesthesiologist calmly follows the plan, trusts his or her knowledge, and readjusts as required until the results are achieved. In life, there is no end to never previously experienced challenges. The only feasible way to solve a constant stream of new trials is to recognize the patterns from past solutions and apply the principles.

Anesthesiologists, in spite of years of training, can never realistically have experienced every outcome that could go wrong.

Rather, their seasoned intuition guides them through a patient's unique problem to a solution. In life, too, we must learn to recognize the patterns from our experiences, which will guide us through unfamiliar territory.

After the procedure is successfully completed and the patient is coming to, the anesthesiologists help with the operation clean-up. They bring the groggy patient to the post-anesthesia care unit and spend time with the patient until they see that the patient is stable enough to be left in the nurses' care.

Anesthesiology requires the job be seen through to its very end, and that no corners are cut at any point while the patient is entrusted to the anesthesiologist's care. There can be no excuses given or responsibilities shirked as the last line of defense, so to speak. Avoiding the temptation to try to get away with shoddy work is key to success in life and in anesthesiology. Work that you'd be proud to hang your hat from is the only kind of work worth doing.

Both anesthesiology's simplicity and complexity speak to me. Truth seems to be universal, and manifestations of the same truth are evident if we know where to look, and particularly, if we are looking at what already captures our attention. Among countless other principles, life itself affirms that careful preparation, solid reasoning, and honest commitment to see a task through will bring about favorable results. Anesthesiology reinforces these truths, and I suspect they will be but the first of many I find during a career in anesthesiology.



Yoga and Yogurt Day of Wellness

By OMS-II Minh Chung, SGA Mental Health Chair

Many scientific articles support the health and mental benefits of practicing yoga. These benefits, such as reducing inflammation, decreasing stress and fighting depression, are seldom implemented by individuals, let alone individuals in medical school.

One study done in 2005 showed that after a three-month yoga program, females had a significant reduction in the stress hormone cortisol (Michalsen et al., 2005). Similar studies showed individuals who practice yoga regularly reported improving quality of life and mental health (Javnbakht et al., 2009; Khansari et al., 2009).

A 2015 study comparing yoga and non-yoga groups showed that people in the yoga group who practice yoga one hour a day had significantly lower pro-inflammatory markers (TNF-alpha and IL-6) than those who didn't practice yoga regularly (Vijayaraghava et al., 2015). Overall, finding time to practice yoga a few times a week may be enough to make a difference when it comes to physical and mental health.

On March 2, the Mental Health Awareness Taskforce and the SGA class board hosted a Yoga and Yogurt Day of Wellness. The event took place on the lawn in front of the Alvin Sherman Library. When I planned the event, my goal was to give the first-and second-year classes a study break outdoors so they could de-stress and relax before their upcoming exams.

Menchie's donated frozen yogurt, and Random Acts of Kindness provided food. The event was taught by OMS-I Jess Goldstein, who is also a yoga instructor at NSU.

I am an adamant supporter of reducing medical school burnout, and this event helped do just that. It gave us medical students a day to relax, as well as time to step back and prioritize self-care. The event was a huge success, as the participating students learned the benefits of yoga and enjoyed the different flavors of frozen yogurt.

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Tampa Bay Regional Campus Health Expo

By OMS-II Nadia Ahamed



The TBR SGA Class Board organized a networking event for the OMS-I class that featured short, TED talk-style presentations by physicians or programs/residency directors in varying specialties. The presentations were capped at 15 minutes, and

physicians were encouraged to speak about their specialty, why they chose it, and give any advice to the first-year class. Following the speaker sessions, there was a networking social hour in which students asked questions and had conversations with the event speakers/physicians.

The event began with a morning check-in where name tags and the schedule for the day were provided to all participants. The event was intended to model a professional conference in which a schedule was distributed prior so students could budget their time and decide on what speakers they preferred to see.

Following lunch hour, we resumed the event with our keynote speaker—Ronald R. Burns, D.O., president of the American Osteopathic Association—who spoke about the importance of being a D.O. and answered questions students had regarding COMLEX and the recent merger with the single GME accreditation system.

CLASS(

Senior Awards Recipients

Congratulations to the following class of 2020 graduates who received well-deserved awards to honor their years of service, dedication, and academic excellence at the Dr. Kiran C. Patel College of Osteopathic Medicine.

CHANCELLOR'S AWARD (Osteopathic Medicine) Maja Magazin, D.O.

DEAN'S AWARD (Osteopathic Medicine) Trevor Nezwek, D.O.

RESEARCH AWARD (Osteopathic Medicine) Farah Leclerca, D.O.

GOLDEN APPLE AWARD (Osteopathic Medicine) Brooks Barclay

CHANCELLOR'S AWARD (Master of Public Health)
Stephanie McCluskey, M.P.H.

DEAN'S AWARD (Master of Public Health) Alexandra Lenox, D.O., M.P.H.

RESEARCH AWARD (Master of Public Health) Shelley Xu, D.O., M.P.H.

SERVICE AWARD (Master of Public Health) Whitney Saint-Fleur, M.P.H.

GOLDEN APPLE AWARD (Master of Public Health) Claudia Serna, Ph.D.

CHANCELLOR'S AWARD (Biomedical Informatics)
Steven Warrington, M.S.B.I.

DEAN'S AWARD (Biomedical Informatics) Nicholas Sanfilippo, M.S.B.I.

RESEARCH AWARD (Biomedical Informatics) Rohan Umrani, D.O., M.S.B.I.

SERVICE AWARD (Biomedical Informatics)

Dana Famularo, M.S.B.I.

GOLDEN APPLE AWARD (Biomedical Informatics)
Stephen E. Bronsburg, Ph.D.

CHANCELLOR'S AWARD (Disaster and Emergency Management)

Brian Hierholzer, Pharm.D., M.S.

DEAN'S AWARD (Disaster and Emergency Management) Gary Harrington, M.S.

SERVICE AWARD (Disaster and Emergency Management) Michael Moses, M.S. GOLDEN APPLE AWARD (Disaster and Emergency Management) Jason Cohen, Ed.D.

DEAN'S AWARD (Medical Education) Rosabelys Rodriguez, M.S.

DEAN'S AWARD (Nutrition Program) *Rim Makhlouf, M.S.*

GOLDEN APPLE AWARD (Nutrition Program) Ellen Weinstein

A. ALVIN GREBER, D.O., CARDIOLOGY AWARD Jonathan Wu, D.O., M.P.H.

ALBERT L. WEINER, D.O., MEMORIAL PSYCHIATRY AWARD

Vishal Patel, D.O.

ALUMNI ASSOCIATION AWARD Adedeji Olusanya, D.O., M.P.H.

AMERICAN CONGRESS
OF OBSTETRICIANS AND
GYNECOLOGISTS (ACOG)
DISTRICT XII DANIEL R.
BARKUS OUTSTANDING
ACHIEVEMENT IN THE STUDY
OF OB/GYN

Alexandra Lenox, D.O., M.P.H.

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Senior Awards Recipients

AMERICAN CONGRESS
OF OBSTETRICIANS AND
GYNECOLOGISTS (ACOG)
DISTRICT XII OUTSTANDING
ACHIEVEMENT IN THE
SERVICE OF OB/GYN

Elizabeth Weirich, D.O.

CLINICAL SERVICE AWARD
Timothy O'Toole, D.O.

DEAN'S COMMUNITY AWARD *Tony Swicer, D.O., M.P.H.*

DEAN'S GOVERNMENT AND
PUBLIC POLICY AWARD

Michelle Yousefzadeh, D.O., M.P.H.

DEAN'S ORGANIZATIONAL AWARD

Luis Alva, D.O.

DONNA JONES MORITSUGU AWARD

Carlos Rodriguez

ENDOCRINE SOCIETY AWARD

Taylor Bracco, D.O.

EXCELLENCE IN EMERGENCY MEDICINE AWARD

Leena Owen, D.O., M.P.H.

FLORIDA CHAPTER OF THE AMERICAN ACADEMY OF PEDIATRICS, LUTHER W. HOLLOWAY AWARD

Gabriela Lins, D.O.

FLORIDA CHAPTER OF THE AMERICAN ACADEMY OF OSTEOPATHY AWARD IN OSTEOPATHIC MANIPULATIVE MEDICINE

Anna Mercer, D.O.

LEONARD TOW HUMANISM IN MEDICINE AWARDS

Student: *Mohammad Dlewati*, D.O. Faculty: *Sandi Scott-Holman*, D.O.

MATTHEW A. TERRY, D.O., MEMORIAL AWARD

Kiara Singer, D.O.

MERCK MANUAL AWARD FOR OUTSTANDING GRADUATING MEDICAL STUDENTS

> Ellen Dzierzak, D.O. Evan Grabois, D.O. Jodian Hemmings, D.O. Oyeyimika Oyekanmi, D.O. Rajinder Persaud, D.O.

MORTON AND GERALDINE TERRY INTERNAL MEDICINE AWARD

Shaan Patel, D.O., M.P.H.

MORTON AND MARY SMITH ACHIEVEMENT AWARD

Anna Jacques, D.O.

OUTSTANDING ACHIEVEMENT IN GERIATRICS AWARD

Milee Patel, D.O.

OUTSTANDING STUDENT IN THE STUDY OF PEDIATRICS

Kaela Ellis, D.O.

OUTSTANDING STUDENT IN PEDIATRIC SERVICE

Reeja Raj, D.O.

PREDOCTORAL OSTEOPATHIC PRINCIPLES AND PRACTICE FELLOWSHIP CERTIFICATES

Stephany Giraldo, D.O.
Anna Jacques, D.O.
Paul Kim, D.O.
Anna Mercer, D.O.
Urvi Patel, D.O., M.P.H.
Rajinder Persaud, D.O.

PREDOCTORAL RESEARCH FELLOWSHIP AWARD

Christopher Larrimore, D.O., M.Sc. Farah Leclercq, D.O.

ROSE COMMUNITY
SERVICE AWARD

Kaitlyn Steward, D.O.

SAMUEL J. SALMAN, D.O., AWARD IN FAMILY MEDICINE

Payton Cline, D.O.

First- and Second-Year Students Earn KPCOM Awards for Service, Achievement

Although the COVID-19 pandemic prevented the KPCOM from hosting its annual First- and Second-Year Student Awards ceremony, the winners of various accolades and scholarships were notified via email. The recipients were honored in areas such as research, academic excellence, and community service.

Drs. Mohan and Meenu Gupta Scholarship Award

First-year students **Tabitha Xia-Zhu** from the Fort Lauderdale/ Davie Campus and **John Seglison** from the Tampa Bay Regional Campus received the Drs. Mohan and Meenu Gupta Scholarship Award, which is bestowed to KPCOM students in good academic standing who are preparing to do one medical outreach trip to India or a clinical rotation in India.

Bradley I. Silverman Scholarship

First-year students **Charles De La Rosa**, **Michelle Lampsa**, and **Manda Mainville** were the recipients of the Dr. Bradley I. Silverman Memorial Scholarship, which was established in 2006 to honor outstanding KPCOM students who participate in cancerrelated community service and display compassion, commitment, and other laudable traits exemplified by Silverman.

Kenneth Burnell Research Award

First-year students **Ariel Kidron** from the Fort Lauderdale/Davie Campus and **Karen Go** from the Tampa Bay Regional Campus received the Dr. Kenneth Burnell Student Research Award, which is bestowed to KPCOM students who conduct outstanding research in either clinical medicine or biomedical science.

Beth and Joel Rush Endowed Charter Scholarship

Second-year student **Brittany McCord** from the Fort Lauderdale/ Davie Campus and first-year student **Dhurti Hirani** from the Tampa Bay Regional Campus received the Beth and Joel L. Rush, D.O., Endowed Charter Scholarship, which is provided to KPCOM students who are in good academic standing and are in significant financial need at any juncture in their KPCOM education.

Jeff Grove Scholarship

First-year students **Ariel Paz** from the Fort Lauderdale/Davie Campus and **Dhurti Hirani** from the Tampa Bay Regional Campus received the Jeff Grove Scholarship, which is presented to a KPCOM student selected for his/her dedication to student service.

David B. Levine, D.O., Endowed Scholarship Award

Second-year student **Nicolette Natalie** received the David B. Levine, D.O., Endowed Scholarship Award, which is provided to

a second-year osteopathic medicine student who demonstrates an interest in family and/or internal medicine, displays leadership for the osteopathic medical profession, and is a member of SOMA.

Osteopathic Medicine General Scholarship

First-year students **Rida Atlaf** from the Fort Lauderdale/Davie Campus, **Alexander Prouty** and **Joshua Musih** from the Tampa Bay Regional Campus, as well as second-year student **Matthew Heffelfinger** from the Fort Lauderdale/Davie Campus, received the Osteopathic Medicine General Scholarship, which is presented to students selected for academic merit and dedication to osteopathic medicine.

Judy Morris Endowed Memorial Scholarship

Third-year student **Zachary Burns** received the Judy Morris, M.D., Endowed Memorial Scholarship, which is presented to an NSU-KPCOM student or graduate who is currently enrolled in the NSU-KPCOM Master of Public Health program, has shown high academic achievement, and demonstrates financial need.

Morton Morris Osteopathic Medicine Public Health Scholarship

Second-year student **Susan Zhang** received the Morton Morris, D.O., J.D., Osteopathic Medicine Public Health Scholarship, which is awarded to a student based on his/her educational goals, leadership, and active participation in the Master of Public Health program.

Clearwater General Scholarship Fund

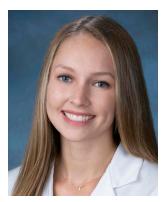
First-year student **Mara Seat** from the Tampa Bay Regional Campus received the Clearwater General Scholarship Fund, which is presented to a first-year medical student who has demonstrated health-related community service.

Society Awards

Najla Zayed and Ashley Vidad (William G. Anderson, D.O.);
Melanie Perez (Louisa Burns, D.O.); Brian Shaw (Robert Klein, D.O.); Ram Hirpara (Fred Lippman, Ed.D.); Tyler Ruppel (Anthony J. Silvagni, D.O.); Monica Oo (Bradley I. Silverman, D.O.); Ankit Srivastava (A.T. Still, M.D., D.O.); Oussama Benalla (Morton Terry, D.O.); Victoria Catala (James Turner, D.O.); Spencer Rice (Ross Zafonte, D.O.); Brittany Derynda (Cyril Blavo, D.O.); Kristina Novotny (George Hanbury, Ph.D.); Reema Patel (James Howell, D.O.); Katherine Taylor (Kenneth and Michelle Johnson, D.O.); Richard Bates (Kiran C. Patel, M.D.); Jenna Knafo (Mark Sandhouse, D.O.); and Alexandra Nelson (Elaine Wallace, D.O.)

Recognizing Your Growth

By OMS-I Olivia Menze



I ordered a plant in a six-inch pot from Amazon Prime during the first month of medical school, simply because I was procrastinating.

I thought it would be cliché to relate this plant to how I've grown as a medical student, but here we are. At first, it seemed more reasonable to portray my medical

school experience through the leaves this plant has lost. I swear, I was picking up a dead leaf every other day. Maybe those leaves symbolized the exams I failed, the times I cried, the leadership positions I applied for and didn't get, or learning the Krebs Cycle for the 27th time and still getting it wrong on the test.

There is only one big window in my apartment, and I could never find a spot where the sunlight hit perfectly. One side of my plant was thriving, while the other side was shriveling up. Similarly, while my grades were going up, my weight was going down. I was so caught up in my studies that I would often forget to eat. I knew that finding balance was going to be a challenge.

I was making the mistake of focusing more on the dead leaves than the tremendous amount of growth. It's been almost a year since I got this plant, and I recently moved it to a bigger pot with fresh soil. That was the moment I truly realized its growth. I pulled out an extensive network of roots from the old pot, and I measured the longest part of the plant to be 82 inches.

I really have grown. My roots dig deep into this school—I'm part of the first class to walk the halls of a new campus. As a class, we started interest groups, volunteered all over Tampa and Clearwater, supported each other through a new curriculum, and branched out to form friendships that will last a lifetime.

I finally found balance. I'm no longer compromising parts of myself in an attempt to achieve perfection. I'm spending time with my friends, utilizing my study time wisely, exercising every day, practicing yoga, and smiling a lot more.

The best advice I could give a budding first-year medical student is to embrace the fallen leaves and to cherish the growth. You will learn to weed out the idea that you won't succeed. The journey certainly won't be perfect, but you'll become stronger. Instead of giving up, seek out a new perspective with a little more sunshine—and some room to grow.



KPCOM Student Achievements













Cheung

First-year students Assad Ali and Aakangsha Jain coauthored the poster "Microsurgical Resection of Petroclival Meningiomas Treated with Stereotactic Radiosurgery to Address Persistent Trigeminal Pain," which was accepted for presentation at the Florida Medical Association's Virtual Poster Competition on August 1 in Orlando, Florida.

First-year students Jose Alvarado, Andrew Ardeljan, Samuel Eaddy, and David Tuyn coauthored the poster "A Comprehensive Look at Sacral Dysmorphism and a Review of Altered Safe Zones in Sacroiliac Screw Fixation," which will be presented at the Florida Medical Association's Virtual Poster Competition.

First-year student Andrew Ardeljan served as lead author on the projects "Comparative Analysis on the Effects of Sarcopenia Following Total Knee Arthroplasty" and "Medial Epicondylitis: Patient Demographics, Comorbidities, Diagnosis Trends, and Surgical Trends," which will be presented at the Southern Orthopaedic Association Virtual Meeting being held July 22-25. Additionally, he served as lead author on the project "Patients with

Sarcopenia Undergoing Primary Total Knee Arthroplasty Are at Greater Risk of 90-Day Medical Complications, 2-Year Implant-Related Complications, in-Hospital Lengths of Stay, and Costs," which will be presented virtually at the annual Florida Orthopaedic Society meeting. He also served as lead author of the article "Comparative Analysis on the Effects of Sarcopenia Following Primary Total Knee Arthroplasty: A Retrospective Matched-Control Analysis," which was recently published in The Journal of Knee Surgery.

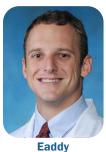
Second-year students Joshua Berko and Gregory Kunis and first-year student Andrew Ardeljan coauthored the project "Successful Surgical Treatment of Pigmented Villonodular Synovitis in the Distal Radial Ulnar Joint with Sauvé-Kapandji Procedure: A Case Report," which will be presented at the Florida Medical Association's Virtual Poster Competition.

First-year student Michelle Cheung coauthored the review drug article on the vesicular monoamine transporter-2 inhibitor "Reserpine," which was published in StatPearls on May 30 and indexed at PubMed (PMID: 32491699).

First-year student Sebastiano Failla, M.Sc., coauthored the article "The Effects of Contextual Priming and Alaryngeal Speech Mode on Auditory-Perceptual Ratings of Listener Comfort," which was published in the March issue of the Journal of Voice. He also coauthored the review article "Iron Dextran," which was published on PubMed. Additionally, he coauthored "Intelligibility of Stop-Plosive and Fricative Consonants Produced by Tracheoesophageal Speakers in Quiet and Noise," which was published in the June issue of the Journal of the Acoustical Society of America.

Fourth-year students Asma Ghafoor and Ashley Bisnow coauthored the poster "Missing Malaria: The Consequences of an Undiagnosed Case of P. ovale," which was accepted for presentation at the Florida Medical Association's Virtual Poster Competition.

Second-year student **Yara Khalifa** was inducted into Omega Beta Iota. She also coauthored the resolution "Effects of Climate Change on Human Health," which was passed at the American Osteopathic Association's OMED annual medical conference in Baltimore, Maryland.













Kidron

KPCOM Student Achievements













Kunis Lago Lanspa

Leibowitz

Patel and Pollak

First-year student Ari Kidron coauthored the review article "Adrenergic Drugs," which was published in StatPearls on May 30 and indexed at PubMed (PMID: 30480963).

Third-year student Nicholas Lago received the Volunteer Auxiliary of Westside Regional Medical Center scholarship, which is awarded to Broward, Palm Beach, or Miami-Dade residents who are pursuing a career in medicine and have shown dedication to volunteer work and academics.

First-year student Michelle Lanspa received the Council of Osteopathic Student Government Presidents (COSGP) Scholar of the Year Award, which was established by the COSGP to recognize students who take an interest in advancing international understanding of osteopathic medicine.

Second-year students Jillian Leibowitz and Arden Woods coauthored the article "Uveitis as a Predictor of Predisposition to Autoimmunit y," which was published in the Cureus Journal of Medical Science on March 28.

First-year student Shreya Narain coauthored the poster "DNSP-11 as a Therapeutic Agent for Dopaminergic Cell Survival: Role of Caspase-3/7 and ERK Signaling," which was accepted for presentation at the Florida Medical Association's Virtual Poster Competition on August 1 in Orlando, Florida. She also coauthored the review drug article "Tolterodine," which was published in StatPearls on May 30.

First-year students Eliyah Pollak and Shuchi Patel coauthored the posters "The Influence of Periodontal Health on Neurodegenerative Disease" and "The Causal Relationship Between the Gut and Vaginal Microbiota and Neurodegenerative Disorders." The posters were accepted for presentation at the Florida Medical Association Virtual Poster Competition. The research was conducted as part of a larger project under the guidance and mentorship of Mayur Parmar, Ph.D., M.S., assistant professor of basic sciences, regarding the "Influence of Periodontal, Gut, and Vaginal Health on Neurodegenerative Disease." Pollak also coauthored a book chapter with Parmar on the alpha-amino acid amide protease inhibitor "Indinavir," which was published on PubMed on March 4.

First-year student Jennifer Semaan coauthored the review drug article "Famciclovir," which was published in StatPearls on May 30.

Third-year student Paul J. Spano II, M.S., coauthored the article "Elderly Patients with Isolated Hip Fracture Requiring Surgical Intervention: Does Admitting Service Matter?" which was published in the March/April issue of the Journal of Trauma Nursing.

Regina Zambrano, class of 2021, was chosen as runner-up in the American Association of Colleges of Osteopathic Medicine's (AACOM) National Student Doctor of the Year competition.

Shuhua (Steve) Zheng, Ph.D., class of 2021, had his coauthored article "Klebsiella Pneumoniae Invasive Syndrome in a Diabetic Patient with Gallbladder Abscess" published in the June 17 issue of Clinical Case Reports. He also served as lead author of "Targeting Cullin-RING E3 Ligases for Radiosensitization: From NEDDylation Inhibition to PROTACs, which will be published in the peer-reviewed journal Frontiers in Oncology.













Zheng



