

February 2019

# SGA Rounds

## Student Government Association Newsletter

### NSU Dr. Kiran C. Patel College of Osteopathic Medicine

## Letter from the Editor in Chief

By OMS-III Brandon Hanai, SGA Administrator of Public Affairs



We are already one month into this winter semester, and time continues to fly. This edition of *SGA Rounds* features some first-person stories from the clinical world of medicine.

Kaitlyn Steward shares a beautiful story as to why we are not just medi-

cal students, while Ravin Patel enlightens us on the importance of exercise and how we can find balance in order to incorporate it into our busy schedules. We have many other stories, including some updates from SOMA and the Mental Health Awareness Task Force.

I'd like to take a moment and use this platform to encourage you all to please reach out to our counselors at Henderson, or even a friend you can trust, if you ever feel the need to just talk. Becoming a doctor is no easy task, and we all have areas in which we struggle. We are a family working toward a desired career we all have in common.

We are not each other's competition. Try not to stress about the little things, because they will be behind us soon. Continue to work hard, but please look out for our friends surrounding us. And please remember: You can always feel free to reach out and talk to me.

Thank you to everyone who contributed to this edition of *SGA Rounds*. Most importantly, thank you to Scott Colton, the HPD's director of medical communications and public relations, for your time and mentorship.

If you have any questions or would like to learn how you can submit information to *SGA Rounds*, please contact Brandon Hanai at [bh974@mysu.nova.edu](mailto:bh974@mysu.nova.edu). Your voice will be heard!

## Tampa Bay Regional Campus Nears Completion

Construction progress as of February 1, 2019



Rendering of what the completed campus will look like.



# SOMA Updates from OMED Symposium

By OMS-II Alexa Ragusa and OMS-II Mark Vinicky

In October, the American Osteopathic Association (AOA) hosted its annual Osteopathic Medical Education Conference (OMED) in San Diego, California, which unites osteopathic physicians and students, as well as other health care professionals from across the country.

This conference was held alongside the AOA House of Delegates and COSGP meetings. Alexa Ragusa, the KPCOM's Student Osteopathic Medical Association (SOMA) president, and Mark Vinicky, the college's national liaison officer, attended OMED.

During SOMA's House of Delegates meeting, chapter leaders from across the country debated 20 resolutions written by D.O. students nationwide. Four of the resolutions passed, while the remaining majority were referred back to the author. Some of the topics discussed included expanding nutritional education, opposing targeted regulation of abortion providers, advocating for fair opportunities for visiting medical students, patient education on organ donation, research on medical marijuana, and advocating for mental health task forces in D.O. colleges.

The goal of SOMA's House of Delegates is to advocate for osteopathic medical students. SOMA leaders act as the voice of D.O. students, relaying their concerns, interests, and passions to the leaders of the AOA. Once resolutions are passed through SOMA, they are brought to the AOA's House of Delegates. Resolutions that make it to the AOA House of Delegates can be incorporated into AOA policy.

Therefore, students truly can have an impact on the future of the osteopathic profession. Following are the approved resolutions.

## **OPPOSING TARGETED REGULATION OF ABORTION PROVIDERS (TRAP LAWS) F-18-05**

SOMA members raised concerns for targeted regulation of abortion providers (TRAP laws) and believe it is prudent for the AOA to take an official stance on these laws. This resolution asks the AOA to oppose TRAP laws.

## **CHILDCARE SERVICES FOR RESIDENCY/FELLOWSHIP PROGRAMS F-18-06**

This resolution recommends that the AOA supports and advocates for the ACGME to increase the number of residency/fellowship institutions that offer child-care services, and for these institutions to increase transparency when reporting availability of child-care services in their programs.

## **PROMOTING AVAILABILITY OF EPINEPHRINE AUTOINJECTORS IN PUBLIC SPACES F-18-07**

This resolution will allow SOMA chapters to organize educational campaigns to promote and raise awareness about the benefits of this topic. In states where there is no such legislation allowing for the public availability and usage of epinephrine autoinjectors, efforts can be focused on increasing awareness for their need.

## **ADVANCING NUTRITION-FOCUSED EDUCATION WITHIN OSTEOPATHIC MEDICAL SCHOOL CURRICULA DURING DIDACTIC YEARS F-18-09**

This resolution will encourage the Commission on Osteopathic College Accreditation to create guidelines that emphasize clinically relevant disciplines of nutrition, with the goal of basic physician nutrition knowledge to address patient-nutrition inquiries with evidence-based medicine.

OMS-I Matthew Heffelfinger, the KPCOM's first-year SOMA representative, was selected for SOMA's New Member Scholarship and was invited to OMED to accept his award at the SOMA Foundation Reception.

Your SOMA chapter leaders are motivated to pursue additional health care advocacy events before attending D.O. Day on Capitol Hill on March 20 in Washington D.C. We strongly recommend all osteopathic students to attend this unique opportunity to meet with members of congress and advocate for policy issues that dramatically affect the osteopathic profession and our patients.

This is a great opportunity for you to immerse yourself in health care policy and become an advocate for our profession. For more information, please visit [osteopathic.org/about/aoa-events/day-on-capitol-hill/](http://osteopathic.org/about/aoa-events/day-on-capitol-hill/).

Additionally, we hope you will consider writing a resolution. Any osteopathic student can submit a resolution to the Student Osteopathic Medical Association; however, only SOMA members can sit in on House of Delegates meetings. The next SOMA House of Delegates will be held at D.O. Day on Capitol Hill.

## SGA Rounds

Volume 5, Number 1

SGA Rounds is produced by  
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Fort Lauderdale, FL 33328-2018  
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# Doctors of “Aequanimitas”

By OMS-I Sean Friefeld

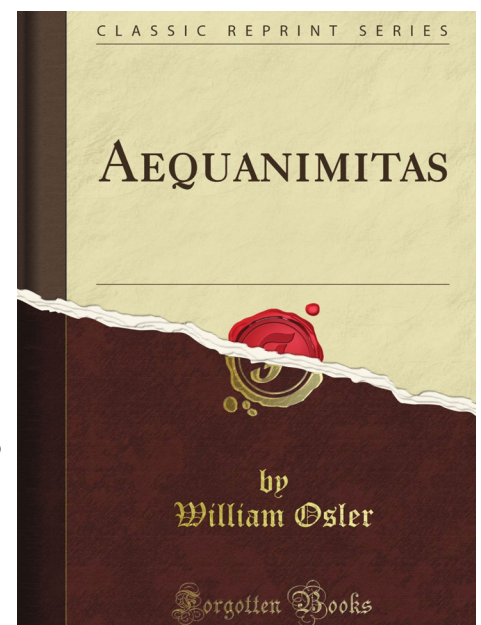


Studying to become a doctor is the hardest journey I’ve ever navigated, but there is wisdom to learn that doesn’t come from a book. A few weeks ago, I received an essay from Stuart Farber, M.D., my small group Physical Diagnosis course physician. The essay, titled “Aequanimitas” by William Osler, expounds upon the most important quality any physician can have. Put simply, that quality is imperturbability.

Osler asserts that although being a doctor can be simple and easy at times, it can also be exponentially more difficult to endure than any previous office we may have held. He further goes on to explain that a doctor must remain unmoved by the circumstances that surround him in order to keep the most objectively important needs of patients a top priority. In the event that 20 patients are rushed into the emergency room following a massive disaster, Osler implores doctors to keep a calm mind in the face of commotion.

It’s not only important to keep our composure in times of hardship as a doctor, but also to keep our cool as students, faculty members, and people alike. Whether we are dealing with difficult patients, bad grades, or just a couple of tough days, it behooves all of us to remain calm and see our situation for what it is. It’s easy to be stressed and let all of our emotions out on someone, but it is harder and better to observe, listen, and make clear-minded decisions.

We all go through hard times, and nobody expects us to be perfect. But the next time someone pokes fun at you, the next time you fail a test, the next time you get into an argument with your significant other, think about the type of person you want to be and act with aequanimitas.



# AMWA Hosts Self-Defense Course



The NSU DO chapter of the American Medical Women’s Association (AMWA) places a particular emphasis on planning and hosting events that empower women. On September 29, the chapter hosted a self-defense

course for members and nonmembers at the Team Crave studio.

“The two-hour class, taught by Sensei Yaniv Rosenberg, not only taught us invaluable techniques to defend ourselves, but provided stress relief from the long hours

spent studying. We bonded over our shared passion for women’s rights and debated who had the strongest right hook,” said OMS-II Jade Walter, president of the college’s AMWA chapter.

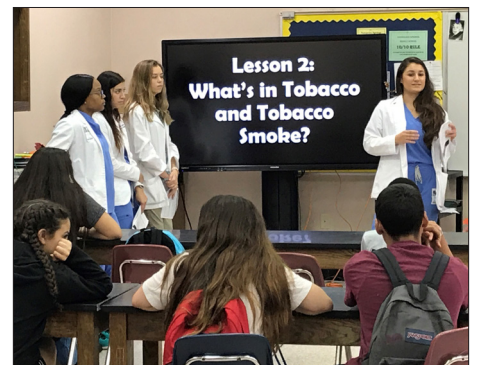
“Everyone who attended said they walked away feeling stronger, both physically and mentally,” she added. “With the constant stressors we face in medical school, it was very special to spend a few hours on a weekend being lifted up—both literally and figuratively—and inspired by other women.”



# Students Provide Tobacco Prevention Training

On November 2, NSU University School Upper School students spent the day with first-year KPCOM students at Sawgrass Springs Middle School in Coral Springs as part of an informative fellowship program created by the KPCOM in 2017. The fellowship allows NSU Upper School students to interact with various NSU Health Professions Division colleges, including the KPCOM.

During the event, the NSU students provided training related to the AHEC Tobacco Cessation Program. Both the KPCOM and the NSU high school students underwent complete program training on campus in preparation for their time with the middle school students.



# KPCOM Students Raise Money to Combat Hereditary Angioedema

By OMS-I Isabella Dreyfuss



Running has come full circle with me. As a former cross-country captain at Pine Crest High School, I have always been in love with 5Ks. Whether it be the little voice in the back of my head to constantly fight or the runner's high, it has been the best type of challenge, which I would never give up.

Yet, this particular 5K was for a completely different cause and related to the topic I was fortunate enough to research. NSU immunologist and allergist Shahnaz Fatteh, M.D., and I have been doing case reports on hereditary angioedema, or HAE, which is severe inflammation in the esophagus, face, and body in patients.

On October 20, we convinced the dermatology and internal medicine clubs to participate in the HAE in Motion 5K at Vista View Park. In fact, I used to coach Fatteh's daughter, as she was a cross-country runner as well.

As current first-year medical students, we must complete a large amount of community service hours. Yet, physically running my own race and doing something tangible to give back was incred-

ably empowering. I was able to interact with the patients affected by this disease, which gave me the motivation to run faster.

I believe we take daily things for granted, such as being able to sleep through the night without fear that our immune system might have a reaction and our esophagus could inflame, or simply being able to walk. Demonstrating this fight to our patients and myself, I am reminded why we endure so many medical school exams.

Even this year's Turkey Trot 5K had beneficiaries, including Holy Cross Hospital and the Memorial Cardiac and Vascular Institute. While running is a secondary method of showing support, raising awareness can mean much more to people. There are many ways to appreciate what we take for granted every day.

This has fueled my drive in medical school, where the kings and queens of complainers live—

myself included. Once we put our egos aside and challenge ourselves to have patience, the true depth of ability to endure the race of medical school can be released.

## COM Day on Capitol Hill

On September 27, osteopathic medical school deans, educators, and students, including several SGA leaders from the KPCOM, traveled to Washington, D.C., to participate in the American Association of Colleges of Osteopathic Medicine 2018 COM Day on Capitol Hill and Virtual Hill Day. COM Day is an annual advocacy event that provides a platform for representatives from the nation's osteopathic medical education community to meet with their policymakers and urge Congress to protect the federal programs that support the future physician workforce and, by extension, the health of patients across the nation.



# Just

By OMS-III Kaitlyn Steward

Third-year medical students are expected to transition from highlighting pages of first aid to seamlessly navigating the chief complaint and care of a real patient. Though we try our best, the knowledge gap between medical students and attendings is substantial. They will probably forget more about medicine than we have learned!

Working alongside an attending who has been practicing for more than 30 years can be intimidating. Because of this, I have found we often do not think highly of ourselves in the hierarchy of medical students, residents, fellows, and attendings.

We introduce ourselves to patients and try to make them feel welcomed. We then proceed with questions, hoping to acquire accurate information, which is then presented back to the attending. It almost seems robotic at times. Nonetheless, we continue. Like a toddler and a parent, we closely follow our physician a few paces behind and return to the patient's room. Sometimes, I can see confusion on the patient and the parents' faces upon return.

Although you introduce yourself as "student doctor {name}," various patients still think you are a full-fledged doctor and are concerned on why another physician is now coming in the room. "Is there something wrong?" they ask. I found that I used to answer the question with

unknowingly while I awaited what he was about to say.

"You are a medical student. Not JUST a medical student," he said. "I am trusting you to help take care of my child, because you were chosen to one day become a great doctor. The doctor to eventually

save a life or two. Not just the doctor who saves a life or two." He was right.

We are not just medical students. We are the medical students who were chosen amongst thousands of applicants. The medical students who will eventually save someone's friend or loved one. It is easy to forget how important and relevant we are when surrounded by individuals who wrote the books we studied, and who have surpassed many more obstacles than we have.

Although we have yet to attain the experiences and



a nonchalant, "I am just the medical student" to ease their worries. I am just the medical student.

I was caring for a young boy who came to the emergency department with his father during my pediatrics rotation. "I am just a medical student," I said to the father. He looked at me and laughed. My whole body froze

knowledge our attendings have accumulated over the years, we must remember we will get there with time. Although seemingly small, we are still making a difference in our patients' lives.

*"While it may seem small, the ripple effect of small things is extraordinary." -Matt Bevin, governor of the state of Kentucky*

# Mental Health Awareness Task Force Update

By OMS-III Michelle Yousefzadeh



Since its inception last year, the Mental Health Awareness Task Force has worked with students and faculty members to bring mental health discussions to the forefront. So far, the task force has successfully hosted a three-part speaker series with the Henderson Student Counseling Center, drawing an audience of more than 100 students, coordinated the annual OMS Day of Wellness, and planned several events throughout the year to highlight topics such as suicide, depression, and the art of listening.

This year, in addition to our speaker series and events, we aim to introduce a Student of Concern

Protocol that will facilitate connecting students at NSU-KPCOM who are in distress with providers at the Henderson Student Counseling Center. The protocol is novel in that it will enable a student to get in touch with Henderson to submit a wellness checkup for a fellow student who is thought to be in distress.

Currently, there is no formal pro-

cess for a student to refer another student of concern to mental health services. The goal of the protocol is to empower students to take action and speak up if they are concerned about a friend and classmate.

Through the protocol and events, we hope to provide tools and resources for students to recognize mental health concerns within and around them and provide support when we can. In doing so, we hope to build a team of future physicians that is informed and prepared to handle struggles of the mind, body, and spirit.

We thank the students and faculty members who have provided

us with positive feedback so far and will build on our momentum in the coming months. We would also like to thank our faculty advisor, Daniel Shaw, Ph.D., M.Ed., who has helped guide our efforts.

If you or anyone you know feel the need to speak with someone, please contact any of the people listed below.

**Daniel Shaw**  
Faculty Adviser

**Alixandria Fiore Pfeiffer**  
OMS4 Mental Health Chair

**Michelle Yousefzadeh**  
OMS3  
Mental Health Chair

**Mike Lai**  
OMS2  
Mental Health Chair

**Alex Mikulka**  
OMS1  
Mental Health Chair

**Brandon Hanai**  
SGA Executive



# KPCOM Students Win Big at CEME Research Poster Competition



On November 9, the college's Consortium for Excellence in Medical Education (CEME) held its 10th Annual Scientific Research Poster Competition in the NSU Don Taft University Center. A record number of individuals from various CEME affiliates located throughout Florida and the southeastern United States, as well as NSU-KPCOM students, submitted posters. The competition's growth was evident in the increase from 28 entries in 2012 to 191 in 2018.

All posters were judged based on the format and completeness of abstract, the overall poster appearance, and the entrant's oral presentation. Additionally, case presentations were judged on the originality, clinical relevance, and uniqueness of the case; the background, differential diagnosis, and clinical discussion of the case; whether the conclusions were supported by clinical rationale; and the value and clinical relevance of the case as stated by the entrant.

Experimental research presentations were judged on the originality, clinical relevance, and uniqueness of the research topic; whether the objectives, hypothesis, data analysis, and results were clear; whether the methods were clear and reproducible; and whether the conclusions were in accordance with the results.

Cash prizes of \$500, \$250, and \$100 were awarded to the first-, second-, and third-place winners in each category. The KPCOM swept the competition, winning five of the six presented awards.

(Note: KPCOM student winners are marked in **bold**.)

## EXPERIMENTAL RESEARCH

### First Place (KPCOM)

**"Get it Right the First Time, Measure Twice, or Third Time's a Charm? Single vs. Multiple Tissue Dielectric Constant Measurements"**

**Alexander T. Mikulka**, M.B.S., first-year student; **Don Woody**, M.B.S., first-year student; and Harvey N. Mayrovitz, Ph.D.

### Second Place (KPCOM)

**"External Demands of Manual Wheelchair Propulsion"**

**Barbara Dominguez**, first-year student, and Rachel Cowan, Ph.D.

### Third Place (KPCOM)

**"An Overview of STD Rates in Broward County's Geriatric Population"**

**Milee Patel**, third-year student; **John Wang**, third-year student; and Naushira Pandya, M.D., CMD

## CASE STUDY RESEARCH

### First Place (KPCOM)

**"Cauda Equina Syndrome: A Tale of the Prostate"**

**Annabelle Alvarez**, M.P.H., fourth-year student, and Mokhtar Radwan, D.O., PGY-1

### Second Place (KPCOM)

**"Loss of CDKN1C in a Recurrent Atypical Teratoid/Rhabdoid Tumor"**

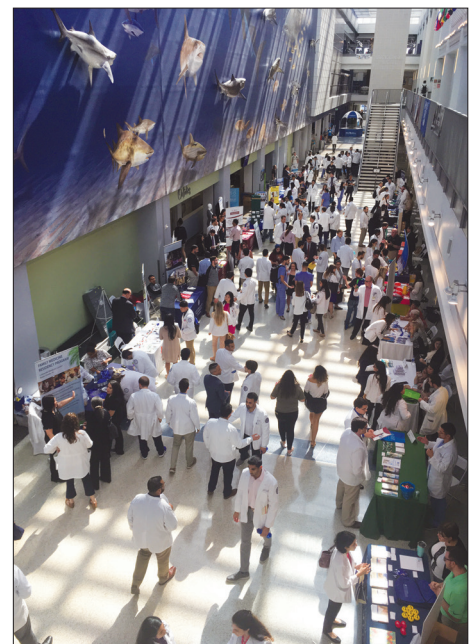
**Dustin Tran**, second-year student; Carl Koschmann, M.D.; Sandra Camelo-Piragua, M.D.; and Rajen Mody, M.D.

### Third Place

### (Largo Medical Center Dermatology Residency Program)

**"A Rare Case of Oral Mucosal Amelanotic Melanoma in a 77-Year-Old Immunocompromised Male"**

Hassie Cooper, D.O., PGY-II; Jason Solway, D.O; PGY-IV; **Melanie Wolf**, fourth-year student; and Richard Miller, D.O.





# More at Stake Than Steak

By OMS-II Zachary Burns



**Dear reader:** This poem depicts modern livestock production in an honest way. I appreciate your reading it and invite any questions or comments by emailing me at [zb111@mynsu.nova.edu](mailto:zb111@mynsu.nova.edu). On the day we received our white coats, we swore to “do no harm.” A thoughtful D.O. can apply this tenet to human and non-human beings alike.

*She said when I'm on  
my deathbed  
It won't console me  
to know that  
Every time I had a primal  
inclination, I acted  
I won't say "man how glad I am  
for all the burgers that I  
threw back, cause  
Life wouldn't be nearly as  
fulfilling had I skipped that."  
She said when my  
time comes  
I'd rather know I minimized the  
harm I did to other beings*

*I can do that through  
my eating  
I can be an herbivore and find  
life just as savory  
The modern livestock industry is  
nothing short of slavery  
"And if you deem it your right  
to consume all that  
you crave," she said  
"There's no time to reason with  
you. I've got lives to save."  
Behold the factory farm  
A horror movie set in real life  
A windowless insane asylum  
void of days and nights  
Just take the sound bite  
The chicken shrieks could make  
your wine glass crumble  
Birds collapsing, getting  
trampled in their filth while  
engines rumble  
Thousand cows in separate  
holding cells too small to  
turn around in*

*Hooves on pavement, deep  
derangement, petrified of  
their surroundings  
Dairy cows like sex slaves  
Made to lactate till they drop  
Oh, she stopped? Here's  
an injection  
Fifth time pregnant in this lot  
Fifth time harboring and  
pushing out a calf  
To have him stolen  
Led away to have his rectum  
probed with 20 volts  
per morning  
Need that semen to  
impregnate other  
unsuspecting females  
Let's be honest  
with ourselves  
Is this not blatant rape  
for retail?  
We can say they're  
only animals  
Simple, not even self-aware  
Indifferent to the  
treatment we call fair  
But it's clear  
There's more at  
stake than steak  
Bacon and chicken parm  
Each bite is tainted with the  
torment of that factory farm.*

# EMERGENCY

Ambulance  
Only

## Life on the Other Side

*By OMS-II Evelina Arzanova*

ENTER THROUGH  
Waiting Room  
←

AMBULANCE / EMERGENCY  
Assistance Only

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*“I am watching people attempt to sedate and intubate, and I hear a call for the crash cart and a defibrillator to room 31. My heart sinks again, and my mother breaks down in tears as she watches the defibrillator being carried into the room.” –Evelina Arzanova*

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A 77-year-old female with a history of hypertension, diabetes, Parkinson’s disease, and anemia presents to the emergency room with a chief complaint of abdominal pain for the past four days. Patient describes the pain as indigestion that radiates to the lower-right quadrant. Pepto-Bismol seems to relieve the pain, as well as sitting up for the past four days.

The physical exam demonstrated 2+ pitting edemas bilaterally, but she is not in any distress and states that her pain is a 2 on a scale of 10 right now. The admitting resident listens to her lungs briefly and orders an ECG along with an abdominal ultrasound. One hour later, exam results are unremarkable. The suspicion is a gastric ulcer, and the patient is given Maalox.

The patient is my grandmother, and I just brought her to the hospital after competing six final exams and procedures. I am still exhausted, standing in my scrubs. However, I’m relieved to know my grandmother is safe and is not suffering from anything potentially life-threatening. As I leave the hospital at the request of my mother, who sees exhaustion on my face, I receive an alarming call. “Grandma is shaking and

sweating, the pain is back and it is very severe, she is begging for food, and they are trying to give her morphine for the pain. What should we do?”

As my heart sinks to my feet, I rush back to hospital, praying it is not what I think it is. I recommend for them to decline morphine, only because I know that in the past, my grandmother has not tolerated morphine well. Because she Parkinson’s, she becomes extremely sedated and immobile, so we will never know how she is really feeling.

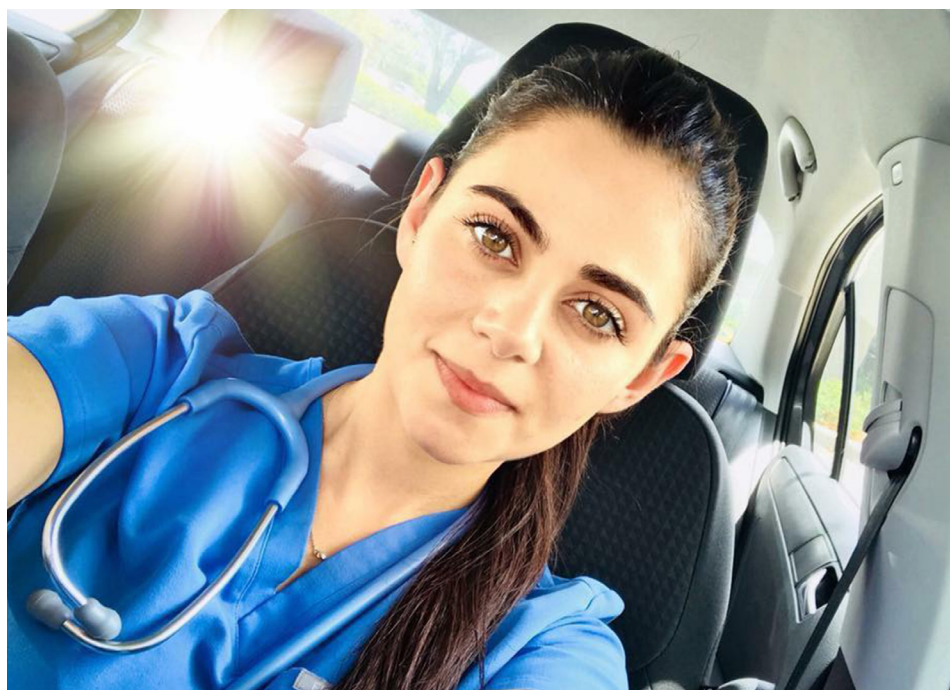
I return to the hospital. Everything is moving quickly. The feeling is very surreal. People are rushing into the room. The ECG is showing normal heart function,

but the patient is shaking, sweating, and begging for food—a hunger like I have never seen before.

An interventional cardiologist performs an echocardiogram, but he can’t see anything. A third ECG and blood results finally confirm a myocardial infarction, which is what I truly feared most.

I had to remain composed for my mother and aunt, who are in total distress. I am watching people attempt to sedate and intubate, and I hear a call for the crash cart and a defibrillator to room 31. My heart sinks again and my mother breaks down in tears as she watches the defibrillator being carried into the room.

My grandmother is rushed to the catheterization lab, where



her left coronary artery is found to have two 95 percent occlusions. Based on her history and comorbidities, and because of the knowledge I had gained as a medical student, I was shaking on the inside but had to stay composed. Those 45 minutes felt like a lifetime. Finally, the cardiologist came out and exclaimed, "The procedure was a success. She is going to be okay!"

However, what I learned over the next 68 days was that an MI is not always the worst thing that can happen. We were hoping for a speedy recovery while my grandmother remained in the CV/ICU.

My grandmother speaks Russian, not English, so one of our family members would stay at the hospital with her 24 hours a day and take turns rotating. She is a complicated patient with a handful of pills she takes daily, so it was safer to be there with her. Although sleeping on a chair after six exams in a glass aquarium of a room is not ideal, my heart was at peace knowing I was with her.

Soon, things took a turn for the worse. Three days later, she developed pneumonia and quickly became unresponsive. The nurse insisted my grandmother had been sedated at night to help her rest, but 19 hours later, she was still unresponsive. We were alarmed, but the nurse continued to blame it on her poor kidney function.

She soon woke up, but only by opening her eyes. Unresponsive, she would not follow any commands. She could not move and was trapped in her body. After 24 hours, and with us insisting this was not normal, her kidney function was measured, and we were told her kidneys failed. She was now suffering from septic shock.

Dialysis was detrimental in saving her life, and 18 bags of fluid later, she began to attempt to speak. I'm not exactly sure how long the staff would have waited and what the consequenc-

es would have been if we didn't insist on reevaluating her.

Ten days later, still at the CV/ICU, she almost lost her life again. I received a call at 4:00 a.m. from my mother who was spending the night at the hospital. Her voice was shaking from fear, asking me to get someone into the CV/ICU, because for the past hour, my grandmother was having trouble breathing.

At 3:00 a.m., while on a nasal cannula, she began to have trouble breathing, but her O2 Sat levels were decent. The nurse



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*“I urge my fellow classmates to be the difference, to take pride in being different, to be an advocate, the voice that your patient needs, and to attempt to perfect the art of being a great physician with just a stethoscope, your hands, and your knowledge.”*

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didn't think it was important to call the respiratory therapist since the computer readings indicated everything was okay, so why would she bother listening to her lungs, right? In less than an hour, my grandmother began to turn cyanotic and was now wheezing.

As a second-year student, I rarely get eight hours of sleep, so waking up in the middle of the night is not easy. But, trust me, nothing wakes you up better than a call about your loved one in the ICU having trouble breathing. In a cold sweat, I began to call the hospital and ask for someone—anyone—in charge.

I used my “medical student card” and all other potentially credible statements to raise awareness. Thankfully, a respiratory team soon entered the room and discovered that the fluid in her lungs had increased significantly to the point where she could have died once again.

Over the course of the next month, she began to get better, and we were soon on our way to rehab. She is now an MI survivor who also requires dialysis, so we never leave her alone.

Finally, my grandmother is placed in a nursing home—our last stop before potentially going home, but my mother notices that

my grandmother is just not herself again. We ask the nursing home staff to take her temperature, but thermometers in today's America are apparently a rarity. Consequently, after an entire day of not being able to measure her fever and finding out the nurse was adding Tylenol into my grandmothers' daily medication regiment, we realized she was actually febrile.

We rushed her back to the ER, where she was diagnosed with a urinary tract infection and C. Diff Colitis. Round two. Although, my grandmother is still in the hospital today fighting her illnesses, we remain hopeful that things will take a turn for the best.

What I want to convey through this lengthy story is that medicine is changing. During the 68 days my family and I have been going through this, I have seen how doctors spend less than 5 minutes in the room and rarely want to answer questions. Additionally, nurses are hesitant to call the doctor, even in extreme situations.

No one uses a stethoscope, and everyone simply stands by the door and looks at the monitors as if the patient's bed is wrapped in caution tape. I now know that an MI is not the worst thing that can happen. I understand how quickly and easily

hospital infections such as pneumonia spread, the importance of keeping things sterile, washing hands, and switching gloves and catheters often.

I realize how important it is to be a hands-on physician and listen to family members' concerns. This experience is humbling, and I recognize the gaps in the health care that is provided to our patients. I hope that in the future, I will always remind myself of these 68 days and be an advocate for my patients.

Most of the time, people do not die from a heart attack. They die from all the complications that follow it and from lack of sterilization, attention, and medical professionals' numbness to situations that develop over the years.

I am glad I was faced with this so early in my career and can break the cycle of building bad habits and being a poor example. I hope to be the difference I wish my grandmother had in the lives of my future patients.

I urge my fellow classmates to be the difference, to take pride in being different, to be an advocate, the voice that your patient needs, and to attempt to perfect the art of being a great physician with just a stethoscope, your hands, and your knowledge.

# **SUPERSTAR: Alixandria Fiore Pfeiffer**

## **Named KPCOM Student D.O. of the Year**

Fourth-year student Alixandria Fiore Pfeiffer was selected as the KPCOM's 2018-2019 Student D.O. of the Year by her peers. Because of Pfeiffer's win, her award application was submitted to the Council of Osteopathic Student Government Presidents National Student D.O. of the Year award competition, where she earned second-place honors in a competitive field of 41 applicants.

Pfeiffer was selected for the KPCOM honor based on her commitment to community service, embodiment of the D.O. philosophy, and professionalism, as well as her academic and leadership success. Below are selected portions of her submitted nomination.

Alixandria's selfless attitude and unwavering commitment to NSU's Core Value of community is well-known to her fellow students. She has taken the opportunity to volunteer in Jamaica and Spain on medical outreach trips and has continued to answer the call for help domestically, aiding those affected by Hurricane Katrina and an unexpected flood in Pennsylvania. This commitment to community service culminated in her being awarded a Gold Touch Award for exceeding 100 hours of service during an academic year.

Alixandria is continually working toward building her craft

while being faithful to the osteopathic philosophy. Importantly, she recognizes the vital role mental health and a holistic lens, which exposes and treats mind, body, and spirit, play in treating her patients. To support this belief, she applied for and earned the position of national mental health liaison.



Among her responsibilities was the development of an academic environment that respects student wellness and alleviates mental health concerns at a time when it is so desperately needed. She has worked regularly alongside her peers and behind the scenes collaborating with NSU-KPCOM ad-

ministration to adapt our academic environment to be more conducive to learning and mental health.

This has allowed her to have an indirect impact on student wellness. However, she did not stop there. In a direct manner, she has given back to her first- and second-year colleagues through mentorship and tutoring.

After completing almost four years at an osteopathic medical school, most students are committed to community service and embody the principles of an osteopathic physician in their own ways. However, there are but a few who use their beliefs in those principles to fuel a raw and unique dedication for their profession.

For example, in July 2018, Alixandria was invited to be part of the National Osteopathic Student Caucus in Chicago, Illinois. In one day, she had the opportunity to work alongside the new generation of osteopathic physicians to help shape the profession's future. She has also taken the time to attend the Osteopathic Medical Education Conference in San Diego, California, as well as two consecutive D.O. Days on the Hill in Washington, D.C.

In her four years as an NSU-KPCOM student, Alixandria has excelled beyond the title of "medical student" and has become a role model for our community and her fellow classmates.

# Finding the Balance

By OMS-III Ravin Patel

On any airline flight you take, you classically hear, “In case of a loss of cabin pressure, oxygen masks above your seat will deploy. Please place your mask first and then assist your child or other passengers.”

They say if you are unable to oxygenate yourself and eventually become hypoxic, you are no good in assisting your fellow passengers. Why is it, then, that we do not apply this simple principle to medical students—our future health care professionals? If we are unable to take care of ourselves, we will not be able to adequately take care of our future patients.

Living a healthy lifestyle comes down to simple changes, such as making time for physical activity and making smart food choices. Time is the limiting factor for these entities, so I want to provide four simple tips to help ensure your success in maintaining a healthy lifestyle.

## MEAL PREPPING

This is one of the biggest ways to save time and avoid eating “bad foods.” Oftentimes, we make impulsive decisions to binge on fast food when we do not have meals readily available or are unsure of what to eat. Dedicate time every Sunday to buying groceries and

cooking a certain meal, and a lot of it. Then, each night before going to bed, make containers to take whether going to the library or to the hospital. This way, you know the content of the food you are consuming, and it’s one less decision we have to make in our hectic schedules.

## ALLOW YOURSELF BREAKS

“It is OKAY to take a BREAK!” The biggest feeling I had at the beginning of medical school was

gym.” There are so many ways to be active aside from going to a gym. Change up your commute and walk or ride your bike to school. Join events, such as intramural sports, which meet a few times a week. Involving your friends in your new activities is a great way to keep yourself motivated. Whether it’s a walk around your neighborhood with your dog or meeting up with some friends to play sports, get moving.

## START TODAY

“Once I finish medical school, I’ll start living healthy again.” This is something I hear all too often. We all have a fallacy that life will eventually get easier. While the stresses of board exams and residency placement will eventually fade, they will be replaced with new stresses. Therefore, it is important to establish healthy habits now



guilt. I thought if I was working out or enjoying myself, I was losing valuable study time. However, I realized being active for 30 minutes or an hour helped fuel my study sessions. Look at your time being active as a mental health boost, not time wasted.

## ACTIVITY

“But I don’t like going to the

that you can implement as you progress in your medical journey.

Pursuing medicine should not come at the detriment of one’s own health and well-being. We are in command of our health, regardless of the time constraints medical school places on us. If this means you have to give up your 30 minutes of Netflix, that’s okay. Netflix isn’t going anywhere.

# KPCOM Student Achievements

**Sheikh Ali**, class of 2020, served as first author of the article “The Safety of Bevacizumab Administered Shortly After Laser Interstitial Thermal Therapy in Glioblastoma: A Case Series,” which was published in the September issue of *World Neurosurgery*.

Second-year students **Brett Brazen**, **Alia Elnaji**, **Jessica Forbes**, **Kacie Johnston**, **Jennifer Maldonado**, and **Jessica Neugebauer** made a presentation to Cooper City High school students on a variety of dermatologic topics such as acne, eczema, psoriasis, skin cancer, and proper skin protection from the sun. The KPCOM students, along with members from the college’s Student Dermatological Association, will be returning to the school this spring to make a similar presentation.

First-year student **Barbara Dominguez** received a first-place award for her research project “External Demands of Manual Wheelchair Propulsion” at the Colon and Rectal Symposium. The conference, held September 8 at the Signature Grand in Davie, Florida, was hosted by Westside Regional Medical Center.

First-year student **Sean Friefeld**, second-year student **Regina Zambrano**, and third-year student **Adedeji Olusanya** will be inducted into Omega Beta Iota—the National Osteopathic

Political Action Honor Society—at a ceremony being held March 4 during D.O. Day on Capitol Hill in Washington, D.C.

Class of 2019 students **Parth S. Gandhi** and **Avinash Ram** received first-place honors for their poster “Lost in the Forest: A Rare Case of Forestier Disease - Diffuse Idiopathic Skeletal Hyperostosis (D.I.S.H)” at the Emergency Medicine Residents’ Association’s inaugural Case-Con Poster Competition. The event was held on October 1 during the American College of Emergency Physicians national conference in San Diego, California.

**Christopher Larrimore**, M.Sc., class of 2020, served as lead author of the article “Understanding Myalgic Encephalomyelitis/Chronic Fatigue Syndrome and the Emerging Osteopathic Approach: A Narrative Review,” which will be published in an upcoming issue of the *Journal of the American Osteopathic Association*. Larrimore coauthored the article with second-year students **George Guerrero**, M.P.H., **AnnMarie Jaghab**, **Amanda Ramnot**, **Sofia Sarduy**, and **Peter Troccoli**, with assistance from his research mentor, Alison Bested, M.D. Additionally, Larrimore’s article “Dyshidrotic Eczema in a Pediatric Patient: A Case Report” is being published in the American College of Osteopathic Pediatricians *eJournal*.

Rogerio Faillace, M.D., served as Larrimore’s research mentor on this project.

Fourth-year student **Andrew Lelechuk**, M.S., coauthored the articles “A Unique Case of Metastatic Cervix Squamous Cell Carcinoma Presenting as a Large Bowel Obstruction” and “Does Peritoneal Irrigation Reduce Postoperative Intra-Abdominal Abscess Rates After Laparoscopic Appendectomy?” which were accepted for presentation at the Society of American Gastrointestinal and Endoscopic Surgeons Conference in April 2019 in Baltimore, Maryland.

Second-years students **Manonmani Murugappan** and **Regina Zambrano** were big winners at the Council of Osteopathic Student Government Presidents Research Symposium held January 18 at the University of North Texas Health Science Center, claiming first-place honors in two of the three award categories. Murugappan was named the Overall and Clinical/Case Study winner for her project “Validation of Bayesian Adaptive Quick Contrast Sensitivity Function Tests in Adults Without Ocular Disease,” while Zambrano earned top honors in the Basic Science Research category for her project “Modeling Melanoma-Induced Monocyte Conversion to Myeloid Derived Suppressor Cells to Identify Novel Immunotherapies.”



Third-year student **Rebecca Nosal** and second-year student **Eduardo Diaz** will be presenting their poster “Effects of Methionine Deprivation on the Growth of Colon Cancer Cells and Baby Hamster Kidney Cells” at the American College of Physicians Internal Medicine Meeting in Philadelphia, Pennsylvania, in April. They will also be presenting “Methionine Deprivation Induced Effects on the Growth of PC3 Prostate Cancer Cells” in April at the Experimental Biology 2019 meeting hosted by the American Society for Biochemistry and Molecular Biology in Orlando, Florida. Kallidaikurichi Venkatachalam, Ph.D., professor of biochemistry in the College of Medical Sciences, guided both projects.

Third-year students **Milee Patel** and **John Wang** received a first-place award for their research project “An Overview of STD Rates in Broward County’s Geriatrics Population.” They presented their research at the Best Care Practices in the Post-Acute and Long-Term Care Continuum conference held October 24–27 in Lake Buena Vista, Florida.

Class of 2020 students **Aline Pereira**, M.B.A., **George Ettel**, M.M.Sc., and **Alexander Hardy** received a first-place award for their research project “HIT or Miss: Health Information Resources Use and Immunization Decision-Making Among Caretakers

of Children.” They presented their research at the Colon and Rectal Symposium held September 8 in Davie, Florida, as well as at the Academy Health Annual Research Meeting held June 24–26 in Seattle, Washington.

Fourth-year students **Veena Varki**, M.S., M.P.H., and **Maria Rathore** received a second-place award for their case study “Everything Is Fine and Dandy: A Rare Case Presentation of Asymptomatic Dandy Walker Malformation in an Adult.” Varki presented the research project at the Florida Chapter American College of Physician 2018 Annual Scientific Meeting poster competition held September 8 in Tampa Bay.

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