Academy Reps Pleased to Find No Surprises in GME Agreement

The American Academy of Osteopathy sent a delegation of three to Chicago on May 4 to review a memorandum of understanding (MoU) and a letter of clarification that outline the terms that have been negotiated so far for merging AOA-approved internship, residency, and graduate fellowship programs into the accreditation system of the Accreditation Council on Graduate Medical Education (ACGME).

The AAO delegation joined representatives from 12 other osteopathic specialty colleges, two dozen state osteopathic medical associations, student groups and other stakeholders in osteopathic GME at a seminar that AOA Executive Director and Chief Executive Officer Adrienne White-Faines, MPA, said was called to “clarify the vision” for the single GME pathway and to “demystify” the MoU and the letter of clarification.

Since the American Osteopathic Association, the American Association of Colleges of Osteopathic Medicine (AACOM) and the ACGME announced that they had reached an agreement on Feb. 26 to create a single GME pathway, the AOA and AACOM had been under pressure to make the MoU and accompanying documents public. In fact, in endorsing the negotiations in a March 28 letter, the Academy encouraged the AOA and AACOM to share the documents with all stakeholders in both the osteopathic and allopathic medical professions.

AAO President-elect Doris B. Newman, DO, FAAO, was pleased to report back to the Academy’s Executive Committee that she found no surprises in the MoU and letter of clarification. “AOA leaders represented the MoU to the Academy and other stakeholders in a manner that was clear and transparent,” she said.

Message From the President: Academy Sponsors TV Health Segment on OMM

If you are in New York, New Jersey or Connecticut and you tuned in to WCBS-TV a half-hour before the Byron Nelson Championship golf tournament on Sunday, May 18, you are likely to have seen osteopathic manipulative medicine featured in a two-minute segment of “American Health Front!” The segment was sponsored by the American Academy of Osteopathy, and it featured me; my wife, Margret Klein-Lossing, OA; and one of my patients.

This segment of “American Health Front!” hits key points that the Academy believes the public needs to know about DOs and OMM. For example, the segment describes DOs as “among the best-trained physicians in American medicine.”

To prepare for the May 4 seminar, AAO Trustee Laura E. Griffin, DO, FAAO (left), and AAO President-elect Doris B. Newman, DO, FAAO (right), study the memorandum of understanding and the letter of clarification for the proposed single GME system. Seminar participants were obligated to return the confidential documents after the seminar.

Continued on Page 2

Continued on Page 5
groups very well since February," noted Dr. Newman, who led the Academy’s delegation to the seminar. “So we were well
versed in the particulars. It helped the groups feel as if the AOA and AACOM weren’t hiding anything.”

“From my perspective, nothing earth-shattering new was announced at the seminar,” agreed AAO Trustee Laura E. Griffin,
DO, FAAO, who accompanied Dr. Newman to the seminar, as did AAO Executive Director Michael E. Fitzgerald.

In assessing the MoU and the letter of clarification, the Academy’s representatives concluded that those documents addressed
the provisions that the Academy outlined in its March 28 letter as being critical to the AAO’s support of a single GME system. On
the other hand, most of the additional measures the Academy recommended remained unresolved, such as ensuring
that no osteopathic-focused GME residency would be closed without appropriate due process involving both the AOA and
AACOM.

Addressing concerns

Like the Academy, other specialty colleges were concerned that the MoU does not automatically recognize AOA board
certification as equivalent to board certification through the American Board of Medical Specialties for the purpose of
qualifying residency directors in all ACGME-accredited residencies.

“In the MoU, AOA-boarded program directors … are for some reason a priori second-class citizens,” observed Steve Buchanan,
DO, the executive vice president of the American College of Osteopathic Obstetricians and Gynecologists.

In responding to this concern, AOA Trustee and former Academy President Boyd R. Buser, DO, noted that the ACGME’s
residency review committees (RRCs), which write the standards for residencies, have the authority to accept AOA board
certification for program directors on a case-by-case basis. In a similar way, the AOA Program and Trainee Review Council
currently determines on a case-by-case basis whether DOs and MDs who are ABMS board certified can serve as program
directors of AOA-approved residencies, explained Dr. Buser, who has been leading the AOA in its negotiations with the
ACGME and AACOM.

Each RRC would have the authority to modify its standards to replace case-by-case approval with blanket approval of AOA
board certification. As a consequence, the ACGME’s proposed RRC for neuromusculoskeletal medicine and osteopathic
manipulative medicine (NMM/OMM) would have the authority to specify in its standards that program directors be AOA
board certified, and RRCs for other specialties could modify their standards to accept both ABMS and AOA board certification
for program directors.

“What happens if some RRCs exercise their authority to approve program directors for quality programs and some don’t?”
asked Dr. Buser, the Academy’s 1995-96 president. “What will be our remedies for that?”

In answering that question, Dr. Buser outlined a number of safeguards in the MoU:

• The AOA and AACOM would each nominate four members to serve on the ACGME Board of Directors after the
  ACGME modifies its bylaws to accommodate this measure. This is twice the number of osteopathic representatives offered
  before the AOA and AACOM used their negotiation power to broker stronger osteopathic representation on the ACGME
  board.

• The ACGME would establish the Osteopathic Principles Committee to set standards related to the osteopathic content
  and trainee prerequisites across all specialties with osteopathic-focused residencies. This committee would consist of 13
  members from the osteopathic medical profession and two from the ACGME.

• The ACGME would establish an RRC specifically to set the standards for NMM/OMM residencies. This RRC would
  consist of five members of the osteopathic medical profession and one from the ACGME.

• The osteopathic medical profession would have voting members on all other RRCs in specialties with osteopathic-focused
  residencies. The number of members in each RRC would vary, depending on the number of trainees in osteopathic-
  focused residencies in each specialty.

• The ACGME’s existing RRC Monitoring Committee is responsible for reviewing the actions of the RRCs and ensuring
  that standards and decisions are relatively consistent across RRCs. Both the AOA and AACOM would be represented on
  the RRC Monitoring Committee.

Continued on Page 3
No Surprises in GME Agreement (continued from Page 2)

- A joint task force would oversee the transition of AOA-approved residencies into the ACGME system.
- The ACGME would hire a senior vice president from the osteopathic medical profession to oversee the osteopathic-focused residency programs.

Just taking first steps

Throughout the seminar, AOA, AACOM and ACGME presenters noted that the MoU and the letter of clarification are just the starting point in establishing the single GME system.

“This is just the end of the beginning,” AOA President-elect Robert S. Juhasz, DO, stressed. “Success of programs like this does not happen automatically.”

“Not all questions will be answered in two documents,” noted AOA General Counsel Joshua L. Prober, JD, as he briefed the seminar attendees on the key provisions of the MoU and letter of clarification. “We wanted [the two documents] to provide a broad infrastructure for the accreditation process, as well as identify a timetable. We wanted to identify how the [three] organizations would come together and work together.”

Prober described the MoU as a “tricky agreement to pull together.” “We have two functional GME systems that we are trying to pull together without interrupting their current functions,” he explained.

Another main concern about the MoU raised by the audience was that AOA-approved GME programs would enter the ACGME system with pre-accreditation status instead of full accreditation.

“Why are our programs not considered equal?” asked Victoria Shuman, DO, the associate dean for GME at the West Virginia School of Osteopathic Medicine in Lewisburg. “The biggest why is: ‘Why do our osteopathic programs have to apply for accreditation?’”

Echoing Dr. Juhasz’s and Prober’s comments, ACGME Chief Executive Officer Thomas J. Nasca, MD, MACP, noted, “We live in a world of trying to pull together two different systems…. We don’t believe we are asking you to do anything an allopathic program would not do…. Is this the ideal way? Probably not. But this is the only way we can do this.”

The chairman of the ACGME Board of Directors, Timothy M. Goldfarb, MSA, described the single GME system as a “complex dance” based on trust. “We will earn your trust,” promised Goldfarb, whose first job in his youth was at an AOA-accredited health care facility, the former Tucson (Ariz.) General Hospital. “We will earn your trust with actions, by being fair, and by being honest even when we disagree.”

“Look at this as the first step in a long journey,” Dr. Nasca advised. “We have to take steps together. The teams that have worked [on the MoU] have taken gradually larger steps until they built trust. We need to expand the circle of trust.”

The Academy’s delegation sensed that the May 4 seminar made a significant contribution to building trust. “Hearing from the ACGME leaders went a long way toward expressing the trust and positive working relationship among the AOA, AACOM and the ACGME that the AOA leaders have been trying to convey to the profession’s other GME stakeholders while attending meetings like the Academy’s Convocation in March,” Dr. Newman observed.

Looking to opportunities

The seminar presenters stressed that the benefits of a single GME system would be “bidirectional.”

Continued on Page 4
No Surprises in GME Agreement (continued from Page 3)

“You do not know how powerful [DOs] are,” noted ACGME board member Paul Grundy, MD, MPH. Dr Grundy, who is the director of healthcare information at the IBM Industry Academy, pointed to the lessons he learned his first summer in medical school, when he shadowed a graduate of the Michigan State University College of Osteopathic Medicine. “I learned that you don't do an X-ray of a knee and treat the knee [before] you put your hand on the patient. You look in the whites of the patient’s eyes and pay attention to the patient. I never forgot that lesson…. The strength that you bring—the strength that collectively we need—is the strength that I learned that summer.”

Dr. Grundy added that when the ACGME board began to discuss a single GME system, he read osteopathic principles out loud to the board. “These are the principles that all of us should have. That is the strength that you bring to all of us,” said Dr. Grundy, who is the president of the Patient-Centered Primary Care Collaborative and a member of the National Academies’ Institute of Medicine.

Also pointing out ways that the ACGME could benefit from the osteopathic medical profession was Regina Benjamin, MD, MBA, the surgeon general of the U.S. Public Health Service from 2009 to 2013. “Health does not occur in doctors’ offices alone. It occurs in everything [patients] do,” said Dr. Benjamin, who nearly went to osteopathic medical school. “Osteopathic physicians have always understood that…. We need to change to wellness intervention from treating disease.”

“Not only will [the single pathway] give DOs access to ACGME programs, but likewise, there are provisions that would allow MDs to enter programs that are currently solely accredited by the AOA,” Dr. Buser noted.

AACOM President and Chief Executive Officer Stephen C. Shannon, DO, MPH, and the AOA’s Prober noted that one of the major benefits of the proposed single GME pathway is that osteopathic principles and practice would be codified in ACGME standards.

Among other benefits envisioned by seminar presenters are the following:

• DO graduates would still be able to train in the full spectrum of specialties.

• Osteopathic residency programs that are in danger of closing because they have too many unfilled residency slots may be preserved by filling empty slots with MD residents.

• DO residents would be represented for the first time by the osteopathic medical profession on ACGME governing bodies.

• DOs might find it easier to compete with MDs for employment after their GME training.

• More countries might grant U.S.-trained DOs full practice rights.

• By working together, the AOA, AACOM and the ACGME are likely to have more influence on federal GME policy than they currently have working independently.

In kicking off the seminar, AOA President Norman E. Vinn, DO, characterized the proposed GME pathway as an opportunity to reinvent the osteopathic medical profession. Noting that the profession is in “apocalyptic times,” Dr. Vinn proposed, “The future is a moving paradigm. It will not be static…. We have to look at strategies that strengthen the whole profession.”

Three hours later, Dr. Vinn used his closing remarks to compare the single GME pathway with other historic events in osteopathic medicine. In doing so, he singled out the reopening of California to licensing DOs in the mid-1970s, recalling the battles that he and other California DOs fought to obtain hospital privileges.

“We can follow the same pattern we have for 140 years,” Dr Vinn said. “We can take the bumps and warts and move ahead like we always have, and we will come out prospering and distinguishing ourselves.”

Related Information

• “Summary of May 4 Progress Update Seminar” by AOA President Norman E. Vinn, DO

• “The Allopathic and Osteopathic Worlds: Aligning Our Training to Meet Our Patients’ Needs” in the May-June issue of the Annuals of Family Medicine

• “Academy Supports AOA, AACOM Efforts to Negotiate Single GME System” on Page 1 of the April issue of AAO Member News
President’s Message (continued from Page 1)

magazine today.” And it quotes me as saying, “As an osteopathic physician, I focus on finding dysfunction that impedes the body’s self-healing system from working properly. This integrative method is one of the safest approaches to medicine today.”

Because the Academy sponsored and helped draft this segment, it emphasizes OMM. It includes footage of me providing osteopathic manipulative treatment. In explaining why patients would want DOs to treat them with OMM, I make such statements as the following:

• “Using OMM, DOs focus on correcting the underlying problems that are causing the main concern.”

• “Using OMM, DOs can reduce reliance on medications and surgery, and they can produce positive results in one to three visits.”

At the end of the segment, viewers who would like to receive OMM are directed to a new Academy URL, www.FindOMM.org, which takes viewers to the Academy’s “Find a Physician” landing page.

Produced by Media Medical Group, “American Health Front!” has become a leading independent medical news television program. Episodes of the program run on NBC, CBS, ABC, and Fox stations around the country. The episode with the Academy’s segment aired on New York City’s CBS station from 2:30 p.m. to 3 p.m.

The Academy’s goals in sponsoring the segment go beyond educating patients in and around New York City. As the sponsor, the Academy obtains the rights to use the segment and all the raw footage for whatever purposes the AAO sees fit. Our plans include posting the segment on the Academy’s website at www.academyofosteopathy.org so that patients around the country can access it and so that Academy members can download it or link to it on their practice websites.

The Academy will notify all its members when the segment is posted to our website. In the meantime, AAO members can read the segment’s script.

More on the PR front

The May 18 segment of “American Health Front!” augments other recent public relations victories orchestrated by Academy members.

Lisa Ann DeStefano, DO, was interviewed by Prevention magazine for a May article titled “9 Highly Effective Treatments for Lower-Back Pain.” In the article, Dr. DeStefano is identified “as an associate professor at Michigan State University College of Osteopathic Medicine in East Lansing.”

Dr. DeStefano reports that she has been interviewed for Vogue’s May issue and for a future issue of Redbook. “I also taped a couple segments of a new reality series that will air in the fall on National Geographic called ‘You Can’t Lick Your Elbow,’” she noted.

Lilia Gorodinsky, DO, appeared on “The Dr. Oz Show” in a segment on back pain that aired Dec. 5, 2013. During the segment, Dr. Gorodinsky explained what osteopathic manipulative treatment is, and she treated a guest on the show, describing the guest’s musculoskeletal problems and demonstrating the care she would provide for those problems.

AAO active on advocacy front

In the 10 weeks since Convocation, the Academy has been particularly active in advancing two initiatives through the American Osteopathic Association.

The Academy’s Board of Trustees has submitted a resolution on patient safety for the AOA House of Delegates to consider during its July 18-20 annual meeting in Chicago. The premise of this resolution is that because OMM is safe, it should be used for patients with pain and other appropriate conditions before less-safe approaches are tried.

In addition, the Academy has been supporting the negotiations the AOA and the American Association of the Colleges of Osteopathic Medicine (AACOM) have been engaged in with the Accreditation Council on Graduate Medical Education.

Continued on Page 6
President’s Message (continued from Page 5)

(ACGME). The three groups have executed a memorandum of understanding (MoU) to place all allopathic and osteopathic graduate medical education into one GME system.

The negotiations were halted in July 2013 over the original version of the MoU. The ACGME came back to the table to work out a more agreeable document, which the AOA, AACOM and the ACGME approved on Feb. 26.

The MoU is the starting point that provides the structure for working out the details of how a single GME system would work. This MoU has been a major point of discussion among osteopathic specialty and societies, particularly the American College of Osteopathic Family Physicians, the American College of Osteopathic Internists, and the Pennsylvania Osteopathic Medical Association.

At the April 22-25 meeting of the Association of Osteopathic Directors and Medical Educators, attendees were especially concerned about the following issues:

• the costs associated with osteopathic residency programs adopting ACGME standards.
• AOA board certification would not automatically be accepted for the purposes of qualifying residency program directors.
• the potential closure of osteopathic residency programs.
• U.S.-trained and foreign-trained MDs could take slots away from DO graduates by entering osteopathic GME programs.

To address these and other issues, the AOA, AACOM and the ACGME conducted a seminar on May 4 in Chicago. Representing the Academy at that seminar were AAO President-elect Doris B. Newman, DO, FAAO; AAO Trustee Laura E. Griffin, DO, FAAO; and AAO Executive Director Michael E. Fitzgerald. (For more on the seminar, see the article beginning on Page 1.)

Based on the AAO delegation’s feedback about the May 4 seminar, the Executive Committee of the Academy’s Board of Trustees agreed six days later to continue to support the single GME pathway. The Executive Committee also decided to collect the concerns of the Academy and other organizations, rate those concerns, and track how the AOA, AACOM and the ACGME respond to those concerns. Based on that information, the AAO Board of Trustees would determine which concerns the Academy should weigh in on.

We will keep you posted on the Academy’s position and actions related to the proposed single GME pathway.

Kenneth J. Lossing, DO

Convocation 2014 Retrospective

The Academy’s 2014 Convocation in Colorado Springs, Colorado, was packed full of events. The photographs on Page 7 depict a sampling of those events.

Below are the captions for those photographs.

1. Judith A. O’Connell, DO, MHA, FAAO, and Ann L. Habenicht, DO, FAAO, delight in watching Diana L. Finley, CMP, admire the necklace she received during the AAO president’s banquet to thank her for her 21 years of service to the AAO as associate director and executive director. Finley retired from the Academy three weeks later.

2. The members of the 2013-14 AAO Board of Trustees took a group photo as they finished their work on March 19: (seated) Jane E. Carreiro, DO, past president; David Coffey, DO, FAAO, 2013-14 president; Kenneth J. Lossing, DO, 2014-15 president; (standing) Michael P. Rowane, DO, FAAO; Catherine M. Kimball, DO; Laura Griffin, DO, FAAO; Kendi Lee Hensel, DO, PhD; Diana Finley, CMP, retiring AAO executive director; John E. Leuenberger, DO, 2013-14 PAAO liaison; Judith A. O’Connell, DO, FAAO; Michael E. Fitzgerald, incoming AAO executive director; David A. Mason, DO; and Doris B. Newman, DO, FAAO, 2015-16 president.

3. Christopher M. Stephenson, DO (right), teaches at Stars and Stripes.

4. Jean Pierre Barral (right) teaches Aline Fournier and Francis Demmerck at his pre-Convocation course.

5. AAO 2013-14 President David Coffey, DO, FAAO (right), welcomes the American Osteopathic Association’s delegation to the AAO Board of Trustees’ March 19 meeting. Included in the AOA delegation is AOA Trustee Boyd R. Buser, DO (left), a former AAO president.

6. Thomas A. Moorcroft, DO (right), provides instruction at Stars and Stripes.

7. At least four osteopathic generations attended Convocation: (left to right) Craig Wells, DCOM 2015; Lauren Davis, DCOM 2015; Eva Shay, DO, COMP 1995; Robert Clark, DO, KCOM 1977; Wayne English, DO, PCOM 1958.
Convocation 2014
Retrospective

Captions for these photos are on the bottom of Page 6.
### AAO Calendar of Events

Mark your calendar for these upcoming Academy meetings and educational courses.

**2014**

<table>
<thead>
<tr>
<th>Date</th>
<th>Event Description</th>
</tr>
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<tbody>
<tr>
<td>May 30–June 1</td>
<td>CANCELLED—“Muscle Energy With Sally Sutton, DO, FAAO”—Richard G. Schuster, DO—Marian University College of Osteopathic Medicine, Indianapolis</td>
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<tr>
<td>June 11</td>
<td>Committee on Fellowship teleconference, 8:30 p.m. Eastern time</td>
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<tr>
<td>July 4</td>
<td>Independence Day—AAO office closed</td>
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<tr>
<td>July 11</td>
<td>Committee on Fellowship teleconference, 8:30 p.m. Eastern time</td>
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<tr>
<td>July 12–13</td>
<td>AAO Board of Trustees meeting</td>
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<tr>
<td>July 18–19</td>
<td>“Ultrasound-Guided Injections”—Sajid A. Surve, DO—University of North Texas Health Science Center—Texas College of Osteopathic Medicine, Fort Worth, Texas</td>
</tr>
<tr>
<td>Aug. 6</td>
<td>Birthday of Andrew Taylor Still, MD, DO</td>
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<tr>
<td>Aug. 8–9</td>
<td>AAO Education Committee meeting—Indianapolis</td>
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<tr>
<td>Aug. 8–9</td>
<td>SAAO Council meeting—Indianapolis</td>
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</tbody>
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**Who Inspired You?**

Nominate your mentor for the American Osteopathic Association's Mentor of the Year Award, one of the AOA’s most prestigious honors. Nominations are due July 22.

Past AOA Mentors of the Year include Sara Esther Sutton, DO, FAAO. The Academy’s 1969-70 president, Dr. Sutton was AOA’s 2011 award recipient.

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**Make plans now to join us for the 2015 AAO Convocation in Louisville, Kentucky.**

**March 11-15, 2015**
New Members

The following individuals joined the Academy as new members between July 31, 2013, and Jan. 31, 2014: The list was presented to and approved by the Board of Trustees at the AAO Annual Convocation in Colorado Springs, Colorado.

Brandon R. Adcock, DO  
Vikram Agnish, DO  
Sarah E. Baker, DO  
Corina Bassity, DO  
Stasia Blyskal, DO  
Erin M. Brennan, DO  
Hyrum A. Brodniak, DO  
Christopher R. Brown, DO  
Scott W. Calcagno, DO  
D’Wan J. Carpenter, DO  
Felix N. Chien, DO  
Brianne E. Clark, DO  
Josephine A. Conte, DO  
Jude J. Cope, DO  
Gregory J. Cox, DO  
Brittney Ann Dautremont, DO, MPH  
D. Todd Detar, DO  
Caroline S. Engel, DO  
Justin D. Etter, DO  
Kevin G. Falk, DO  
Max Feinstein, DO  
Joshua J. Fischer, DO  
Kristopher J.S. Goddard, DO  
Rachel M. Goerzen, DO  
Travis J. Gordon, DO  
Thanh T. Ha, DO  
Anna M. Halbeisen, DO  
Erandhi N. Hall, DO  
Joshua J. Haugh, DO  
Nicklaus James Hess, DO  
Ronald T. Ho, DO  
David N. Hoang, DO  
Natalie A. Hyppolite, DO  
Jennifer J. Janrog, DO  
Carrie R. Janiski, DO  
Melissa L. Jones, DO  
Mary J. Joy, DO  
Trishla R. Kanthala, DO  
Ruba R. Katrajian, DO  
Sean Michael Kelly, DO  
Victor L. Kim, DO  
Dorothy M. Klingmeyer, DO  
Sibyl G. Knight, DO  
Kent M. Lai, DO  
Michelle M. LeMieux, DO  
Philip A. Lenoue III, DO  
Matthew B. Libby, DO  
Xiaoyu “Sylvia” Li, DO  
Morgan E. Lyons, DO  
Kirsten K. Mackey, DO  
Kyle Menze, DO  
Katherine E. Merkle, DO  
Kristen N. Mitchell, DO  
Shahab Moradi, DO

CLASSIFIED ADVERTISEMENTS

SEEKING LOCUMS OR FULL-TIME OMM/NMM/INTEGRATIVE PAIN MANAGEMENT POSITION

Michael A. Landrum, DO, Western U ’91, C-NMM/OMM, special proficiency certificate: Cranial Osteopathy. Currently in Maine, willing to relocate; available immediately. Contact: MKLandrum@gmail.com; (207) 701-7168.

NMM PLUS 1 POSITIONS AVAILABLE IN SUNNY SOUTH FLORIDA

Residency program at Larkin Hospital. Contact Joel D. Stein, DO, FAAO, at (954) 563-2707 or ommdoc@aol.com for more information.

NMM PLUS 1 RESIDENCY PROGRAM IN NEW YORK

NMM Plus 1 Residency at Southampton Hospital in beautiful Southampton, Long Island. Applications are currently being accepted. If interested, please contact Program Director Denise K. Burns, DO, FAAO, at drdenise@optonline.net or Education Department Secretary Karen Roberts at (631) 726-0409.

GROWING FL PRACTICE SEEKS FP/DO/DERMATOLOGIST

Reliant Family Practice in Gainesville, FL, seeks specialist in Family Practice/OMM and/or Family Practice/Dermatology for its growing, close-knit, supportive practice under the direction of Erik Schabelt, DO. Call Mika Harris, Office Manager, for first contact at (352) 514-6452 or email mika@reliantfamilypractice.com.

PRACTICE OSTEOPATHY IN BEAUTIFUL COLORADO

Successful integrative practice seeks a board-certified/eligible NMM/OMM physician for its busy Denver office. Preferably someone comfortable with a broad variety of techniques. Very competitive compensation. Friendly and professional atmosphere. Please call (303) 781-7862 or e-mail CV to mgentile@cointegrative.com. Our Web site is www.cointegrative.com.

Continued on Page 10
AOBNMM Update

The American Osteopathic Board of Neuromusculoskeletal Medicine administered oral and practical exams on Nov. 9-10, 2013, in Indianapolis. Of the 55 DOs who took the exams, 40 were newly certified, and 15 successfully renewed their certification for another 10 years.

Below are those who are newly certified by AOBNMM:

Lauren Abratt, DO
Payel Banik, DO
Jessica L. Bell, DO
Thea Mae Bordenave-Sande, DO
Angela L. Branda, DO
Larissa Ann Calka Gemme, DO
Victoria Shih-Huei Chang, DO
Shannon V. Crout, DO
Lee Ann Marie Cuny, DO
Joseph Andrew Dekker, DO
Timothy Clark Francisco, DO
Gary J. Gailius, DO
Richard J. Geshel, DO
Jeremy Akeow Ginoza, DO
Simeon C. Hain, DO
Katherine Lydia Heineman, DO
Michael Thomas Kolinski, DO
Michele Frances Leary, DO
Scott Leggoe, DO
Catherine Alanna Liebman, DO

The following were recertified by AOBNMM:

Judith Victoria Aldrich, DO
Kathryn Brandt, DO, MS
Conway Chin, DO
Susan Carolyn Cislo, DO
Gretta A. Gross, DO
John M. Jones, DO
Kelly J. Joy, DO
Randy G. Litman, DO, FAAO, FACOFP

Continued from Page 9

Pooja D. Mundrati, DO
Brian R. Nelson, DO
Glenn Nordehn, DO
Erin S. O’Hara, DO
Empress T. Oramas, DO
Rebecca M. Osbourne, DO
Alison M. Palacios, DO
Anup H. Patel, DO
Nicole Jeanine Pena, DO
Noel Pense, DO
Rochelle M. Remus, DO
Tobin D. Rummel, DO
Tetsuya Sato (Japan)
Jason R. Sheffler, DO
Bronwyn, L. Sing, DO
April R. Smith-Gonzalez, DO

Gayle H. Smith, DO
Shawn P. St. Marie, DO
David A. Stuckey, DO
Tamara R. Taber, DO
Nina Carmela R. Tamayo, DO
Michael A. Taylor, DO
Daniel Tsukanov, DO
Katie Lynn Westerfield, DO
Carey D. Vaughan, DO
Sarah A. Wear, DO
John W. Weston, DO
Deborah S. Whitson, DO
Rick H. Williams, DO, MP
Rebecca R. Wilson, DO
Bonnie Wong, DO
Kyle T. Youngflesh, DO

Continued from Page 9

David Clark Minix, DO
Christopher Sugihara Ngo, DO
Bobby Babak Nourani, DO
Jay Paul Roop, DO
Iris Savernik, DO
Gregory J. Sayegh, DO
Erik Michael Schaber, DO
Elzah Shahabi-Abney, DO
Sarah Danielle Shepherd, DO
Reddog Eitig Sina, DO, PhD
Richard G. Sloan, Jr., DO
Yvette Somoano, DO
Emily Block Soni, DO
Mason Michael Sopchak, DO
Elizabeth R. Sweeney, DO
Jonathan William Torres, DO
Amol A. Utturkar, DO
Anthony Andrew West, DO
Pamela Lee Wilson, DO
Mathew Aaron Zatkin, DO
Patricia E. Murray, DO
Natalie Ann Nevins, DO, MSHPE
Richard K. Ogden, DO
Allan John Olthoff, DO
Beth Ann Callihan Ricci, DO
Kenton P. Wang, DO
Damon Matthew Whitfield, DO
Membership Announcements

- Academy dues for the 2014-15 fiscal year will be sent during the first half of June, and they will be due by July 31. Dues rates for 2014-15 are the same as 2013-14.

- Don’t make a move without notifying the AAO. We don’t want to lose track of any of our members when they relocate. Please remember to inform the Academy’s Susan Lightle (slightle@academyofosteopathy.org) of any changes in your contact information.

- Please make sure emails from the AAO are not going to your junk folder. Adjust your spam filter to allow emails from @academyofosteopathy.org so you can receive the AAO Journal, AAO Member News, the OsteoBlast and other Academy content.

- Attention 2014 graduates. Once you graduate from osteopathic medical school, you do not automatically become a member of the AAO. We strongly urge you to rejoin the AAO as a member of the Postgraduate American Academy of Osteopathy (PAAO) so that you continue to receive discounts on courses and attend Convocation each year. More information is available at the PAAO website.

Regardless of your chose specialty, the AAO has much to offer in your development as an osteopathic physician. If you know an intern or resident who is not a member of the PAAO, please pass this information along.

Members in the News

Lindsay J. Ercole, OMS I, completed the Ironman triathlon in Tempe, Arizona, on Nov. 17, 2013. Read her remarkable story online at The DO Online: “I Am Ironman: How I Finished a 140.6-Mile Race during Med School.”

Adrian Woolley, DO, of Des Moines, Iowa, was recognized by the American Osteopathic Association as a Guardian of the Profession. A Guardian of the Profession is an osteopathic physician who advances the culture of osteopathic medicine by having served in a local, state or national osteopathic leadership role. A Guardian also demonstrates a strong sense of pride in the osteopathic medical profession and works actively to advance osteopathic medicine with colleagues and the public. (Source: DMU Magazine, Spring 2014)

While at Convocation, AOA President Norman E. Vinn, DO, nominated all of the 2013-14 members of both the AAO Board of Trustees and the AAO Board of Governors to be Guardians of the Profession.


Doran A. Farnum, DO, FAAO, of San Juan Capistrano, California, retired in November 2013 at the age of 101. Read about his involvement and impact in the osteopathic medical profession in The DO’s April 21 profile.

William H. Devine, DO, of Phoenix, Arizona, and Miho Yoshida, DO, of Glendale, Arizona, are among the 10 authors whose letter to the editor titled “Osteopathic Graduate Medical Education: New Research Standards Needed” was published in the May 2014 issue of The Journal of the American Osteopathic Association.

Adam C. Gilliss, DO, of Merchantville, New Jersey, wrote a letter to the editor titled “An Unexpectedly Progressed Lumbar Herniated Disk,” which was published in the May 2014 issue of The Journal of the American Osteopathic Association. You can read the original article and a response from James A. Lipton, DO, FAAO, and Capt. Geoffrey A. McLeod, DO, USAF, MC.

Hollis H. King, DO, PhD, FAAO; Michael A. Seffinger, DO; W. Thomas Crow, DO, FAAO; William H. Devine, DO; Reem Y. Abu-Sbaih, DO; Murray R. Berkowitz, DO, MA, MS, MPH; Robin Dyer, DO; Deborah M. Heath, DO; Kevin D. Treffer, DO; and Natalie A. Nevins, DO, MSHPE, are among the 15 authors whose manuscript titled “Somatic Dysfunction and Use of Osteopathic Manual Treatment Techniques During Ambulatory Medical Care Visits: A CONCORD-PBRN Study” was published in the May 2014 issue of The Journal of the American Osteopathic Association. Also among the authors is AAO supporter member Cathleen M. Kearns, BA. The authors used a practice-based research network to investigate patient characteristics and physician practice patterns. The authors focused on the presence of somatic dysfunction in patients and the use of 14 osteopathic manipulative treatment techniques to manage patients’ dysfunction.

Continued on Page 13
TOURO UNIVERSITY CALIFORNIA
Chair of OMM Department

Touro University California, a rapidly growing university offering graduate programs in health sciences and education, has an excellent opportunity for a Chair of OMM Department for Touro University, College of Osteopathic Medicine on our Mare Island campus. The university is part of the Touro College and University System and is located on the northern tip of San Francisco Bay in Vallejo, California. Touro University California is an independent, non-profit Jewish-sponsored institution. It has 1,403 students in three graduate professional colleges (Osteopathic Medicine, Pharmacy, Education and Health Sciences).

REPORTS TO: Dean, College of Osteopathic Medicine

POSITION DESCRIPTION:
The Chairperson is the academic and administrative leader of the Osteopathic Manipulative Medicine department of 6 faculty and 6 student Fellows who serve a class size of 125 students. In addition to these faculty, a highly qualified cadre of community based Osteopathic Physicians participate in the pre-clinical and clinical curricula. Many have national and international reputations that enrich didactic training and further increase the already high faculty to student ratio in the laboratory setting. The Chairperson reports to the Dean of the College of Osteopathic Medicine. Through his/her authority over the department, the Chairperson is responsible for the day-to-day operation of the department and the long-term development of the department.

SPECIFIC RESPONSIBILITIES:
• Oversight of OMM clinical activity. The Chairperson is responsible for the allocation and appropriate participation of faculty to provide clinical care and educational settings. Faculty participation in clinical settings is an important part of the educational and service aspects of TUCOM. The current settings include providing OMM services at the joint TUCOM/Solano County Family Health Services clinic. This clinic has over 30,000 patients and TUCOM provides OMM services full time as OMM specialists. The faculty also provides OMM precepting at the Student Run Free Clinic and other community settings.
  • The integration of OMM education into the regional clerkships, and in the future residency education, is important to the mission of TUCOM and the department.
  • In the 2014-15 academic year a new clinical facility will be completed on campus, which will expand OMM services.
• Directing faculty research. TUCOM seeks to be a national leader in the demonstration of osteopathic manipulative treatment efficacy. The Chairperson is expected to promote a faculty-wide initiative within the department to demonstrate the various ways that osteopathic manipulative treatment improves patient outcomes. The Chairperson will work closely with the Associate Dean for Research and with senior TUC leadership to establish a culture of active research on campus and national identity of the department’s strengths.
• Staffing and distribution of curriculum responsibilities. The department provides a lecture and laboratory sequence in each of the pre-clinical semesters. In the clinical curriculum, the department provides an OMM clerkship and also works with adjunct Osteopathic Physicians to offer a wide range of experiences in preparation for continued use of these principles and practices though the later phases of their education and practice. Integration of OMM and OPP in the clinical curriculum is a high priority for the Chairperson and the department.
• Leadership. The Chairperson represents the OMM department in college-wide leadership councils and standing committees such as Curriculum and Admissions Committees. The Chairperson is responsible for maintaining the department’s fulfillment of COCA accreditation standards, annual reporting to AACOM and AOA, and for participation in council and committee service at the national level.
• Faculty development. In keeping with accreditation standards, TUCOM provides as much osteopathic principles and philosophy faculty development as possible both within the OMM department and across the college. The Chairperson coordinates and sustains this faculty development program.

QUALIFICATION(S):
• Graduate of an AOA accredited College of Osteopathic Medicine.
• AOA board-certified through the American Osteopathic Board of Neuromusculoskeletal Medicine or have received a Certificate of Special Proficiency in Osteopathic Manipulative Medicine (C-SPOMM).
• Three (3) years proven experience in teaching and academic leadership in a medical education setting.
• Demonstrated leadership and productivity in the areas of clinical or professional service, scholarly activity, medical research or education.
• Evidence of successful scholarly and/or research accomplishments.
• Good standing with all regulatory and governmental boards and agencies.

Salary is competitive and commensurate with background and experience. Letters of interest, application and curriculum vitae should be submitted via one of the following methods:
Search Committee
1. Complete an online application: http://apptrkr.com/440618
2. AND Email CV: Apply@tu.edu
   Subject: Your Name, OMM Chair OR
3. Mail: Touro University California 1310 Club Drive Vallejo, CA 94592
Touro University California is an Equal Opportunity/Affirmative Action Employer
Touro is a system of Jewish-sponsored non-profit institutions of higher and professional education. Touro College was chartered in 1970 to enrich the Jewish heritage, and to serve the larger American community. Approximately 19,000 students are currently enrolled in its various schools and divisions. Touro College has branch campuses, locations and instructional sites in the New York area, as well as branch campuses and programs in Berlin, Jerusalem, Moscow, Paris, and Florida. Touro University California and its Nevada branch campus, as well as Touro College Los Angeles, are separately accredited institutions within the Touro College and University System. For further information on Touro College, please go to: http://www.touro.edu/media/
Karen T. Snider, DO; Brian F. Degenhardt, DO; and Eric J. Snider, DO, co-wrote the original research contribution “Association of Low Back Pain, Somatic Dysfunction, and Lumbar Bone Mineral Density: Reproducibility of Findings,” published in the May 2014 issue of The Journal of the American Osteopathic Association. The authors sought to determine the reproducibility of previously published results by investigating the association of lumbar somatic dysfunction and bone mineral density T-score variability in participants with and without chronic low back pain.

Passing on the Tradition

Randy G. Litman, DO, FAAO, FACOFP

[Editor’s note: The AAO continues the series conducted by Charlotte H. Greene, PhD, with editorial assistance provided by Donald R. Eaton Jr. Dr. Greene conceived this ongoing series of interviews to convey some of the rewards and challenges encountered during a career in osteopathic medicine, to highlight the role and contributions of mentors, and to provide accounts that might otherwise be lost.]

I first heard the word osteopathy from my father, Benjamin Litman, MD, a homeopathic and allopathic physician with a medical degree from the Samuel Hahnemann School of Medicine in Philadelphia. My father was strongly supportive of osteopathic medicine and worked alongside people like Herman Kohn, DO, FACOS, a surgeon in his hospital. Through my father and Dr. Kohn, I was introduced to the world of osteopathic medicine and to some pillars of the osteopathic profession. As a small child, I contracted meningoencephalitis, and after suffering through a four-year coma, I wondered who that British physician was who took care of me. Eventually I learned that it was Viola M. Frymann, MB, DO, FAAODist, FCA, whom I finally met while attending an AAO conference well after I graduated from medical school.

Ultrasound-Guided Injections

July 18-19, 2014 • University of North Texas Health Science Center—Texas College of Osteopathic Medicine in Forth Worth

Course Description
Designed for physicians who are novices at sonographic guidance for injections, this course will introduce course participants to the basic principles of ultrasound. They will learn proper injection techniques with ultrasound guidance, and they will learn proper billing and coding for ultrasound injections. Cadavers will be available for practice, and table trainers will ensure a low faculty-to-participant ratio. The course will focus on the injections of the major joints: glenohumeral, sacroiliac, hip and knee.

CME
16 credits of AOA Category 1-A CME are anticipated.

Program Chair

Sajid A. Surve, DO, is a 2005 graduate of what is now the Rowan University School of Osteopathic Medicine (RowanSOM) in Stratford, New Jersey. After completing a traditional rotating internship at Delaware County Memorial Hospital in Drexel Hill, Pennsylvania, he became an inaugural resident and the first chief resident of the physical medicine and rehabilitation residency at Long Beach (New York) Medical Center. He joined the faculty of RowanSOM in 2009 and completed a neuromusculoskeletal medicine and osteopathic manipulative medicine residency in 2010.

Registration Rates
$1,500 for members; $1,600 for nonmembers.

Click here to register.
My first professional exposure to osteopathic manipulative medicine was in 1984 on my first day of OMM lab at the Philadelphia College of Osteopathic Medicine (PCOM). I was watching some students in the second-year class and their instructor, a young resident named Walter C. Ehrenfeuchter, DO, FAAO. I turned to a tall, silver-haired, mustached gentleman and said, “That looks like vector mechanics to me,” to which he replied, “You are right on the money, boy.” (I was a chemical engineer, and he was a mechanical engineer. Seems engineers bond to one another.) Thus began a long-time friendship and hours of discussions about principles and the philosophy of osteopathic medicine with David Heilig, DO, FAAO.

I remember Dr. David lecturing about the mechanics of type 1 and type 2 lesions. Of course, he was talking about Harrison Fryette, DO, and his laws of spinal mechanics. It was so fascinating that I was inspired to study detailed aspects of many different medical subjects. I didn't truly appreciate the wonders of the writings of instructors like Dr. Dave and Nicholas Nicholas, DO, FAAO, in the “blue textbook” until I was a resident. (The “blue textbook” is Theory and Practice in Osteopathic Medicine edited by Hoag, J.M., Cole, V.W., & Bradford, S.G., 1969. McGraw-Hill).

Joseph W. Stella, DO, FACOFP, was instrumental in shaping my outlook as an osteopathic physician. I interned at Allentown (Pennsylvania) Osteopathic Medical Center (now the Allentown Campus of St. Luke’s University Health Network) during Dr. Stella’s tenure as AOA president. I didn’t realize his prominence or his many contributions to the profession then: I was too busy being a medical student, graduating, passing my national boards, etc. Dr. Stella made every one of his interns defend his or her findings at the conclusion of every structural exam. He talked about the principles of osteopathic medicine and said, “Wherever you go, never forget that you are a DO, and remember to think like a DO even when circumstances place you in an allopathic environment.”

I subsequently served a residency at the Bryn Mawr Hospital, a primarily allopathic institution, and eventually became a chief resident. I remained there until I went into academia full time. Bryn Mawr was a revelation for me with respect to encountering negative attitudes of certain MDs. It was there that I ran into resistance. Before relating this experience I need to digress to quote Daniel L. Wisely, DO, FACOS, who was chief of surgery when I was a second-year medical student: “If you get called once to give a verbal order on a patient, that may be acceptable under certain circumstances. If you get called twice and you don’t go and first evaluate the patient, think about me poking you in the ribs and saying, ‘You done wrong!’ I was on duty one night when I was involved in such an incident. It was 2 a.m., and I was the only DO on the residency staff when I got called for a “May I give another subcutaneous morphine injection to this patient.” I asked questions and apparently the female patient had a line put in just that day for chemotherapy. I went to see her, and she clearly had what we now call an inhalation dysfunction of her left first rib due to positioning during the procedure. We called it a key lesion of the first rib then. I was in an allopathic hospital and knew I couldn’t do very much OMT, so I said to the nurse, “Let’s try to position her for some comfort and try some heat. You can give her some more morphine right now.”

The patient then spoke up and said, “I know what you are: I see that coat. You are a DO, and you know what to do, so just do it!” I was a little concerned that as a cancer patient, she may have had the propensity to fracture, but I did an indirect myofascial technique. I put a little pressure on the rib, and it just glided, gave an audible articular pop, and the pain was gone. It was one of those “voila!” cases, and I wrote a progress note in the chart detailing exactly what I had done.

Continued from Page 13

Sutherland Cranial Teaching Foundation
Upcoming Courses

SCTF Basic Course:
Osteopathy in the Cranial Field
June 6–10, 2014
Portland, Oregon
Course Director: Dr. Duncan Soule
40 hrs 1A CME anticipated

At The Double Tree Hotel at the Lloyd Center
1000 NE Multnomah
Portland, Oregon

direct link from the airport to the hotel via the Max Light Rail Line
2 restaurants and a fitness center available

Visit our website for enrollment
forms and course details: www.sctf.com
Contact: Joy Cunningham 503-758-8090
Email: jcunningham4715@yahoo.com

Continued on Page 15
Continued from Page 14

The next morning, I was on the floor for rounds, and the oncology attending walks in and says, “Who is this Litman, DO, and what is this that he did to my patient?” He berated me right in front of the patient—they could do that then—but the patient stopped him and said, “Doc, he did everything that you told the nurses to do, and then I asked him to use his DO skills. He did, and I feel better, and that’s enough of that.”

Other attendings heard the story and started coming up to me to ask what I had done. Even my residency director (who didn’t like taking DOs) asked, “What happened in there? I heard you got yelled at today.” I told him exactly what I had done, and he said, “Not again in this hospital!”

Then came another patient, one who had an acute myocardial infarction literally two days before. He too saw the DO on my coat and asked, “You do manipulation, don’t you?” When I nodded, he asked to be manipulated. I said, “You had a heart attack two days ago. I can’t do that.” He insisted, complaining, “My sacroiliac is hurting, and I know you can fix it. I go to a DO all the time. I want you to treat me.”

So I approached the cardiologist, who was a University of Pennsylvania graduate, and told him what happened. It was all around the hospital that I had been berated a month prior for doing manipulation on a cancer patient, but he said, “I don’t care what you do. Close the curtains and don’t write it in the chart.” Those were his exact words. I treated the patient. He became my patient and stayed in my practice from the time I put up my shingle until I left for Pikeville, Kentucky, where I am today.

Kathryn M. England, DO, is responsible for my unorthodox cervical techniques. Dr. Kathryn supervised the residents in our hospital, and I volunteered with her the summer between first and second year. Her progress notes were meticulous, and I loved the way she actually sat down and read my student progress notes and made comments. She was never negative, always positive. She said, “I am going to show you how I do these techniques, and then you’re going to adapt them to fit your comfort level. You might be stronger than I am. You may be taller. Your hands may be larger. You may be more afraid.” She taught me to identify the restricter and become familiar with the surrounding neighborhood. (To this day when I teach students, I always say, “I am from Philadelphia, city of neighborhoods. Remember the neighborhoods.”) Dr. Kathryn would say, “Localize your area, take the tension off the restricter, and then position your force. Use a light push, a light impulse, be gentle.” She never referred to vectors like Dr. Dave did. Early in my practice, I discovered that patients didn’t like high velocity using my knuckle. Most of us were trained in the classical approach using the metacarpophalangeal joint or the proximal interphalangeal joint and getting the knuckle behind the boney facet joint, between the vertebra and giving the joint a big push. There is no muscle over

Continued on Page 16

Osteopathic Considerations in Sports Medicine

June 13–15, 2014 • Midwestern University/Chicago College of Osteopathic Medicine, Downers Grove, Illinois

Course Description
This course will outline a manipulative approach to patients with common sports medicine injuries and conditions of the spine, upper extremities and lower extremities. The program will have a balanced content of didactic material and hands-on OMT workshops.

CME
20 credits of AOA Category 1-A CME are anticipated.

Course Times
Friday, 8 a.m. to 5:30 p.m.
Saturday, 8 a.m. to 5:30 p.m.
Sunday, 8 a.m. to 12:30 p.m.

Registration Rates
$850 for members; $950 for nonmembers

Program Chair
Kurt P. Heinking, DO, FAAO, is a 1994 graduate of MWU/CCOM, where he currently chairs the Department of Osteopathic Manipulative Medicine. He is board certified in osteopathic manipulative medicine, family medicine and sports medicine, and he has a private musculoskeletal medicine practice in Willowbrook, Ill. Dr. Heinking serves on the AAO Fellowship Committee.

Course Location
Midwestern University/Chicago College of Osteopathic Medicine (MWU/CCOM)
555 31st St.
Downers Grove, IL 60515

Click here to register.
Continued from Page 15

these bony areas, and the patients feel it, and it hurts. Additionally, you, as the practitioner, feel the consequences at the end of the day. God bless Nicholas Nicholas, who was an excellent technician, but due to years of employing this classic approach, his hands had many arthritic changes.

I asked myself, “What can I do?” I switched to the hypothenar eminence of my hand, which is softer. I found that I could still get my vector force by adjusting with my forearm to get my directions, and I found that I could use that and the pad of my weakest middle finger for adjusting. This never would have evolved for me if Dr. Kathryn had not said, “Make it part of you” and “Just a little push.” She was wonderful.

I stayed in the Philadelphia area for 12 years. The minute I got out of residency and established my practice, I started table training at PCOM. Then in 1993, Eugene Mochan, PhD, DO, FACOFP, an assistant dean at PCOM, invited me to precept. I would take anywhere from one to four students per month—some in my hospital service and some in my office. I would interchange them. I had a ball, I loved it!

When it came to the point at which my last child graduated from college and there were no more tuitions to pay, I wanted to go into education full time. I ended up in Pikeville as the clinical dean at what is now the University of Pikeville–Kentucky College of Osteopathic Medicine. The school is centered among the five states referred to as Central Appalachia. I am also the medical director of Kentucky Remote Area Medicine, which serves the underserved. Rural medicine here is very osteopathic: We go out to where our patients live and look at the contributors to their condition. There are five major health problems in Appalachia: heart disease, lung disease, hyperlipidemia, diabetes mellitus and hypertension. Obesity, smoking mothers, and small-for-gestational-age infants are all issues as well.

We get a chance to see patients in their own habitats. But how do you get them to accept you so that you can put your hands on them? I go in and introduce myself. I talk to them and tell them why I am there. While many say, “No, no, no, not interested,” there are always one or two whose need for help exceeds their misgivings. When you improve the condition of someone who has suffered a while with positive treatment and they get up and walk away, word of mouth opens the door. Being available, being visible, and having one patient who is a success leads to many more.

I am still trying to figure out the spirit part of “body, mind and spirit” because I am trying to master the unique cultural spirit of Appalachia. Being a Yankee—“You’re not from around here”—puts me at a little distance, but at the same time, it gives me the incentive to gain trust. And that is what osteopathy is all about.

Dr. Heilig used to say, “When you touch your patients, they feel you just like you feel them.” If you are thinking about that bill you have to pay or that appointment you have to keep or that patient you just lost, they feel it in the temperature of your fingers and in the rigidity of your soft tissue. They hear it in your voice, and they know the connection is not there. Dr. Heilig always defined a medical office visit as the minute you see patients in your waiting room. Watching them walk back into your exam room was step 1, and step 2 was to totally involve yourself in each patient as if the rest of the world didn’t exist. I have

Continued on Page 18

OES Successful at Convocation

The Osteopathic Education Service at the Academy’s 2014 Convocation in Colorado Springs, Colorado, generated the following statistics, attesting to the success of the service this past March.

While participating in the service, DOs exchange ideas about osteopathic manipulative medicine with their peers, osteopathic medical students, and other Convocation attendees.

The service will be conducted next on July 18-19 at the annual meeting of American Osteopathic Association’s House of Delegates in Chicago.

- 68 physicians registered to treat patients
- 187 treatments provided
- 93.5 total CME credits earned
Golden Ram Donations Updated

AAO members’ donations to the Golden Ram Society continue to build the 2013-14 campaign. The Academy's leaders encourage all members to support this annual fundraising program. This year's campaign comes to a close May 31. As of April 30, 86 donors have contributed $23,911—68 percent of the $35,000 goal.

Golden Ram donations can be made online by logging on to www.academyofosteopathy.org. Click “Contribute” in the left-hand column, select the appropriate donation category, and enter the exact amount of your contribution. Keep in mind that you can also make a recurring monthly donation of $25 or more. Call AAO Associate Executive Director Sherri L. Quarles at (317) 879-1881, ext. 214, to set up a rolling donation today.

President’s Club – $2,500 or more
Anthony G. Chila, DO, FAAODist, FCA

A.T. Still Club – $1,000–$2,499
John Evan Balmer, DO, and Patricia Balmer
Boyd R. Buser, DO
Haifan Chen, DO
Robert E. Kappler, DO, FAAODist
Gary L. Ostrow, DO
Akiyoshi Shimomura (Japan)

T.L. Northup Club – $500–$999
Juan F. Acosta, DO
Stephen Patrick Cavanaugh, DO
Hugh M. Ertlinter, DO, FAAO
William J. Garrity, DO, MPH
David B. Hagie, DO
Huy Kim Hoang, DC, MD
John M. Jones, DO
T. Reid Kavieff, DO
Tim Mosomillo, DO
David D. Musgrave, DO
Jeanne R. Roll, MD
Edward G. Stiles, DO, FAAO

Louisa Burns Club – $250–$499
Dennis A. Burke, DO
Gregory Craddock, DO
Jackson Friedman, DO
John Mark Garlitz, DO
Mikhail Gleyzer, DO
Jacey Elizabeth Goddard, DO
Sharon Gustowski, DO

Louisa Burns Club (continued)
Donald V. Hankinson, DO
Adrienne Marie Kania, DO
Tamara M. McReynolds, DO
Candace Nowak, DO
Sonia Rivera-Martinez, DO
Sandor S. Slezynski, DO, FAAO
Sheldon C. Yao, DO, and Melissa M. Ventimiglia, DO

Vicki Dyson Club – $100–$249
Keith R. Barbour, DO
Stephen D. Blood, DO, FAAODist, FCA
Michael Aaron Chipman, DO
Richard Chmielewski, DO
Maria A. Coffman, DO
R. Todd Dombroski, DO, and Jessica Dombroski
Edward R. Douglas, DO
Stephen M. Ellestad, DO
J. Yusuf Q. Erskine, DO
Paula L. Eschtruth, DO, FCA
Hannah M. Eucker, DO
Catherine L. Ferrara, DO
Jere H. Glassman, DO
Sherman Gorbis, DO, FAAO
Mark R. Gugel, DO
Eric Alexander Hegybeli, DO
Paul K. Humne, ND, DO
(New Zealand)
John H. Juhl, DO
Michael Z. Kuschelewski, MD (Poland)
Carol L. Lang, DO
Richard C. MacDonald, DO
Doris B. Newman, DO, FAAO
Pierre Duby, DO (United Kingdom)

Vicki Dyson Club (continued)
Barry Stephen Rodgers, DO
Daniel A. Ronsmans, DO
Mark E. Rosen, DO
Eric L. Schneider, DO
Alice R. Shanaver, DO
Wendy S. Neal, DO, ND
Sun F. Pei, DO
Therese Marie Scott, DO
Dr. med. Ralph Schuerer, DOM (Germany)
David E. Teitelbaum, DO
Negash K. Tesemma, DO

Supporter – Up to $99
Charles A. Beck, DO, FAAO
Joel Berenbeim, DO
Andrew Berry, DO
Kathryn E. Calabria, DO
Josephine A. Conte, DO
Tom Esser, DO
Steven T. Fosmire, DO
Ellie Anna Griffin, DO
Laura Liles, DO
Ramona A. Miller, DO
Merideth C. Norris, DO
Benjamin Neil Paschkles, DO
Joy L. Palmer, DO
Stacey L. Pierce-Talsma, DO
Jana H. Prevratska (Canada)
Bradley D. Rosen, DO
Heather A. Sharkey, DO, and Jason Weymouth
Ian Schofield, DO (United Kingdom)
Brian M. Walters, DO
always had that attitude when I go in to see a patient: That patient is my concentration. It gets me excited, and I think of Dr. Dave all the time.

PCOM was a unique place in the sense that I was taught by many giants who didn’t care about their degrees nor all of their accolades. They cared about the method and about the philosophy. I was always searching for the relationship between mainline medicine and osteopathic manipulative medicine. It’s not a relationship. It is a philosophy, and that is what I adhere to.

In honor of all the people living and dead who helped and influenced me, I got my Academy fellowship. Go back to the oath that we all have to take. Part of that oath is about lifelong learning and about being a student. Sit back, listen to the philosophy and principles of osteopathy, and examine them critically. What one will find is that osteopathy is a vital approach to the practice of medicine, and it is an art that should not fade away. The principles that we are taught—to study, to research and to practice—a student who becomes a good physician and a lifelong learner will put them together. Read, study and remember. Take value from your teachers. Remember these folks will remain vivid in your memory and make some of your medical decisions for you even though they are not there.

In Memoriam: AOA Loses 1990-91 President

Mitchell Kasovac, DO, the American Osteopathic Association’s 1990-91 president, died April 5 in Phoenix at age 76.

A family physician and longtime educator, Dr. Kasovac focused on three major goals during this AOA presidency:

- He orchestrated the AOA’s first annual leadership conference on graduate medical education. That annual conference soon helped to formulate the concept of osteopathic postdoctoral training institutions. The scope of the conference has since expanded to all aspects of osteopathic medical education, and the conference is now co-sponsored by the American Association of Colleges of Osteopathic Medicine.

- He oversaw the creation of an association for osteopathic interns and residents, which evolved into the AOA Council of Interns and Residents.

- He established the AOA’s Northwestern Small States Initiative, which is now incorporated into the operations of the AOA Division of Affiliate Affairs.

A 1963 graduate of what is now the Midwestern University/Chicago College of Osteopathic Medicine, Dr. Kasovac began his career as a family physician in Phoenix. Dr. Kasovac served as the director of medical education at the former Phoenix General Hospital and as the dean of the Western University of Health Sciences College of Osteopathic Medicine of the Pacific in Pomona, California. After retiring as WesternU/COMP’s dean, Dr. Kasovac served the AOA as its director of osteopathic graduate medical education development, and he assisted A.T. Still University with obtaining accreditation for its School of Osteopathic Medicine of Arizona in Mesa. He served on the faculty of the Mesa school from 2007 to 2012.

“[Mitch] was always a supporter of the AAO and of OPP,” recalls Raymond J. Hruby, DO, FAAODist, who served as the Academy’s president during most of Dr. Kasovac’s AOA presidency. “What I remember more vividly was that he was the dean at COMP who recruited me as OPP department chair. He offered me a fine position … and really took care of me.”

Former Academy president Anthony G. Chila, DO, FAAODist, recalls delivering the AOA’s Andrew Taylor Still Memorial Address during the AOA House of Delegates’ meeting at which Dr. Kasovac was installed as president. “A valued photo from that event shows Mitch turning to congratulate me after [House Speaker] Gene Zachary had done so,” Dr. Chila notes.

“[Dr. Kasovac] was always a gentlemen, and he and his wife, Marti, were so warm,” says former AAO executive director Stephen J. Noone, CAE.

Adds Dr. Hruby, “I remember him as an easy-going, congenial, honest and hard-working guy.”
Dr. Kasovac is survived by his wife of 51 years, Martha Ann, five children, nine grandchildren, and one sister. Donations can be made to the Mitchell Kasovac Scholarship Fund in care of the American Osteopathic Foundation, 142 E. Ontario St., Suite 1450, Chicago, IL 60611, (866) 455-9383, vheck@aof.org.

For more information, watch the AOA’s living presidential history of Dr. Kasovac and read WesternU/COMP’s tribute to Dr. Kasovac.

**In Memoriam: Dr. Watts Treated Coloradans for 50 Years**

**Walter H. Watts, DO,** passed away on March 18 at his home in Fountain, Colorado. He was 80 years old. Watts was born in New York City on April 5, 1933. He was raised in Iselin, New Jersey, and attended Rutgers, The State University of New Jersey. He earned his DO in 1963 from what is now the A.T. Still University-Kirksville College of Osteopathic Medicine in Missouri.

While in Kirksville, Dr. Watts met Janet Lilian Fitzgerald from London. They were married on Nov. 23, 1961, and they celebrated their 52nd wedding anniversary last year.

After serving an internship at Muskegon (Michigan) Osteopathic Hospital, Dr. Watts moved his family to the newly built suburb of Security Village, Colorado, to become a family physician. For the next 50 years, Dr. Watts served the community as a dedicated local physician. Beloved by his patients, he often accepted crafts or livestock in lieu of payment. He never retired.

Dr. Watts is survived by his wife, Janet; four children; four siblings; and five grandchildren. (Sources: [www.legacy.com](http://www.legacy.com) and the AAO membership database)

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**West Virginia School of Osteopathic Medicine**

**Osteopathic Principles and Practices Faculty Position**

[www.wvsom.edu/employment](http://www.wvsom.edu/employment)

**Summary:** WVSOM is seeking to fill a full-time tenure track faculty position in Osteopathic Principles & Practices (OPP) Medicine. The primary job of this faculty position is to provide education in osteopathic principles and practices and assist in providing OPP integration to all phases of the WVSOM pre and post doctoral curriculum. Research opportunities are available if desired. This position provides an opportunity for a clinical practice. Successful candidates must have a D.O. degree from an accredited college/school of osteopathic medicine and be residency trained and board certified or board eligible by AOBNM (CSPOMM and/or NMM) or other osteopathic specialty board. The successful candidate must also be eligible for licensure in the state of West Virginia.

**Responsibilities:** OPP Department duties include training first- and second-year medical students in the classroom. Academic responsibilities may include preparing and delivering lectures, instruction in OPP labs, development of test questions and small group activities. Research is supported and encouraged but not required.

**Benefits:** Salary and faculty rank will be commensurate with experience and includes an excellent benefits package including medical malpractice insurance, educational loan reimbursement and relocation expenses.

**For the last three years, WVSOM has been consistently recognized as A Great College to Work For by the Chronicle of Higher Education. The school’s campus is located in Lewisburg, West Virginia a picturesque community nestled in the Appalachian Mountains. In addition to being named America’s Coolest Small Town in 2011, Lewisburg has an array of eclectic restaurants, outdoor activities, antique shops, art galleries, a Carnegie Hall performing art center, and a live equity theater that is supported by varied local artists and benefactors. The community is also supported by a regional medical center and excellent educational opportunities for students of all ages. To get a glimpse of this charming community, please visit [www.greenbrierwv.com](http://www.greenbrierwv.com).**

Interest candidates should contact Leslie Bicksler, Associate Vice President of Human Resources at 304.647.6279; 800.356.7836; or lbicksler@osteo.wvsom.edu

WVSOM is an equal opportunity employer. Applications accepted until the position is filled.
Component Societies and Affiliated Organizations
Calendar of Upcoming Events

June 4-8, 2014
Texas Osteopathic Medical Association and Texas American College of Osteopathic Family Physicians 7th Annual Convention
La Cantera Hill Country Resort, San Antonio
CME: 22 Category 1-A AOA credits anticipated
(512) 708-8662 • toma@txosteo.org • www.txosteo.org

June 6-10, 2014
Sutherland Cranial Teaching Foundation
Basic Course: Osteopathy in the Cranial Field
Course director: Duncan Soule, MD
Doubletree Hotel at the Lloyd Center, Portland, Oregon
CME: 40 Category 1-A credits anticipated
(509) 758-8090 • Fax: (509) 758-6806
jcunningham4715@yahoo.com • www.sctf.com

June 12-15, 2014
Michigan Osteopathic Association Annual Summer Conference
Mission Point Resort, Mackinac Island, Michigan
CME: 20 Category 1-A credits Anticipated
Phone: (800) 657-1556
https://www.mi-osteopathic.org/2014SummerConference

June 14-18, 2014
The Osteopathic Cranial Academy June Introductory Course in Osteopathy in the Cranial Field
Course director: Eric J. Dolgin, DO, FCA
Sheraton Indianapolis City Centre, Indianapolis
Phone: (317) 581-0411 • Fax: (317) 580-9299
info@cranialacademy.org • www.cranialacademy.org

June 19-22, 2014
The Osteopathic Cranial Academy Annual Conference Beyond Sutherland’s Minnow: Anatomy, Perception and Treatment
Conference director: Melvin R. Friedman, DO
Sheraton Indianapolis City Centre, Indianapolis
(317) 581-0411 • Fax: (317) 580-9299
info@cranialacademy.org • www.cranialacademy.org

July 4–July 18, 2014
Expanding the Osteopathic Concept Into the Cranial Field
Program chair: Raymond J. Hruby, DO, FAAODist
American Academy of Pediatric Osteopathy With Osteopathy’s Promise to Children
Hilton Doubletree San Diego-Mission Valley
CME: 40 Category 1-A AOA credits anticipated
www.the-promise.org

July 14–July 18, 2014
Level One Fulford Percussion
Program chair: Richard W. Koss, DO
The Holonomic Institute of Integrative Medicine - Sebastopol, CA
Co-Sponsored by the AAO
CME: 24 Category 1-A AOA credits anticipated
Contact: Kate Price – (707) 824-8764

July 19–21, 2014
Intensive Course in Pediatric Osteopathy
Program chair: Shawn K. Centers, DO
American Academy of Pediatric Osteopathy With Osteopathy’s Promise to Children
Hilton Doubletree San Diego-Mission Valley
CME: 24 Category 1-A AOA credits anticipated
www.the-promise.org

September 19-21, 2014
The Osteopathic Cranial Academy Cranial Base Course
Course director: James W. Binkerd, DO
Associate director: Paul E. Dart, MD, FCA
Renaissance Suites O’Hare, Chicago
(317) 581-0411 • Fax: (317) 580-9299
info@cranialacademy.org • www.cranialacademy.org

October 5-6, 2014
American FDM Association Sixth FDM World Congress
Hotel Contessa, San Antonio, TX
CME: 24 Category 1-A AOA credits anticipated
www.orthopathy.com/worldcongress.html