This year at Evening with the Stars and Stripes, I was fortunate to get treated by Dr. Mark Rosen. I recently was in a car accident and felt a significant shift after the treatment. At the same time, I learned a little about interosseous strains and how the body houses shock after a traumatic event. Did I mention that I love Evening with the Stars and Stripes at Convocation?

The other thing I love about convocation are the wonderful lectures that you may not get to learn elsewhere depending on the school you go to. Every year, I pick up something new and interesting and realize even more how much more I have to learn.

For all of you students, we had the student social! This year was the Disco Dance Party which was tons of fun. This event is for students from different schools to get to know each other. So if you have any thoughts for next years student social the UAAO council would love to hear it. Please email the UAAO Vice Chair, Coral Peterson, at uaaovchair@academyofosteopathy.org.

Another wonderful UAAO event is the Auction. This year’s Auction was great with a OMT table signed by the FAAO’s, wonderful items provided by the UAAO Chapters, and a drawing of A.T. Still drawn in his own words provided by Dr. Dowling. This is

(Continued on page 2)
The Osteopath

(Continued from page 1)

a very big fundraiser for the UAAO council that allows us to keep supporting the local Chapters. We appreciate all of your support. If you have any thoughts, donations or questions please contact our UAAO Secretary, Scott Leggoe at uaaosect@academoyofosteopathy.org.

A much anticipated event is the A. Hollis Wolf Case Presentation Competition. This year had many great presenters. Good job to all who participated! The prizes for this event are always great and we hope to continue that trend next year in Little Rock, Arkansas!

Once again, I invite each of you to offer your thoughts and suggestions throughout the year and for next years AAO convocation so that we can continue our motion onward and upward!

If you wish to contact me, please do so at uaaochair@academoyofosteopathy.org. Have a wonderful year!!

The Still Point

Jessica Ridgley—Chair, Executive Council (KCUMB)

Osteopathy = Common Sense

Society is always taken by surprise by any new example of common sense.

—Ralph Waldo Emerson

T

his quote pretty much sums up my feelings about Osteopathy. Osteopathy is simply common sense! It works and evidence proves that osteopathic principles are logical and they hold fast and true. As my medical career progresses I find that through the stresses of pathology, microbiology, anatomy, etc, I can rely on the skills I have learned through these principles to remind me of my yearning to be a physician. I didn’t always know this but am finding out through more and more experiences how true this is and it’s been such a joy for me.

I started at Touro University College of Osteopathic Medicine (TUCOM) in August of 2006. At that time I thought that I knew all that Osteopathy had to offer. I had read a few books, shad-

owed several great Osteopaths, and of course I used my favorite online tool, Wikipedia.org. Alright, just kidding about Wikipedia, I didn’t find out about the great educational source it was until I started school. I am a current second year, waiting to finish up my last set of exams, preparing to take COMLEX in June, ready to start my clinical years, and embarking on my journey as one of TUCOM’s new pre-doctoral fellows.

As a new student I was just like everyone else starting their first day of medical school. I had a great roommate whose advisor just happened to be John Glover, DO, FAAO. He told her, “If you’re interested in OMM you have to join UAAO and go to the student run treatment clinic.”

And of course after I heard that, during our club day I did just that. I joined UAAO, paid dues and started going to the treatment clinic every week, brown bag lunch talks, evening speakers, and by the time I went to my first Convocation I was hooked. I was hooked to UAAO and everything that it provided me.

I love everything about Convocation, chances to learn from the best, evenings filled with new techniques, new ways to diagnose and treat, and opportunities to meet new people. The list goes on and on! After my first Convocation in Colorado Springs, CO, I returned to campus and it was decided by Tamara, 2007-2008 TUCOM’s UAAO President, and I that each year we would return to Convocation no matter what situation we might be in. So, naturally I returned to Convocation this year in Dallas, TX. I attended as the National Representative and had the opportunity to sit in on the business meetings. I shared the National Vice Chair. It was a pleasure meeting everyone and learning how other chapters have succeeded in strengthening our profession!

UAAO has impressed me since day one and I am in awe as to the caliber of leaders that I have met at the national and local chapter level. I look forward to the upcoming year so that I may serve you with my enthusiasm, energy, and hard work and meet the standard that has been set so high already. I hope to be of help to TOUROCOM in New York, my new family, as well as all the other new local chapters. I would like to aid all chapters with any needs and concerns.

Coral Peterson—Vice Chair, Executive Council (TUCOM)

(Continued on page 9)
If you could see me right now you would see a big smile on my face. These days despite just trying to get through my first year, I can’t seem to stop smiling. My name is Stephanie L. England and I am your incoming National Coordinator. Along with all the joy (and the occasional rough patch) that comes during your first year in medical school, I can not express how excited I am to take on this new role. As National Coordinator, I am looking forward to working along side the Regional Coordinators to provide both communication from the Executive Board to all the schools and encouragement for the schools to meet and even exceed their goals for the new year.

I am a member of the first class at Lincoln Memorial University – DeBusk College Of Osteopathic Medicine in Harrogate, TN. LMU was established in 1897. Over the past century the school has grown and continues to provide new programs to meet the challenges of the world around us. Nestled in the Appalachian Mountains of northeast Tennessee, LMU-DCOM has set a goal to not just graduate top DO’s but keep some in the region to help meet the medical needs in this area. The Appalachian region has the highest incidence of death from preventable diseases. Also Tennessee leads the nation in prescription per person usage. Pete DeBusk, a graduate of LMU and local businessman, recognized the need to provide an osteopathic medical school in this area. Mr. DeBusk’s generosity is providing another opportunity for many of us to complete the dream of meeting the health care needs of those around us. DCOM is bringing new life to a traditional university.

Being a member of a “first class” does have its challenges and rewards. We have seen the schedule change on a regular basis (one week the schedule changed four times in 3 days). So I am learning more and more how to truly be flexible. The faculty has been wonderful. They started out last August with so much enthusiasm that I never thought it would last but I was wrong. Yes, they have had some roadblocks to get through but they always do. One unique challenge that we have tackled is starting new clubs on campus. Including SGA, we started 18 organizations. Each one had to have 20 members to start and have a health-related theme. Our organizations cover just about any area of medicine we could think to reach. I had the great honor of working closely with two organizations. One was the Women’s Health and Medical Society. As President, I worked with an amazing set of officers to focus on health issues related to women with a large campaign this past February in the Go Red for Women campaign. In the rest of my spare time I was honored to be the Vice-President of the UAAO chapter. Again working with a great group of officers to get the club off and running. We have had some great success in our fundraisers and providing monthly meetings to further our education in craniosacral modalities.

On top of all the excitement and problems that arise at the start of medical school, adjusting to a 10 year absence was a little more difficult than I planned. I have wanted to do this for almost 30 years. Over the years, I got a little sidetracked and took other paths. I am a Registered Dietitian and worked in many areas of the field. My last job was working for a hospice agency. Working with people at the end of their lives helped to give me renewed life. I watched day after day as patients and their loved ones dealt with the end and I began to realize something in myself. I loved the work I was doing. I loved my life and the choices I had made but knew that something was missing. The real epiphany came the week after my grandmother passed away. Despite being a hospice worker, I was not ready to let her go. At the time I was working full time and taking classes part time to get ready for medical school. I began to doubt my plan. She was so proud that I was doing to be a doctor. She told everybody and reminded me frequently how proud she was of me. With her passing I lost a part of myself. Should I keep going? Who else is really going to care if I finish? Then it hit me – I WOULD CARE! Then another revelation hit me – MY FUTURE PATIENTS WOULD CARE! With those thoughts firmly planted in my psyche I forged ahead. This old girl decided to take steps toward a new life. So it is no wonder that most days I have a smile on my face. It was a long hard road personally for me to get here but the ride has been well worth it. As the incoming National Coordinator I hope that I can help each regional coordinator and their schools meet whatever goals that they set for themselves. I am a true believer (and testimony) that you can meet any goal that you set for yourself.

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- **June 14-18, 2008**
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A Contributor’s Joy

As all of the Convocations I have been to thus far, it was another fabulous occasion; this year in particular for very selfish reasons. I had the joy of presenting the “Outreach Chapter of the Year” award to my chapter of UAAO at the Saturday night banquet. Our chapter was also presented with the “Chapter of the Year” award as well. I could not have asked for a more prestigious year.

Our chapter began only five years ago since our school is only that old. Luckily, we had Guy DeFeo, the now president of AAO, as our UAAO advisor to get the chapter off on the right foot.

This was before I was even a medical student, but I am very good friends with the chapter president at that time, Julie Forbush. I knew her as a very hard worker and this served her well as the chapter took home the “Most Improved Chapter” award their first year.

Upon entering medical school, I truthfully had no grasp of what OMM/OMT really was. I applied to only osteopathic schools based solely upon the osteopathic principals, which I wholeheartedly agreed with. After an upper classmen (now a mentor of mine) gave me an adjustment after he saw me in pain post exam week, I was completely hooked and immersed myself in the world of manipulation and the UAAO.

I became close friends with the members of UAAO my first year and pestered them to death to teach me everything they knew. Then, we went to my first Convocation in Birmingham, AL in 2006. I was floored. It was more OMM than I could handle, but I took in as much as I possibly could. That years banquet saw PCOM take home the award for the top chapter and I saw my competition goal as they were an old & established school with fantastic faculty like Dr. Kuchera. I knew they would be tough to match, but I wanted it.

The next year, I took on my role as chapter secretary and went to work setting up outreach sites, building up a website, recruiting new members with demos and presentations, and anything else I could get my hands on. That year in Colorado Springs (the Convo Mecca), I was honored with two decorations. I had been elected as the National Executive Secretary/Treasurer and our chapter, again, took home the “Most Improved Chapter” award. I knew this was our springboard to the big time and upon our return, I coached the new coming officers with what I had learned and set them on the path to victory.

Lo and behold, this year in Dallas we took it home. I never would have thought that one chapter would bring home both top awards at once. Many past officers could not remember if it had been done before and I was even more proud of my chapter. Dr. Kuchera approached me after the banquet with a message from the PCOM chapter saying, “...you’ve broken their winning streak and they’ll be after you now.” That will make it only the more exciting. So the crux of this article is that I have great pride in my chapter for doing so well in only five short years. We could not have done it without contributions from our great past presidents, our terrific advisors, and our number one fan Dr. Stephen Blood who adopted our chapter and visits us often. As this is my last year as a national officer, a medical student, and a member of UAAO, I can only home to take home one last award. VCOM will give you Philly students a run for your money!
Humility in Osteopathy

We come nearest to the great when we are great in humility
— Rabindranath Tagore

I have never been a very good writer so when the task of having to write a Still Point was asked of me, I put it in the back of my mind hoping it would go away. I thought that maybe somehow the UAAO would forget that the NUFA liaison has to write an article. But when I began to think about what Osteopathy means to me I found that there was much more to write about than I had realized.

Osteopathy is an art. It was during years of practicing a martial art that I realized that the practice of an art in itself teaches humility. The more one delves into an art, the more it seems there is to know. From an outsider’s perspective the artist may seem a master in his practice but to the artist there are an ever increasing amount of imperfections on which he or she can improve.

During my first year of Osteopathic medical school it was my great fortune to meet Dr. Hugh Ettlinger, director of the NMM/OMM residency program at St Barnabas hospital in the Bronx. From a student’s perspective his knowledge and grasp of Osteopathy and anatomy is impressive. During Dr. Ettlinger’s visit as our UAAO chapters visiting clinician he said something that I have never forgotten. He brought his hands out in front of him and stretched them out wide past his shoulders and explained, “this is how much there is to know about Osteopathy”. Then he brought his hands back together until there was less than an inch between them and said, “this is how much I understand.”

As a first year osteopathic medical student, I thought if Dr. Ettlinger understands only a small portion of all there is to know about Osteopathy then I truly have my work cut out for me.

I have heard from a number of Osteopaths that Osteopathy is something that one improves upon until one stops practicing. As in any other art, you are either getting better with practice or getting worse without. There is no end goal of mastery - Osteopathy is a continuum of understanding until the day we no longer practice. I have been told that the late Dr. Anne Wales stated she was a better Osteopath at 90 years old then she was at 80 years old.

It can be discouraging to think about a life-long pursuit of understanding Osteopathy and yet never reaching an ultimate goal of mastery. Yet even as Osteopathic medical students we have been able to help classmates, family, friends, and patients with our relatively newly developed skills. Through hard work and practice our skills will continue to improve and so will our effect on our patients’ health. Whether we are just starting our journey or have spent the majority of our lives learning Osteopathy, we will always continue to be students.

My martial arts teacher used to say to me, “be content with where you are but do not be complacent.” This way you are happy with your current practice but have the desire to continually improve.

The Experiences of a First Year

When I first told my family I was going to Convocation for Spring Break, my mother said “Oh, Who’s graduating? I didn’t realize you knew anyone in Texas.” That was just the beginning of the confusion and mystery that surrounded Convocation for me, and I’m sure many other first timers to Convo. Was I supposed to dress in business suits or the T-shirt-and-shorts combo required for OMM class? Which lectures and workshops should I attend? Would I need to rent a car? Which airport should I fly into? I don’t know if these questions always accompany one’s first professional convention, but they certainly kept me awake the days leading up to my big trip.

This confusion was compounded by the fact that I had never set foot in Texas. Sure, I’d been to at least a dozen other states, to Europe a couple times, and to Australia the summer before beginning medical school. But Texas? I heard you weren’t supposed to mess with it. I considered dropping the g’s from all words ending in -ing and adding “y’all” to my vocabulary just to try and fit in a bit, but I knew true Texans would see right through that.

To make a long story short, I headed to Dallas-Fort Worth with no real concept of what I should expect from the experience. Maybe this was best. If you believe that Buddha fellow, expectations are one of the greatest sources of unhappiness. I decided to just allow the experience to happen, to explore all Convo had to offer, to make many mistakes, and above all to learn.

And learn I did! I was surprised by the population of osteopaths that had descended upon Addison to spread their knowledge to the neophytes like me. I was exposed to Still technique, Zinc’s Common Compensatory Pattern, OMT without an OMT table, and Chapman’s Reflexes and listened to informative lectures on thoracic cage anatomy. Through all the strain ing to hear and elbowing for views of the doctors during the Evening with the Stars, I learned how OMT was applied in the clinic to individual patients.

After all the uncertainty and mystery surrounding Convocation, I was able to walk away with a new sense of OMT. I felt myself beginning to make OMT my own rather than following the strict rules presented to us in class. This new-found confidence has cemented my respect for and interest in OMT even further, and I anxiously await the lessons and experience that the 2009 Convocation will bring!
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**KCUMB Brings OMM to Guatemala**

Crystal Meacham—KCUMB: UAAO National Representative

D o Care International is a national medical outreach organization composed of dedicated volunteers who are devoted to providing health care to disadvantaged and isolated communities in remote locations. The students and faculty at KCUMB have formed a small subgroup to this organization - KCUMB DO Care!! Every year a group of 3rd and 4th year medical students along with faculty take a two week trip to Guatemala to offer their services. For a large number of the people they see, it is the only time they receive any health care. In addition to the health screenings and physicals, the members of the organization were also able to provide OMM. Most of the patients in Guatemala undergo hard labor every day to make a living and in the process create a great deal of somatic dysfunction. Most of the women have profound tension headaches and the men commonly complain of chronic low back pain as a result. In the beginning, the patients don't know what OMM is and are at first intrigued because they see others participating, but in the end they are incredibly grateful for the relief they receive!!

Thank you to Brett Dunbar, OMSIV for comments and pictures

**No, to Self Cervical HVLA**

Sergio Suarez—PCOM: UAAO National Representative

I f I side bend right, rotate left, and now extend just a little bit I should be able to pop this back into place. Okay, I'm in position now just a little push. Crack! It sounded like Fourth of July fireworks went off in my neck and something just didn't feel right. I had to go to the doctor a few days later because I started having vision changes and headaches which I attributed to this episode of “self-HVLA.” Luckily I didn't have any cranial nerve damage and everything still seemed to be working well, but for a few days everything I saw had grayish shadows around it and I felt pressure in my head unlike anything I had experienced before.

My Osteopath told me that the definition of insanity is to continue to do something even when you know it is wrong or bad for you. So am I crazy for cracking my own neck? I know the consequences; hyper-mobile vertebrae, strained muscles, or even neuropathies. But it feels so good to get a nice “pop” out of your neck.

Just sitting in lecture I see it all the time. As we struggle to understand the intricacies of glomerular nephritis or renal physiology, we sometimes feel the need to side bend, rotate, extend, and/ or flex our necks to that barrier and follow through with a nice crack. Most of us do it out of habit. Something along the lines of having a cigarette after a drink or jay-walking, a bad habit that begins innocently until it snow-balls into something that is out of your control. As my classmates and I sit there rotating and extending our necks and backs I can't help but think back to the days when I had no idea what High Velocity Low Amplitude meant and I just cracked my back because it felt good.

Now I actually try to treat myself and figure out which way I need to thrust in order to correct my somatic dysfunction. This is a bad idea. Knowing about Fryette’s Principles is both a gift and a curse. And it has led me to pure insanity, as my Osteopath told me. I should know that I am only moving the hyper-mobile segments and that I am not even close to getting to the one that I want. But I can't help it. I need to learn self control in order to stop moving in this downward spiral.

I have now received a few Osteopathic treatments for this particular crack that I took too far. I still get the headaches and vision problems once in a while, but I learned a valuable lesson. Even if I feel competent enough to treat others I should not try to treat myself. It is hard to break the habit, and it does feel good to get that “pop” but the consequences I have dealt with were not worth it. So to everyone out there who tries to self diagnose and self treat their dysfunction, be careful and know your limits. Knowing too much is a gift and a curse.
The Best Medicine

Kristin Astrom—OUCOM: UAAO National Representative

It had been a long quarter, but finals were over and I was off to get a nice relaxing massage. This was not an unusual occurrence, but I what happened during the massage may have changed my life forever....

I was lying supine on the table; the room was dimly lit with soft music playing, for maximal relaxation. The massage therapist placed his finger pads against the inferior occiput and allowed the weight of my head to balance on his fingers. Then he gently placed my head back on the table.... WAIT, that was not enough time for a complete release, I scream in my head. Then it hits me – I am a medical student, what’s more, I am an osteopathic medical student.

Something happens to us, when we receive our white coat. It is like part of our brain switches on, it has to in order to hold all that information that we are going to be cramming into it over the next few years. But, there is also a part of our brain that turns off. It is that part that allows you to properly interact with nonmedical people. This part also makes you understand the difference between real and medical humor. I am sure you can all relate to this, you tell a joke that all your “med school friends” through was hilarious to other people and you just get blank stares.

Being osteopathic medical students, we know that the body is a unit. And although the evidence based medicine is still working on figuring out exactly how laughing makes us feel better, I bet we all know that is has an effect. Think of the last time you laughed, I mean really laughed. At then end, did you feel better? I bet you did... So, to get those good feeling going again here are some of OU-COM’s favorite, “You know you are a medical student when....” lists. Some of you have probably seen a few of these before as they seem to circulate. I wish I could give credit to the original author, but no one seems to know who said it first!

You Know You’re a Medical Student If...

1) If you go out of town for the weekend, you take more books than clothes with you.
2) You take forever explaining to people how long you’ll be in school for.
3) The title of your favorite book is either "High-Yield" or "Ridiculously Simple."
4) You’ve ever heard the phrase “You must be smart, you’re in med school!” and wanted to vehemently disagree.
5) You can’t remember the last time you did anything spontaneous.
6) You’ve dissected a penis and can explain the way Viagra works.

However, you may be an osteopathic medical student if...

1) You have joined the “AT Still is my Homeboy” group on Facebook.
2) You’re not really sure which professional organizations you’re actually a member of, but you KNOW you are in the AOA – as you e-mail inbox reminds you.
3) You know what a pelvic diaphragm is, and exactly how to release it.
4) You know what day every female in your school will have shaved her legs…. OMM lab day.
5) Your don’t have “backpain”; you have a somatic dysfunction on ....

Osteopathy = Common Sense

(Co ntinued from page 2)

Please feel free to contact me whenever you need to.

I am already so excited for the 2009 AAO Convocation in Little Rock, AK. Start planning to attend NOW, don’t wait! Commit to attending so that you don’t miss out on the best that Osteopathy has to offer. Plans have already started for the best social yet, watch for more details as the year progresses! And most importantly start thinking about those cases you want to present during the A. Hollis Wolf Case Presentation Contest. We are looking for some stellar cases this year and I can’t wait to see them.

My hope is that we can exude the excitement we have for Osteopathy when we come together at Convocation each year to our communities through outreach. Continue the great work that you are doing. Have a wonderful spring and summer and I can’t wait to see you all in another year!
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Why I Chose Oakworks®
When I decided to refine my OMM skills, I realized I would need a new portable, lightweight folding table to replace the ancient heavy table I had kept from my student days. I wanted adequate room for my knees so when I sat at the table I could work without unnecessary strain. That meant that at least one end of the table, as well as the sides, had to be open. The idea of spending my spring break away from academia doing absolutely nothing sounded lucrative. Now that Convocation is over, I am thankful for the experience. Not only did Convocation reinforce many things that I have learned in OMM, but it also helped me realize the diversity that OMM can provide physicians, reminded me of the reason why I wanted to become an osteopath, and, most importantly, cemented in my mind the idea that OMM is the core of osteopathy. Many osteopathic medical students try to separate OMM from osteopathy. After all, OMM is a procedure. You can bill for it. It is that extra thing that you can do if you believe its efficacy. It is easy to fall into the trap of separating osteopathy from OMM, but OMM is more than a procedure. It is the foundation of our profession and the thing that makes us different from allopathic physicians. The principles and techniques taught in OMM allow us to be better physicians. It truly is a gift to be able to diagnose and treat through touch.

Convocation, Refreshment for the Weary Student
Heather Werth—TUCOM-NV: UAAO National Representative

OK, I'll admit it. I am one of those people. You know, the kind that only applied to DO schools, chose to forego the allopathic route, and actually wants to learn OMM. Before starting school, I knew enough about osteopathy to know that I preferred it to the allopathic approach. However, the philosophy of osteopathy is hard to define and I feel that I am just now beginning to grasp it. Learning the art and philosophy of osteopathy is the furthest thing from the minds of many first year DO students, including me. I go through the motions in OMM and learn what I need to know to pass the practical. Unfortunately, I don’t stop and reflect on exactly what it is I am learning. In my hurry to get through the material, I quickly skim over PowerPoint lectures and make the mistake of going straight for the part about externally rotating, flexing, and abducting. In this way, I have become a robot regurgitating information from class. Fortunately, I decided to attend Convocation. Convocation woke me up from my medical student trance and helped me to realize many things about osteopathy and OMT.

Up until the day I left for Convocation, I dreaded the trip. My reluctance at attending Convocation derived from the fact that Convocation was over Touro Nevada’s spring break. Initially, it sounded like a good idea, but fatigue got the best of me. The idea of spending my spring break away from academia doing absolutely nothing sounded lucrative. Now that Convocation is over, I am thankful for the experience. Not only did Convocation reinforce many things that I have learned in OMM, but it also helped me realize the diversity that OMM can provide physicians, reminded me of the reason why I wanted to become an osteopath, and, most importantly, cemented in my mind the idea that OMM is the core of osteopathy. Many osteopathic medical students try to separate OMM from osteopathy. After all, OMM is a procedure. You can bill for it. It is that extra thing that you can do if you believe its efficacy. It is easy to fall into the trap of separating osteopathy from OMM, but OMM is more than a procedure. It is the foundation of our profession and the thing that makes us different from allopathic physicians. The principles and techniques taught in OMM allow us to be better physicians. It truly is a gift to be able to diagnose and treat through touch.
An Essential Ingredient to a Successful Treatment: Intention

Thoughts or intentions have material influences on the state of the person. The intention of the physician, including a loving disposition, is a force analogous to light, which can contribute to change in the physical constitution of the person.
—Zachary Comeaux, D.O

One thing that I work at diligently and fail at miserably is staying present while I’m treating other people. Some people have this ability to focus completely on the task and hand until completion. Not I...I have to give myself a mental shake at least 2 or 3 times every 10 minutes when I am working on someone else.

Those times that I have been able to focus on the task at hand, the treatment will normally be very successful and I end up asking ‘why did it work this time, but not last time?’ There are many possible answers to that question but the one that seems to come up over and over is that I focused on the patient with a full intention to help.

Intention is a slightly esoteric word. Most people know what it means but it can mean something slightly different to each person. According to www.dictionary.com, intention is "purpose or attitude toward the effect of one’s actions or conduct." Merriam-Webster dictionary considers intention “a concept considered as the product of attention directed to an object of knowledge.”

As Osteopathic healers our actions or object of knowledge is through the use of our hands. I have heard some Osteopathic Physicians talk about the concept of listening with the hands. I initially heard this term when I was beginning massage school. At first, I laughed at this enigmatic term. However, as my skills grow, the idea of closing down my other senses and allowing my hands be the main focus takes on a new light.

As I said previously, I am easily distractible. Over time and trying to work on my focus and intention, my habits that cause me to be easily diverted have shown themselves. A good example is drinking coffee or any beverage with a stimulating effect. My mood will also affect my ability to focus. Worry is the worst emotion for causing distraction.

A way that I am able to calm my mind is through yoga. If my day is full of hands on treatments, yoga is usually my first priority because it sets the mood and intention for the rest of the day. The more regular my yoga practice, the less distractible I am for longer periods of time.

Although I have spent time finding my triggers, there are many more that have yet to surface. Each person has different set of habits and therefore will need other ways to assist in focusing attention. However, intention works in more than just assisting successful treatment. We can also use intention to help us find ways to focus our intention!

As the saying goes “Practice makes perfect!”

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Ways to Focus the Mind

1) **Clear the Mind.** This is very important to maintain presence in your actions. While working with/on another individual, a clear mind allows your intuition to come forward and guide you. However, clearing the mind is much easier said than done. Many meditation gurus talk about the “monkey mind”. The minute you try to become clear and present, your brain starts functioning in overtime trying to distract you from the very thing you are focusing on. “hmmm, what do I have to do after this. Oooh, I need to do bills...I wonder what the weather will be tomorrow? I'm kinda hungry, what am I having for dinner?" All of a sudden, your awareness has been gone for 5 minutes and you have no idea what you have going on in front of you. There are a few ways to practice clearing the mind. One way is to have a daily meditation practice. Even 5 to 10 minutes can help.

2) **Take deep and conscious breaths.** Breath is a practice that is used in all forms of meditation whether it is sitting, yoga, tai chi, etc. Focusing on breath is similar to using a mantra. One can focus on breathing completely in and then allow the breath to flow fully out. An alternate way is to count breaths in and out, using the count with each breath or counting to 5 while you breathe in and 5 while you breathe out. When I’m working on someone, I like to imagine my breath as universal energy coming through my body and into the person I am working on. This helps me in two ways. One, I feel more connected with the person I am working on. Two, if I am waiting for a release for awhile it keeps my mind busy focusing on the patient instead of wondering what I’m going to have for dinner that night.

3) **Use a Mantra.** Mantras are essentially affirmations. You can use a mantra for anything and change it anytime to fit the situation. My favorite during mediation after a yoga practice is “Be Still and Know”. However, I wouldn’t use this if I was working on a patient. My inclination during a treatment would be to use a mantra focusing around the need of the patient. We all have those individuals that can’t relax even when you remind them. When I have a case like that, I like to use “relax” as my mantra. Sometimes I feel a little silly saying it over and over in my head, but nine times out of ten it works.
Practicing Osteopathic Skills in El Salvador

VCOM strives to train physicians who will practice in rural and underserved areas. In reaching this mission, the school has rotation sites in local rural areas, as well as international sites in the Dominican Republic, El Salvador, and Honduras. Students have the opportunity to get involved in this type of training from their very first year through both local free clinics and participation in international medical missions trips. Over their February break, 36 VCOM students, mainly MS1’s and MS2’s traveled to El Salvador for a medical missions trip with International Christian Resources. They were accompanied by several physicians, both osteopathic and allopathic, as well as two recent VCOM graduates who have been in El Salvador working on their PhD. Once in the country, they were met by five El Salvadorian medical students who would be a part of the VCOM team for the week to help with both patient care and translation. The team traveled to remote villages throughout the country and treated people who rarely see a physician. In just five days of clinic, over 1300 patients were seen. Seeing patients was not just a great opportunity to practice recently learned physical exam skills, but also to put into practical use osteopathic manipulative treatments.

The need for manipulative treatment was quite obvious after seeing the first few patients. Life in El Salvador is laborious as the people have to traverse great distances and elevation changes to get to the next nearest village. Add in the factors of the hot climate and heavy loads to carry on those journeys and one can easily see how OMM had a necessary place in the treatment of the El Salvadorian people. The dysfunctions that were seen truly reflected the life of the patient. Treatments that were most commonly performed were suboccipital releases, sinus releases, and various lumbar techniques. After receiving their treatment, the people were so grateful to finally experience relief from their pain. One patient came in complaining of low back pain for nine months. Her history revealed that she had had a baby nine months before. After performing her structural exam, the students found her to have an extended sacrum that likely occurred in the birthing process. After a simple treatment on her sacrum, she had complete relief of her pain.

Not only was this trip an opportunity for students to practice their skills on patients that really needed OMM treatment, but it also proved to be a trip where the idea of osteopathic medicine was shared with the El Salvadorian medical students who had never heard of a D.O.. Their receptiveness and understanding of the treatments will leave a lasting impression in that country of what the practice of medicine should be. VCOM is proud to be one of the leading medical schools in the U.S for medical missions. Upcoming trips in 2008 include Honduras in April and Peru in July.

Touro Strutting its Stuff...

We had over 75 students attending this years Convocation. About 45 first years, 20 second years, and about 10 3rd and 4th years. How did we motivate so many to attend?

1.) We showed a promotional video at the beginning of OMM lab in October and again in January before the registration deadline.

2.) During the showing we also passed around a Scrapbook/Photo album of the past year’s Convocation. We showed pictures of students of the conference as well as all the fun things we did outside of the convention.

3.) The faculty that went also talked about how convocation is "THE conference to go to for Osteopaths", and how some of them go every year and never miss it.

4.) We also had fundraising events for convocation during the year. For example we had 1st and 2nd years do a letter writing campaign asking for alumni donations to allow the 1st and 2nd years to attend convocation.

5.) Our former National Representative, Coral Peterson (the newly appointed Vice-Chair), also organized hotel rooms, sent out reminders of flight deals and had a few informational meetings about convocation, months before the convocation registration deadline.

6.) The previous year our school had exam week during convocation, so our students had to take exams while at convocation. This year they worked the school schedule around convocation.

7.) UAAO representatives, past attendees and our faculty did what they do best. They talked, and talked, and talked about how great of an experience it was.

Next year we plan on increasing the number of attendees even more. To do so we will start talking about Convo earlier in the year, getting students prepared financially we will discuss how the benefits of convocation far outweigh common costs.

Aimee Riley—VCOM: UAAO National Representative

Ryan Skarbek—TUCOM: UAAO National Representative
The BioBasics Program Presents

Exploring Trauma Through an Osteopathic Understanding of Fulcrums

June 13-16, 2008
(Indian Head Resort, Lincoln New Hampshire)

Keelyn Wu D.O., Course Director
James Jealous D.O., Director of Table Training
along with the BioBasics faculty

Trauma, of one type or another, is a common presentation in any practitioner’s office. In this course we will explore the diagnostics and treatment of trauma. The program will be held in a beautiful setting overlooking the Pemigewasset River in Lincoln, New Hampshire, nestled in the White Mountain National Forest. Time to rest, reflect and celebrate life is built into this program.

CME: The University of New England is accredited by the American Osteopathic Association to provide continuing medical education credits for physicians. This course has been designated for 19.50 Category 1A credits.

**To register for this course or for more information please visit our website at www.jamesjealous.com.** You may also contact Marnee Jealous Long at (813) 649-0708 or mjlong@tampabay.rr.com for more information.
This Year’s Convocation Awards

Chapter Awards for 2007-2008

Each year the UAAO gives out awards to recognize outstanding local UAAO Chapters. The two awards that are given each year are the Chapter of the Year and the Outreach Chapter of the Year. Chapter Year End Reports are used to calculate VIP points (used to determine the winners) and evaluate the involvement of each chapter in both their school activities and surrounding communities.

UAAO Chapter of the Year

This award is presented to the UAAO Chapter that most exemplifies the spirit of UAAO, and accumulates the most VIP points throughout the year. VIP points are earned by meeting deadlines outlined within the 2007-2008 UAAO Chapter Notebook, tallying membership percentages, donating auction items, and participating in UAAO sponsored events. This award is presented at the President’s Banquet on Saturday evening of Convocation. This is a team effort!

Chapter of the Year

VCOM

Congratulations to LMU-DCOM for winning this years Disco Dance competition. The amount of dedication to and promotion of UAAO programs by VCOM was unsurpassed this year!

UAAO Outreach Chapter of the Year

This award is presented to the chapter that demonstrates the most outstanding involvement in both their school and surrounding community. The quality as well as quantity of outreach events are taken into consideration when selecting the winner. Community outreach activities that utilize osteopathic principles and practice are the heart of the Outreach award, which is voted on by the UAAO Executive Council at the annual Convocation. The award is presented at the President’s Banquet on Saturday evening of Convocation.

Outreach Chapter of the Year

VCOM

Great job VCOM! This school was an excellent example of hard work and determination in the promulgation of osteopathic principles!

UAAO Most Improved Chapter of the Year

This award is presented to the UAAO chapter that possesses a fantastic new set of officers that truly turn their club status around. Drastic improvements are shown in the clubs VIP points with many new functions and activities. This award represents the spirit of improving osteopathy.

Most Improved Chapter

NYCOM

Congratulations to NYCOM and keep on this track to greatness for your chapter.

New Chapter Excellence Award

This award is presented to the new UAAO chapter that has shown true drive in making their chapter the best it can be in spite of the hardship of establishing a new chapter.

New Chapter Excellence

LMU-DCOM

Congratulations to both new chapters and keep up the good work as we hope to see great things from you in the future.

TUCOM-NY

A. Hollis Wolf Competition Winners 2008

UAAO would like to thank all the competitors for a great performance, all the judges for taking the time to come to the event, and especially the prize contributors for their fantastic gift donations.

Grand Prize:

James Bailey—PCOM

1000 Euros donated by the European Federation of Osteopaths (EFO) from Armand Gersanois along with $900 cash prize donated by Dr. Ostrow

Second Prize:

Lauryn Vandernooth—NYCOM

Full Basic Biodynamics Course donated by Dr. James Jealous along with $600 cash prize donated by Dr. Ostrow

Third Prize:

Jamie Rapacciaolo—UMDNJ

Foredom Percussion Hammer along with $300 cash prize donated by Dr. Ostrow

Additional Awards for Convos ‘08

Your UAAO Executive Council may plan Convocation (with lots of help!), but it is the volunteers from local chapters who make it happen as planned. This year, two of these volunteers were recognized for going above and beyond the call of osteopathic duty.

Michelle Owens from KCUMB, Empress Gramas from VCOM, and Wayne Sherman from UMDNJ. We thank both of you so much for all of your time and aid. Congratulations goes out to these two for winning this year’s Volunteers of the Year award.

Congratulations also to Jed Ballard & David Kohn both from DMU-COM for winning this years Disco Dance and Disco Costume Competitions respectively at our student mixer. Your school must truly have the disco spirit.

Convocation is such a hectic time for the Council and every bit of aid we get helps exponentially, so thank you again for your help.

More thanks goes out to all the other clubs’ volunteers that helped as well. We truly do appreciate all of your help and hope to see you or other representatives from your school to assist us again next year to make Convos run even smoother.

Thanks to all, and see you again next year in Little Rock, AK. Keep an eye on the website for updates.

Fourth Prize:

Miko Rose—TUCOM

$500 towards an osteopathic course or convention donated by Drs. Kerry & Robert Agnello

Fifth Prize:

Elise Halajian—CCOM

Neurofascial release course (full DVD set) donated by Dr. Davidson along with $100 donated by Dr. Julie Jenkins to be used toward any osteopathic course

Congratulations also goes out to the other competitors: Kristen Prewitt—DMU-COM, Elena Timoshkin—NSU-COM, Brian Ault—COMP, Mike Roach—KCUMB, Joe Keen—UNECOM, Angelica Perry—VCOM.

For more information on the A. Hollis Wolf Competition, please check the national UAAO website: www.academyofosteopathy.org/ uaaoholliswolf.htm

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The Undergraduate American Academy of Osteopathy (UAAO) has been organized by students of the accredited U.S. osteopathic medical colleges under the auspices and guidance of the American Academy of Osteopathy (AAO) for the purposes for helping osteopathic medical students to:

1. Acquire a better understanding of Osteopathic principles, theories, and practice to include:
   a. helping students attain a maximum proficiency in osteopathic structural diagnosis and treatment
   b. fostering a clear concept of clinical application of osteopathy in health and disease.

2. Improve public awareness of osteopathic medicine so that the community may better take advantage of the benefits provided by the compete health care concept of osteopathic medicine.

We hope that this publication of the Still Point helps to accomplish these ideals, and encourage any thoughts, comments, or questions regarding this or future issues!

-UAAO National Council