GME Annual Report 2015-2016

Prepared By: Members of the UW-DFMCH Graduate Medical Education Committee (GMEC)

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For additional information about our DFMCH residency programs, please visit our website at:
http://www.fammed.wisc.edu/residency

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**PURPOSE**
The purpose of the Graduate Medical Education (GME) Annual Report for academic year 2015-2016 is as follows:

- To review and document our GME accomplishments and initiatives during the year.
- To communicate information regarding the residency programs to the department, hospital and teaching partners, and the University of Wisconsin School of Medicine and Public Health.

**OVERVIEW**
- The University of Wisconsin Department of Family Medicine and Community Health’s (UW-DFMCH) sponsored Residency Programs in the 2015-2016 academic year included: Baraboo Rural Training Track, Eau Claire, Madison, Wausau, and the Statewide Osteopathic Family Medicine Residency that is integrated into the other programs and also includes osteopathic residents from the aurora program in Milwaukee.
- Programs are sponsored by the University of Wisconsin School of Medicine and Public Health.
- 80 residents statewide; plus 17 osteopathic residents in Milwaukee.
- 27 graduates in 2016, 15 of whom will remain in Wisconsin.
  - Of graduates remaining in Wisconsin, 8 have chosen a practice site, and 3 were accepted into Wisconsin fellowship training programs.
- Longstanding educational partnerships with hospital and community physicians throughout Wisconsin.
- All programs are dually-accredited by the Accreditation Council for Graduate Medical Education (ACGME) and the American Osteopathic Association (AOA) and have, in the past year, received Osteopathic Recognition from the ACGME.

**Institutional GME Leadership:**
The University of Wisconsin School of Medicine and Public Health (UW-SMPH) is the sponsoring institution for our residency programs and has delegated administrative authority to the UW-DFMCH. A Graduate Medical Education Committee (GMEC), with faculty, resident and staff representation from each program, monitors and advises on all aspects of GME, sets statewide GME policies, and provides oversight for the UW-DFMCH residency programs.

With delegated administrative authority from the UW-SMPH to the UW-DFMCH:
- **Valerie Gilchrist, MD** serves as Department Chair.
- **William Schwab, MD** serves as the Designated Institutional Official (DIO) for ACGME Accreditation, Vice Chair for Education, and Chair of the UW-DFMCH Graduate Medical Education Committee.
- **Mark Robinson, DO** serves as the Statewide Osteopathic Residency Program Director.
- **Michelle Grosch, MA**, Director of Educational Services, serves as the lead GME staff person, and the ACGME Institutional Coordinator.
- **Randy Ballwahn** is the Financial and Contract Specialist.
- **Jenny White** serves as the Statewide Osteopathic Residency Program Education Coordinator.
Residency Program Leadership:
Each UW-DFMCH residency program location operates under the leadership of a Program Director, and has a designated Education Coordinator:

- **Baraboo Rural Training Track**: Stuart Hannah, MD, Program Director, and Angie Womble, Education Coordinator.
- **Eau Claire**: Joan Hamblin, MD, Program Director, and Paula Naumann, MA, Education Coordinator.
- **Madison**: Kathy Oriel, MD, MS, Program Director, and Jenny White, Education Coordinator.
- **Wausau**: Kevin O'Connell, MD, Program Director, and Deanna Froehlich, Education Coordinator.

National Leadership and Local Excellence
With a department rich in faculty expertise and resources, the UW-DFMCH has much to offer the residents in training, for instance:


**Full Spectrum Family Medicine Training**: Our graduates are well-prepared to obtain full hospital privileges, including critical care medicine and obstetrics, additionally; opportunities exist for procedural training in colonoscopy, vasectomy, caesarian section, OB ultrasound, colposcopy, LEEP, and more.

**Expert Faculty**: Many of our faculty are internationally or nationally known leaders in aspects of Family Medicine including integrative medicine, global health, addiction medicine, maternity care, geriatrics, sports medicine, developmental disabilities, community health, and more.

**Diverse Practice Settings**: Our residents have opportunities to experience a variety of practice backgrounds, including rural, urban, suburban, underserved, and international communities.

**Community Health**: UW-DFMCH physicians are embedded in communities throughout areas in Wisconsin and engage with community partners to lead projects that reflect local needs. Supported by our faculty, residents are involved in these projects as a requirement of their curriculum with the goal of “preparing future family physicians to respond to the general health of their communities, as well as provide personal care for individuals and families.”

**Dual MD/DO Accreditation**: All of the UW-DFMCH residency programs are dually accredited by the Accreditation Council for Graduate Medical Education and the American Osteopathic Association. In addition, each of the UW-DFMCH residency programs is among the first residency programs in the country to earn Osteopathic Recognition status from the ACGME.

**Research and Publications**: This department is one of the top nationwide in NIH awards and other grants. This gives, the department the capacity to offer residents an array of excellent opportunities for research. Additionally, residents have opportunities to write articles for publication with faculty guidance.

**Fellowships**: UW-DFMCH additionally offers research fellowships in Primary Care and Complementary and Integrative Health. Additionally, the department offers fellowships in Integrative Medicine, Addiction Medicine, Academic Medicine, and Sports Medicine.
Local and State Connections: Residents gain professional experience in local communities and benefit from the unique opportunities offered by our extensive statewide academic department.

New Residents 2015-2016:
In the 2015-2016 academic year The UW-DFMCH welcomed 27 first year residents to our residency programs and 7 new residents to the Statewide Osteopathic Program. (13 total including Milwaukee)

Baraboo
- Mathew Herbst, MD, University of Wisconsin School of Medicine and Public Health
- Paul Stevens, MD, University of Wisconsin School of Medicine and Public Health

Eau Claire
- Michael Albano, DO, Lake Erie College of Osteopathic Medicine*
- Krissi Danielsson, MD, Lund University - Sweden
- Michael Dawson, MD, Medical University of the Americas
- Raheel Naseeruddin, MD, American University of Antigua College of Medicine
- Amy Sorensen, DO, Kansas City University of Medicine and Biosciences*

Madison
- Matthew Brown, MD, University of Wisconsin School of Medicine and Public Health
- Anna Chase, MD, Wayne State University School of Medicine
- Lydia Chen, MD, University of Illinois College of Medicine
- Allison Couture, DO, Chicago College of Osteopathic Medicine of Midwestern University*
- Milap Dubal, MD, Saint Louis University School of Medicine
- Ellen Gordon, MD, University of Illinois College of Medicine
- Divneet Kaur, MD, Oregon Health & Science University School of Medicine
- Yoshito Kosai, MD, Case Western Reserve University School of Medicine
- Lucas Kuehn, MD, University of Wisconsin School of Medicine and Public Health
- Andrew Maiers, DO, Des Moines University College of Osteopathic Medicine*
- Katherine McCready, MD, Tufts University School of Medicine
- Tina Ozbeki, MD, Tufts University School of Medicine
- Mukund Premkumar, MD, University of Iowa Roy J. and Lucille A. Carver College of Medicine
- Lauren Walsh, MD, University of Wisconsin School of Medicine and Public Health

Wausau
- Hamid Assadi, MD, Ross University School of Medicine
- Quang Cao, MD, Saint James School of Medicine
- Danielle Fenske, DO, Rocky Vista University College of Osteopathic Medicine*
- Rose Griffin, MD, University of Sint Eustatius School of Medicine
- Sean Huff, DO, Lincoln Memorial University DeBusk College of Osteopathic Medicine*
- Justin Hwang, DO, Touro University College of Osteopathic Medicine*

*Simultaneously enrolled in the UW DFMCH's ACGME accredited allopathic residency program and the AOA accredited osteopathic program
Milwaukee
- Scott Chandler, DO, Western University of Health Sciences/College of Osteopathic Medicine **
- Christopher Cook, DO, Chicago College of Osteopathic Medicine of Midwestern University **
- Kristin Dement, DO, Chicago College of Osteopathic Medicine of Midwestern University **
- Raheel Mody, DO, Chicago College of Osteopathic Medicine of Midwestern University **
- Caleb Patee, DO, Pacific Northwest Unv. of Health Sciences College of Osteopathic Medicine **
- Christopher Peters, DO, Des Moines University College of Osteopathic Medicine **

**Simultaneously enrolled in the Aurora’s ACGME accredited allopathic residency program, and the UW SMPH sponsored AOA accredited osteopathic program.

Residency Graduates Class of 2016:

Baraboo:
- Caitlin Hill, MD, Obstetrics Fellowship, Essentia Institute of Rural Health, Duluth, MN

Eau Claire:
- Megan Hoel, DO, Mariner Clinic, Superior, WI
- Harry Kahlon, MD, Mercy Hospital, Buffalo, NY
- Jessie Lindemann, MD, Sanford Health, Fargo, ND
- Alena Marozava, MD, Allina Health, Coon Rapids, MN
- Chameng Vang, DO, Allina Health, Champlin, MN

Madison:
- Alison Brock, MD, Hennepin County Medical Center, Geriatrics Fellowship, Minneapolis, MN
- Christopher Danford, MD, Triad Hospitalists, Greensboro, NC
- Maria Din, DO, Dean Clinic West, Madison, WI
- Sean Duffy, MD, UW-DFMCH Academic Fellowship, Madison, WI
- Jasmine Hudnall, DO, UW Palliative Care Fellowship, Madison WI
- Rachel Lee, MD, Henry Ford Health System, Detroit, MI
- Julia Lubsen, MD, UW Geriatrics Fellowship, Madison, WI
- Julia McMillen, MD, Dean Clinic, Sun Prairie, WI
- Vincent Minichielo, MD, UW-DFMCH Integrative Medicine Fellowship, Madison, WI
- Lisa Netkowicz, MD, Dean Clinic East, Madison, WI
- Jessica O’Brien, MD, Aurora Midtown Health Center, Milwaukee, WI
- Joshua Schulist, MD, Locum Tenens, New Zealand
- Walker Shapiro, MD, ACHC William T. Evjue Clinic, Madison, WI
- Anna Veach, DO, Neuromuscular Medicine Residency, Maine-Dartmouth Family Practice, Waterville, ME

Wausau:
- Leanne Anderson, DO, Aspirus Medford Clinic, Medford, WI
- Matthew Callahan, MD, Scripps Coastal Medical Group, San Diego, CA
- Taha El Shahat, MD, St. Agnes Hospital, Fond du Lac, WI
Post-Graduation Plans: Class of 2016:
27 residents graduated from our UW-DFMCH-sponsored programs in 2016. 15 (56%) will remain in Wisconsin following graduation, either in practice or in a fellowship:

Where are the 2016 Graduates going?

- Wisconsin: 56%
- Other states: 38%
- International: 3%
- TBD: 3%

What are the 2016 Graduates doing?

- Practice: 74%
- Fellowships: 22%
- TBD: 4%
GME Institutional Report:

Academic Year 2015-2016 (July 1, 2015- June 30, 2016)
University of Wisconsin Department of Family Medicine and Community Health

GMEC Chair/DIO: William Schwab, MD
ACGME Institutional Coordinator: Michelle Grosch, MA
Institutional Self-Study scheduled for: April 1, 2024
ACGME Clinical Learning Environment Review Visit: To be Announced
Accreditation: Five dually accredited (ACGME/AOA) programs/Five programs with Osteopathic Recognition

Institutional Overview:
The University of Wisconsin School of Medicine and Public Health is the sponsoring institution for our residency programs, and has delegated administrative authority to the Department of Family Medicine and Community Health (UW-DFMCH).

A Graduate Medical Education Committee (GMEC) is the governing and decision-making committee for residency education. GMEC establishes statewide GME policies and procedures, and provides oversight for the programs. The committee has representation from each program; William Schwab, MD serves as the Chair of GMEC and as the Designated Institutional Official (DIO) for ACGME accreditation while Michelle Grosch, MA serves as the Director of Educational Services, and the Institutional Coordinator for ACGME accreditation.

Subcommittees of the GMEC include:
- **Duty Hours**: Assists the GMEC with duty-hours oversight.
- **Resident Recruitment**: Responsible for statewide resident recruitment, including assessment of needs and outcomes of recruitment strategies.
- **Education Management Team**: Focuses on GME administrative details and operations, improvement of processes and procedures, and implementation of GME initiatives.

The UW-DFMCH sponsors residency programs located throughout Wisconsin in Baraboo, Eau Claire (with an alternative training site in Augusta), Madison, and Wausau.

Under the direction of Mark Robinson, DO, and Jenny White, the UW-DFMCH administers a statewide osteopathic residency training program. With osteopathic residents at each of the above locations in addition to the Aurora Family Medicine Residency Program in Milwaukee, WI.
Statewide Initiatives and Accomplishments:

Resident Graduates Serving Wisconsin: Of our 27 graduates in the class of 2016, 15 (56%) stayed in Wisconsin.

Successful Resident Recruitment Season: With considerable competition for Family Medicine residents throughout the country, UW-DFMCH filled all 27 open positions for the class of 2019, while 13 new osteopathic residents were recruited for the Statewide Osteopathic Program.

Educational Quality:

Accreditation status:

- Institutional Accreditation:
  - Ongoing Accreditation: The IRC granted the Continued Accreditation status effective April 27, 2016, and commended the institution for “demonstrated substantial compliance with the ACGME’s Institutional Requirements without any new citations.”
  - Self-Study: The Institution is due for a self-study on April 1, 2024.
  - Clinical Learning Environment Review (CLER): The Institution has not had its first CLER visit.

- Program Accreditation: All programs achieved continued accreditation status with minimal or no citations.
Residents’ perception of the program: Residents are surveyed annually by the ACGME in late winter/early spring and by the statewide Graduate Medical Education Committee in the fall. These surveys are used as a means to assess and monitor educational quality, and to identify areas in need of improvement.

This past year:

- Results from the 2016 ACGME Annual Resident Survey show that 88% of the residents rated the overall evaluation of their program as Very Positive or Positive, placing UW-DFMCH higher than the national mean.

- Results from the fall 2015 GMEC Annual Resident Survey show that 93% of the residents rated the overall program as Very Positive or Positive, 5% rated it as Neutral, and 1% rated it as Negative.

Board Passage Rate: The Institution achieved a 100% pass rate on the 2016 American Board of Family Medicine Certification Exam.

Institutional Administrative Activities:

- Gundersen Lutheran Medical Foundation (GLMF) and UW-DFMCH leadership formalized an academic partnership between the GLMF Family Medicine Residency program and the UW-DFMCH with the intent of strengthening graduate medical education in Family Medicine throughout the state.

- The ACGME approved the UW-DFMCH’s statewide residency programs for Osteopathic Recognition, demonstrating the programs offer osteopathic training that follows training guidelines outlined by the ACGME’s Osteopathic Principles Committee. The programs were among the first 13 family medicine residency programs in the nation to receive the recognition. Our statewide osteopathic program also received full reaccreditation from the American Osteopathic Association with excellent review scores.

- GMEC held two on-site topical meetings in 2015-16. The September 2015 meeting focused on strategic planning for the structure and focus of GMEC going forward. Members identified educational topical areas of interest for future meetings, ways to more meaningfully involve residents in GMEC, and streamline meeting format. The May 2016 meeting centered on resident wellbeing and resilience. Residents, Program Directors and Staff shared information on climate issues, best practices, and brainstormed ways to promote and support resident wellbeing and resilience.

Clinical Learning Environment Review (CLER):

The ACGME’s CLER program objectives are to assess the graduate medical education (GME) learning environment of each sponsoring institution and its participating sites. As described by the ACGME, “CLER emphasizes the responsibility of the sponsoring institution for the quality and safety of the environment for learning and patient care. The CLER program’s fundamental goal is to transition from a targeted focus on duty hours to a broader focus towards the GME learning environment and how it can deliver higher-quality physicians and higher quality, safer patient care.”

The ACGME has completed two rounds of CLER visits. UW-DFMCH has not had its first CLER visit to date. The Department expects first visit to occur during the 2016-17 academic year. The ACGME has indicated that CLER visit data will not be used in accreditation decisions by the Institutional Review Committee (IRC), rather the purpose is to provide feedback, learn, and to help establish
baselines for sponsoring institutions, the Evaluation Committee, and the IRC. Each of our sponsored programs is partnering with their participating sites to ensure that residents and faculty are fulfilling the objectives outlined in the CLER focus areas. In the following pages, each program describes their activities within the six CLER focus areas: 1) Patient Safety; 2) Quality Improvement; 3) Transitions in Care; 4) Supervision; 5) Duty Hours Oversight, Fatigue Management, and Mitigation 6) Professionalism.
FAMILY MEDICINE RESIDENCY

PROGRAM REPORTS
BARABOO RURAL TRAINING TRACK REPORT

Academic Year 2015-2016 (July 1, 2015- June 30, 2016)
University of Wisconsin Department of Family Medicine and Community Health

Baraboo Program Director: Stuart Hannah, MD
Associate Program Directors: Shari Munneke, MD
Education Coordinator: Angie Womble
Number of Residents in the Program: 6
ACGME Self Study scheduled for: September 1, 2018

Program Overview:
Stuart Hannah, MD serves as the Program Director for the Baraboo Rural Training Track (RTT). Shari Munneke, MD each serves as the Associate Program Director. Angela Womble serves as the Education Coordinator for the program.

The curriculum in Baraboo follows a 1-2 residency format:

- In the first year of training, Baraboo residents participate in rotations in Madison with the Madison program residents, and begin their continuity clinic in Baraboo two half-days per week.

- During the second and third year, residents spend majority of their time in Baraboo in rural practice, and on specialty rotations in Baraboo and Madison. The second and third years of training follow an apprenticeship style of learning. Residents build their own patient care practices, practice alongside faculty as colleagues, while being able to participate in weekly educational conferences with the Madison program residents, and attend continuing medical educational conferences in Baraboo on Thursday mornings. Residents spend brief time away from regular practices to incorporate additional specialty rotations.

The program welcomed two new PGY-1 residents in the 2015-2016 academic year:

- Mathew Herbst, MD, University of Wisconsin School of Medicine and Public Health
- Paul Stevens, MD, University of Wisconsin School of Medicine and Public Health

The 2016 graduate and her practice location is:

- Caitlin Hill, MD, Essentia Institute of Rural Health-Obstetric Fellowship Program, Duluth MN

Initiatives and Accomplishments

Training Residents for Rural Practice and the Local Community: Since the program began in 1996, 69% of the Baraboo graduates practice in rural Family Medicine. Rural Family Medicine is defined as towns with less than 20,000 people, and more than one hour from a metropolitan area.

- 61% of the Baraboo graduates provide maternity care for these rural communities. This is a favorable outcome of the program, as two-thirds of the deliveries in rural communities are by Family Medicine physicians.

- Over 50% of the program’s graduates have stayed in Wisconsin. In addition, a 2015 graduate will return to practice in Wisconsin after graduating from an OB Fellowship in Washington. This is important in light of the looming rural physician shortage; that is expected to worsen in the upcoming years.
Five graduates of the program are practicing in the Baraboo community, and have become part of the Rural Training Track faculty. This is significant to the local community because of the anticipated retirement of physicians over the next five years.

2016 Match Results: The Program recruited for two resident positions this year, and successfully filled both in the National Resident Matching Program (NRMP).

Resident-Led Curriculum Development: Third year resident Caitlin Hill, MD actively taught OB Skin-to-Skin protocol at several venues. As a result, Skin-to-Skin is now utilized by family medicine physicians at St. Clare hospital. Third year resident Neil Cox, MD and second year resident Matt Herbst, MD, plan to develop guided ultrasound joint injection curriculum during the 2016-2017 academic year.

Quality of Education: The Baraboo resident scores on the American Board of Family Medicine (ABFM) In-Training Examination remain above the national mean. Also, for the past six years Baraboo PGY3 residents have successfully passed the ABFM board exam on their first attempt, with a program composite score of 626; well above the national composite score of 492.

Resident Well-Being/Resilience Initiatives: Monthly, the Baraboo residents participate in faculty-led Behavioral Health sessions that include time for introspection and centering. The residents are provided behavioral health tools to not only care for their patients, but for themselves as well.

Resident Scholarly Work:

Presentations:

Puglisi, A. DKA. UW-DFMCH Survival Skills, October 1, 2015, Madison, WI.

Cox, N. Seizure. UW-DFMCH Survival Skills, October 15, 2015, Madison, WI.

Hill, C. The Crying Colicky Infant and Other Stressful Topics for the Childless Physician: Quick tips and skills that all of us can use in practice. St. Mary’s Hospital/UW-DFMCH Primary Care Conference, December 9, 2015, Madison, WI.

Puglisi, A. Sugar and Spice: Wouldn’t a Lower HgbA1c be Nice? St. Mary’s Hospital/UW-DFMCH Journal Club March 2, 2016, Madison, WI.

Labby, K. A Wee Bit of the Consumption. St. Mary’s Hospital/UW-DFMCH Primary Care Conference, January 6, 2016, Madison, WI.

Hill, C. A Multi-Year RPAP Community Health Project: Preventive Health Care for the Amish. STFM Annual Spring Conference, May 3, 2016, Minneapolis, MN

Faculty Scholarly Work:

Hannah, S. Essential Skills for Teaching Medical Students and Residents. Rural Medical Educators Faculty Development Conference, September 25, 2015, Madison, WI.

Hannah, S. taught Advanced Life Support for Obstetrics (ALSO) to incoming UW Family Medicine Residents at St. Mary’s Hospital, June 16 and June 17, 2016.

Munneke, S. taught Advanced Life Support for Obstetrics (ALSO) to incoming UW Family Medicine Residents at St. Mary’s Hospital, June 16 and June 17, 2016.
Faculty and Staff Serving Rural Residency Training Initiatives:

- Stuart Hannah, MD and Angela Womble continue to serve on the Wisconsin Collaborative for Rural Graduate Medical Education (WCRGME) sponsored by the Rural Wisconsin Health Cooperative. The Collaborative exists to develop or expand family medicine Rural Training Tracks (RTT), rotations, fellowships, and medical student elective sites. Dr. Hannah has been a guest speaker, presenting on the history and experiences of the Baraboo Program.

- Stuart Hannah, MD serves as a rural family medicine residency consultant for several rural Wisconsin hospitals, the University of Minnesota-Duluth, Hood River, Oregon RTT, Brainerd and Ely, Minnesota RTT’s and the University of Illinois-Dixon. In addition, he is a board member of the RTT Collaborative.

- The Baraboo Program participated in data collection for Dave Schmitz, MD, Associate Program Director of Idaho Rural Family Medicine Residency, who is studying RTT’s nationwide via a federal grant.

Faculty Development:

- Rural Wisconsin Health Cooperative conducted the Rural Medical Educators Annual Faculty Development Session on September 25, 2015. Topics/Presenters included:
  - Time Flies: Teaching Efficiently and Effectively in a Busy Practice, Allen Last, MD, MPH
  - Essential Skills for Teaching Medical Students and Residents, Byron Crouse, MD and Stuart Hannah, Evaluating
  - Incorporating Learning Styles in Teaching Methods, Jo Anne Preston, MS
  - A Killer Orientation for Staff, Students & Residents, Lisa Dodson, MD
  - A Survey of Time Saving Technologies, Justin Knupp, MBA

- Recruitment, Stu Hannah, MD, Kathy Oriel, MD, Bill Schwab, MD, October 15, 2015.

- Physician Burnout, Alan Schwartzstein, MD, January 6, 2016.

- The program also provides informal faculty development at semi-annual evaluation, Program Evaluation Committee (PEC) and Clinical Competency Committee (CCC) meetings.

CLER Focus Area Reports

Patient Safety: Residents complete patient safety orientation at the comprehensive UWDFM – Madison orientation during PGY1, PGY2 and PGY3. In addition, they receive clinical safety training through the Dean system in order to accurately report incidents and near misses. In conjunction with the core program, Madison, residents at all PGY levels participate in patient safety seminars. PGY1 residents participate in Team STEPPS during PGY1 seminar.

Quality Improvement: PGY2 and PGY3 residents participate in clinical Rapid Improvement Events and also completed ABFM Performance in Practice Modules (PPM) in areas such as Diabetes Management, Asthma and Depression. Other QI projects include the following:

- Caitlin Hill, MD and Kira Labby, MD (PGY3): Hand Hygiene PPM QI project via ABFM Part IV Maintenance of Certification (MOC).

- Abby Puglisi, PGY2 participated in a system-wide Diabetes Management in Primary Care Rapid Improvement Event in the fall of 2015.

- Caitlin Hill, MD finalized and implemented Skin-to-Skin: An Important Intervention in obstetrics.
• Residents are active in suggesting process/quality improvement initiatives at clinical/hospital meetings.

• As a clinic-wide initiative, the residents participated in the Reach Out and Read Program. An evidence-based program to address health disparities by promoting childhood literacy was established at the clinic level in 2011.

Transitions in Care:
During PGY1 inpatient rotations, residents utilize the same SIGNOUT system as the Madison residents. See Madison’s report on Transitions in Care for further details see page 24. During PGY2/PGY3, Baraboo residents utilize both paper and verbal handoff systems with their respective inpatient hospital preceptors. Education regarding transitions in care is provided during orientation as well as ongoing seminars and informal communications.

Supervision:
All resident patient care in the inpatient and outpatient settings is supervised by Program or Community faculty.

• Resident schedule templates ensure adequate time for supervision according to the resident’s level of training and acuity of patient needs.

• The Baraboo program has a policy, reviewed annually, that outlines the supervision needs for each level of training in each of the inpatient and outpatient settings. Procedures performed by residents are directly supervised by a faculty member.

• The program annually surveys resident satisfaction with the supervision provided by program and community faculty. The program also reviews the annual ACGME Resident survey, in which residents are able to express their satisfaction with the supervision provided.

Duty Hours:

• Resident orientation includes detailed education about ACGME rules regarding duty hours, and signs of sleep deprivation and fatigue.

• New Innovations data management system is used to record and audit resident duty hours. Duty hour audits occur on an ongoing basis. Aberrant duty hour reports undergo investigation and correction by the Program as appropriate.

• Results of the ACGME resident survey conducted in April 2015 showed that the Baraboo Program was in full compliance with the duty hour requirements

Professionalism:
During their annual orientation, the expected standards of professionalism are reviewed. Throughout the year, professionalism is addressed at seminars, clinic didactics, and various hospital meetings. In addition, they complete online professionalism modules via the Challenger program.
Eau Claire Program Report

Academic Year 2015-2016 (July 1, 2015- June 30, 2016)
University of Wisconsin Department of Family Medicine and Community Health

Eau Claire Program Director: Joan Hamblin, MD
Education Coordinator: Paula Naumann, MA
Number of Residents in the Program: 17
ACGME Self Study scheduled for: June 1, 2021

Program Overview:
Under the leadership of Joan Hamblin, MD, Program Director, the Program had 17 residents in this academic year: five in the first year, five in the second, and seven in the third (two off-cycle residents completed training in July and August). Paula Naumann serves as the Education Coordinator for the program. Seven core Family Medicine faculty, including a behaviorist, provide teaching and supervision for the Eau Claire/Augusta residents. Additionally, approximately 70 volunteer faculty serve as teachers for hospital in-patient and out-patient resident rotations.

The program provides diverse settings for residents' continuity practices. A state-of-the-art clinical facility in Eau Claire includes a human patient simulation hospital lab for teaching. A short distance away, the Augusta clinic offers a rural practice setting. Both the Eau Claire and Augusta residency clinics are a nationally recognized Patient Centered Medical Home and have received multiple Press Ganey Star Clinic Awards for excellence in patient care.

The program welcomed five new residents in the 2015-2016 academic year:

- Michael Albano, DO, Lake Erie College of Osteopathic Medicine
- Krissi Danielsson, MD, Universitet I Lund
- Michael Dawson, MD, Medical University of the Americas
- Raheel Naseeruddin, MD, American University of Antigua College of Medicine
- Amy Sorensen, DO, Kansas City University of Medicine and Biosciences

The 2016 graduating residents and their practice locations are:

- Megan Hoel, DO; Mariner Clinic, Superior, WI
- Harry Kaholn, MD; Mercy Hospital, Buffalo, NY
- Jessie Lindemann, MD; Sanford Health, Fargo, ND
- Alena Marozava, MD; Allina Health, Coon Rapids, MN
- Chameng Vang, DO; Allina Health, Champlin, MN

Initiatives and Accomplishments

Community Engagement: Eau Claire Family Medicine is collaborating with the local juvenile detention center. Residents are offering health-related talks on a monthly basis. So far, residents have presented information on a variety of requested topics: 1) Dental Hygiene and Oral Health; 2) Sexually Transmitted Disease; 3) Sleep Hygiene; and 4) Mental Health (Dealing with Stress)

This year we also had presentations for Augusta Elementary School and Sam Davey Elementary School (in Eau Claire) on the following topics: 1) Hand Washing; 2) Heart Health; 3) Nutrition Education; 4) Adolescent Health; and 5) Tar Wars.
Residents presented at the Chippewa Falls Middle School as well on the topic of Human Responsibility, and volunteered to conduct sports physicals at Regis High School and Augusta and Menomonie middle schools.

Residents and staff were present to strengthen our partnership with Chippewa Valley Technical College by working together at these events:
- Respiratory Therapy Human Patient Simulator session
- New Student Orientation
- Give a Kid a Smile Day (at the dental clinic)
- Juvenile Detention Center Oral Health

In addition, residents and staff were involved with the following community events, and residents fulfilled Community Medicine participation requirements:
- Big Rig Truck Show
- Augusta Back to School Event
- Eau Claire Summer Fest
- Eau Claire Area Chamber Business Expo
- Augusta Schools Family University

**2016 Match Results:** The Program recruited and successfully filled five resident positions this year, four of which matched with Eau Claire and one with Augusta.

**Residents’ Perception of their Program:** Residents are surveyed annually by the ACGME in late winter/early spring and by the statewide Graduate Medical Education Committee in fall. These surveys are used as a means to assess and monitor educational quality, and to identify areas in need of attention. This year’s results were:
- Results from the 2015-2016 ACGME Annual Resident Survey show that 69% of the residents rated the overall program as *Very Positive* or *Positive*, 23% percent rated it as *Neutral*, 8% rated it as *Negative*, and no *Very Negative* responses.
- Of nine residents responding to the 2015 GMEC Annual Resident Survey, 55% of the residents rated their overall experience as *Very Positive* or *Positive*, 60% described it as neutral, and 11% described it as negative.

**In-Training Examination Scores:** The Eau Claire residents continue to have a strong performance on the American Board of Family Medicine’s (ABFM) annual In-Training Examination. For the fall of 2015 exam, the mean score for all three residency years was 421 compared to 417 nationally.

**ABFM Certification Exam Performance:** 100% of the 2016 Eau Claire graduates passed the ABFM Board Certification Exam.

**Pre-residency curriculum:** The goal continues to be to provide structured experiences for International Medical Graduates to increase their understanding of the basic skills needed and greater exposure to the United States health care system. In June of 2016 two incoming residents took advantage of the externship program. The externship schedule this year included a half-day session with pediatric patients.

**Curriculum Reviews:** The faculty curriculum coordinator and the Education Coordinator have continued to review and revise each curriculum as needed. During the 2015-2016 program year, changes to the Community Medicine curriculum were approved by the Education Committee and implemented. Each resident conducted a thorough review of one area of the curriculum and presented their findings and recommendations at the Annual Program Review on April 28, 2016.
Resident well-being and resilience initiatives:
- Intern wellbeing sessions are held on the first Thursday of every month, and are coordinated by Jaime Stringer, MD.
- Joan Hamblin, MD; Jennifer McGeorge; Michael Braunsky, DO; and Gretchen Adams, DO attended the GMEC meeting in Wausau on May 26, 2016; this meeting’s agenda was focused on resident wellbeing.
- Gretchen Adams, DO and Michael Braunsky, DO led discussion on resident wellbeing at Res Rap meeting on June 2, 2016.

Plans for upcoming year:
- Due to the success of the monthly intern wellbeing sessions, Eau Claire program will add quarterly PGY2 and PGY3 wellbeing sessions.
- In order to alleviate some of the stress encountered on the FMS rotation, resident schedules will be adjusted to accommodate the senior resident with more time at the hospital on clinic days.

Faculty Awards 2015-2016:
- Jaime Marks, MD – graduated from the Society of Teachers of Family Medicine’s (STFM) Emerging Leaders Class of 2016.

Resident Awards 2015-2016:
- Gretchen Adams, DO
  - 2015 WAFP Glenn P. Clifford Memorial Scholarship Award
  - Conference Presentation of the Year Award (Malpractice)
- Jessie Lindemann, MD,
  - Conference Presentation of the Year Award (Pediatric Orthopedic Jeopardy)

Resident Scholarly Work:

Presentations:

Adams, G. and Sachak, S. Global Health Partnership: UWECFMR and Midwives for Haiti. Sacred Heart Hospital Grand Rounds, August 13, 2015; Eau Claire WI

Adams, G. and Sachak, S. Global Health Partnership: UWECFMR and Midwives for Haiti. STFM Annual Spring Conference, May 3, 2016; Minneapolis, MN

Braunsky, M. Premenstrual Syndrome and Premenstrual Dysphoric Disorder. Sacred Heart Hospital Grand Rounds, May 12, 2016; Eau Claire, WI.

Dawson, M. Medicare Hospice Benefit 101. Sacred Heart Hospital Grand Rounds, Jan. 14, 2016; Eau Claire, WI.

Dawson, M. Delivering Bad News. Sacred Heart Hospital Grand Rounds, Jan. 14, 2016; Eau Claire, WI.

Marozava, A. Taking a Sexual History. Sacred Heart Hospital Grand Rounds, July 9, 2015; Eau Claire, WI.

Marozava, A. Ankle Sprains. Sacred Heart Hospital Grand Rounds, Feb. 11, 2016; Eau Claire, WI.
Community Health Projects:

M. Dawson, MD – Family Fun Night, August 1, 2015.

M. Albano, DO; M. Dawson, MD; J. Lindemann, MD; S. Sachak, MD; L. Sauter, MD; M. Hoel, DO; A. Marozava, MD – Big Rig Truck Show, August 14-16, 2015.


C. Vang, DO; M. Braunsky, DO; Lauren Sauter, MD – Hmong New Year Celebration. November 14 & 15, 2015.

G. Adams, DO; M. Dawson, DO; K. Danielsson, MD; Drew Poulos, MD – Human Responsibility Presentations, Chippewa Falls Middle School 8th grades, March 14-16, 2016

Faculty Scholarly Work:

Presentations:

Breen, D. “Walking the Documentation Tightrope” at Sacred Heart Hospital Grand Rounds November 12, 2015; Eau Claire, WI

Breen, D. “Stress EKG” at Sacred Heart Hospital Grand Rounds April 14, 2016; Eau Claire, WI

Breen, D. “COPD” at Sacred Heart Hospital Grand Rounds April 14, 2016; Eau Claire, WI


Cayley, W “Is there a doctor in the house? Is there a doctor in the house?” Responding to calls for medical assistance: Case stories, principles, legalities, ethics” at Sacred Heart Hospital Grand Rounds December 10, 2015; Eau Claire, WI

Cayley, W “Journal Club: An introduction to critical appraisal of articles on therapy” at Sacred Heart Hospital Grand Rounds December 10, 2015; Eau Claire, WI

Gideonsen, M “Newborn Emergencies” at Sacred Heart Hospital Grand Rounds August 13, 2015; Eau Claire, WI

Gideonsen, M “Update on Local Services and Initiatives for Adolescent Health Care” at Sacred Heart Hospital Grand Rounds March 10, 2016; Eau Claire, WI

Gideonsen, M “Review of Selected Topics in Adolescent Care” at Sacred Heart Hospital Grand Rounds March 10, 2016; Eau Claire, WI

Hamblin, J “Applying Ethical Principals to a Complicated Dying Patient” as discussant at Sacred Heart Hospital August 20, 2015; Eau Claire, WI

Hamblin, J “Cases of Everyday Ethics” with discussant, Father Sheehan, MD at Sacred Heart Hospital August 20, 2015; Eau Claire, WI

Hamblin, J “Nuts and Bolts of Scanning” and “Teaching OB Ultrasound” and “Ethics of Obstetrical Ultrasound” Presentation and Proctor at Obstetrical Ultrasound Conference October 1-3, 2015; Madison, WI

Hamblin, J ALSO Instructor at St. Mary’s Hospital June 17, 2016; Madison, WI

Raehl, D “E-Cigarettes: What Do We Know?” at Sacred Heart Hospital Grand Rounds October 8, 2015; Eau Claire, WI

Raehl, D “Biometry” and “Limited vs. Complete Scan” Presentation and Proctor at Obstetrical Ultrasound Conference October 1-3, 2015; Madison, WI
Raehl, D “Foot and Ankle Tendinopathies” at Sacred Heart Hospital Grand Rounds January 14, 2016; Eau Claire, WI

Stringer, J “Comprehensive Review of STI’s” at Sacred Heart Hospital Grand Rounds July 9, 2015; Eau Claire, WI

Stringer, J “Women’s Health Board Review” at Sacred Heart Hospital Grand Rounds July 9, 2015; Eau Claire, WI

Stringer, J “Global Health Partnership: UWECFMR and Midwives for Haiti” at Society of Teachers of Family Medicine Spring Conference May 3, 2016; Minneapolis, MN

Stringer, J Poster: “Implementing a Structured Faculty Development Curriculum” at Society of Teachers of Family Medicine Spring Conference May 3, 2016; Minneapolis, MN

Stringer, J “Medical Options for Obesity Management” at Sacred Heart Hospital Grand Rounds May 12, 2016; Eau Claire, WI

Publications:


Stringer, JD “Cochrane for Clinicians: Calcium Supplementation for Preventing Hypertensive Disorders in Pregnancy” Am Fam Physician 2015 October;92(7):570-1 PubMed ID 26447439

Stringer, JD Book review: “Autism Breakthrough: The Groundbreaking Method that has Helped Families All Over the World” Fam Med 2015;47(7):569-570

Faculty Development:

08/20/15: Ethics-Father M. Sheehan, SJ, MD-SHH Grand Rounds

09/15/15: Coding/Compliance Review Presentation-A. M. Brimer, S. Wagner Faculty Meeting

09/22/15: Midwives For Haiti Global Health Curriculum-Jaime Stringer-Faculty Meeting

09/26/15: Communication in Residency and Beyond-Brandon Parkhurst, MD-Resident/Faculty Retreat, Camp Manitou

10/20/15: Report about Family Medicine Midwest: Resident Stress- J. Hamblin-Faculty Meeting

10/20/15: Patient-Centered Care-M. Perry (author)-SHH sponsored CME

12/01/15: Stress Relief J. Stringer and K. Ertz-Faculty Meeting

12/15/15: Adult Learning Styles-J. Stringer-Faculty Meeting

01/05/16: Precepting-B. Cayley-Faculty Meeting

02/09/16: Giving Constructive Feedback/Evaluations-J. Stringer-Faculty Meeting
03/01/16: Motivating Learners to Engage in Scholarly Activities-D. Raehl-Faculty Meeting

04/04/16: Community Involvement, Telephone encounters (report from PDW) J. Hamblin-Faculty Meeting

04/26/16: Conflict Management: How to Apologize-J. Hamblin-Faculty Meeting

05/10/16: Teaching in the Presence of Patients (STFM follow-up)-B. Cayley-Faculty Meeting

05/10/16: How to Teach Procedures (STFM follow-up)-J. Hamblin-Faculty Meeting

06/07/16: Promoting Self-Directed Learning-M. Gideonsen-Faculty Meeting

**CLER Focus Areas Reports**

**Patient Safety:**

- Ongoing Patient Safety Initiatives in the residency include the following:
  - iPatient Signout (ongoing)
  - Hospital discharge requires medication reconciliation (ongoing)
  - Opioid registry for clinic patients report to faculty semi-annually (ongoing)
  - Follow-up with patients who are referred to specialists (ongoing)
  - Referencing WI Prescription Drug Monitoring Program (ongoing)

**Resident Quality Improvement Projects:**

- Gretchen Adams, DO – Patient Medical Literacy
- Michael Braunsky, DO – Healthcare Power of Attorney
- Drew Poulos, MD – Decreasing Patient Wait Times (Augusta Clinic)
- Sakina Sachak, MD – Reducing Error Rate for Prescriptions
- Lauren Sauter, MD – Reviewing and Documenting Chronic Kidney Disease

**Transitions in Care:** Joan Hamblin, MD – How to be a Good Senior Resident and PGY2 Orientation, Phone and Clinic Calls – Education Conference May 30, 2016

**Supervision:** Paula Naumann provided a presentation regarding the supervision policy to incoming residents on May 21, 2016.

**Duty Hours:** Paula Naumann provided the duty hours policy to incoming residents on May 21, 2016.

**Professionalism:**

- Joan Hamblin, MD – Professionalism 7/16/16
- Harry Kahlon, MD - Professionalism Jeopardy presentation 5/26/2016
**Madison Program Report**

**Academic Year 2015-2016 (July 1, 2015- June 30, 2016)**

*University of Wisconsin Department of Family Medicine and Community Health*

**Madison Program Director:** Kathleen Oriel, MD, MS  
**Education Coordinator:** Jenny White  
**Number of Residents in the Program:** 43  
**ACGME Self Study scheduled for:** April 1, 2023

**Program Overview:**

Under the leadership of Program Director Kathy Oriel, MD, MS, Ildi Martonffy, MD and Jensena Carlson, MD serve as Associate Program Directors. Jenny White serves as the Madison Education Coordinator.

A large program, with 36 core teaching faculty, 93 volunteer faculty, and four diverse residency clinics; the Madison Program had 43 residents this academic year.

The program welcomed fourteen new residents in the 2015-2016 academic year:

- Matthew Brown, MD, University of Wisconsin School of Medicine and Public Health  
- Anna Chase, MD, Wayne State University School of Medicine  
- Lydia Chen, MD, University of Illinois College of Medicine  
- Allison Couture, DO, Chicago College of Osteopathic Medicine of Midwestern University  
- Milap Dubal, MD, Saint Louis University School of Medicine  
- Ellen Gordon, MD, University of Illinois College of Medicine  
- Divneet Kaur, MD, Oregon Health & Science University School of Medicine  
- Yoshito Kosai, MD, Oregon Health & Science University School of Medicine  
- Lucas Kuehn, MD, University of Wisconsin School of Medicine and Public Health  
- Andrew Maiers, DO, Des Moines University College of Osteopathic Medicine  
- Katherine McCreary, MD, Tufts University School of Medicine  
- Tina Ozbeki, MD, Tufts University School of Medicine  
- Makund Premkumar, MD, University of Iowa Roy J. and Lucille A. Carver College of Medicine  
- Lauren Walsh, MD, University of Wisconsin School of Medicine and Public Health

The 2016 graduating residents and their practice locations are:

- Alison Brock, MD, Hennepin County Medical Center Geriatrics Fellowship, Minneapolis, MN  
- Christopher Danford, MD, Triad Hospitalists, Greensboro, NC  
- Maria Din, DO, Dean Clinic West, Madison, WI  
- Sean Duffy, MD, UW DFMCH Academic Fellowship, Madison, WI  
- Jasmine Hudnall, DO, UW Palliative Care Fellowship, Madison WI  
- Rachel Lee, MD, Henry Ford Health System, Detroit, MI  
- Julia Lubsen, MD, UW Geriatrics Fellowship, Madison, WI  
- Julia McMillen, MD, Dean Clinic, Sun Prairie, WI  
- Vincent Minichiello, MD, UW DFMCH Integrative Medicine Fellowship, Madison, WI  
- Lisa Netkowicz, MD, Dean Clinic East, Madison, WI  
- Jessica O’Brien, MD, TBD, Milwaukee, WI  
- Joshua Schulist, MD, Locum Tenens, New Zealand  
- Walker Shapiro, MD, ACHC William T. Evjue Clinic, Madison, WI  
- Anna Veach, DO, Maine-Dartmouth Family Practice, Waterville, ME
Initiatives and Accomplishments

2016 Match Results: The Madison Residency Program interviewed 86 applicants during the 2015-2016 interview season, and successfully matched all 14 open resident positions, 2 through the National Matching Service (NMS) and 12 through the National Resident Matching Program (NRMP).

Residents’ Perspective of the Program: In an educationally robust and rigorous program, results of the 2015-2016 ACGME Resident Survey show that 95% of the residents describe the Madison program as a very positive or positive experience, 5% of the residents described the program as a neutral experience, and no residents described the program as negative or very negative experience.

While the Annual Resident Survey conducted by GMEC had a 75% response rate, and 100% of those respondents described the Madison program as very positive or positive.

In-training Examination Scores: The Madison residents continue strong performance on the American Board of Family Medicine’s (ABFM) annual In-training examination. The mean scaled score for all three residency years was 478 compared to 417 nationally. First-year residents scored 20 points higher than the national average; second-year residents scored 76 points higher and third-year residents scored 78 points higher.

ABFM Certification Exam Performance: All 13 residents who graduated from the Madison program in 2015 passed the ABFM Board Certification Exam. The average score for the Madison graduates was 575, compared with 492 nationally.

Curriculum Initiatives/Innovations:
- Residents implemented a change to the maternity care schedule that aimed to reduce the frequency of switching from day shifts to night shifts.
- Key maternity care faculty began running emergency drills for residents on the OB service at St. Mary’s Hospital each block. The drills include a pre-lecture before the drill as well as a debriefing at the end.
- Faculty developed, and residents began using, a Goal-Oriented Assessment of Learning (GOAL) form for residents to create a useful, self-directed learning plan that can also serve as a foundation for the semi-annual meetings with their faculty advisor. The form addresses career goals, goals to meet by the end of the residency to help reach career goals, a self-assessment of areas of confidence and challenge, pursuits to help achieve goals, three SMART goals for the next six months, three SMART goals in their personal life, and identification of team members who can help resident meet the goals.
- The UW FMS schedule was revamped to reduce transitions in care and increase patient safety by having R2 and R3 residents alternate working a full weekend.

Needs assessment and planning for a course on osteopathic manipulative medicine were completed, and the course now has five MD residents and five MD faculty interested in taking the course. The course includes both independent reading, as well as practice workshops, over the next twelve months. This course will be led by Jared Dubey, DO and Sarah James, DO.

Resident well-being/resilience initiatives:
- A Guardian Angel rotation was established, giving residents the opportunity to have a week long rotation to work on self-care as well as taking care of the other residents when they are not in clinic. This rotation relates to the Professional Milestone number 4. Activities include the resident sending a page to seniors on the Family Medicine services to see if assistance is needed in the morning, completing online curriculum around self-care, professionalism, burnout and
depression, being available on Thursday afternoons to interns for questions and/or support, and meeting with a behavioral health specialist to de brief the week.

- A ten hour resiliency training course based on mindfulness meditation will be offered to first year residents to help them build skills in dealing with the stressors of residency training and gain insight into techniques their patients might benefit from.

**Residency 2016 Graduate Awards:**

- Chief Resident Leadership Award – Christopher Danford, MD
- Chief Resident Leadership Award – Julia Lubsen, MD
- Chief Resident Leadership Award – Jessica O’Brien, MD
- Chief Resident Leadership Award – Joshua Schulist, MD
- William Scheibel, MD & Baldwin Lloyd, MD Clinical Teacher Award – Jonas Lee, MD
- Clinical Teacher Award – Jo Ann Wagner-Novak
- Clinical Teacher Award – Eric Marty, MD
- Clinical Teacher Award – Addie Gaspar, APNP
- Resident Teacher Award – Walker Shapiro, MD
- Resident Teacher Award – Jessica O’Brien, MD
- Distinguished Service Award – Bob Gillespie, PhD

**Resident Scholarly Work:**

**Publications:**

Danford, C. “Euglycemic” Ketoacidosis in a Patient with Type 2 Diabetes Being Treated with Canagliflozin.” Wisconsin Medical Journal (in publication).


Carlson, J; Hayon, R; McMillen, J; Schrager, S. “Menstrual Migraines: Evidence Based Treatment Options.” Journal of Family Practice (accepted for publication).


**Posters and Presentations:**


Danford, C. "To Type or Dictate?: Method of Documentation in Electronic Health Records by Family Physicians in Wisconsin.” Poster Presentation at the annual I-Practice Conference, Madison, Wisconsin, April 22-24, 2016.


**Community Health Projects:**

Alison Brock, MD – Underage Substance Use in the Belleville Community

Christopher Danford, MD – Putting Out Fires Before They Start: A Community, Residency Clinic, Fire Department Partnership

Maria Din, DO – Verona Clinic 2020 Healthy Lifestyle and Fitness Challenge

Sean Duffy, MD – Improving the safety and efficacy of chronic pain treatment at Wingra Clinic

Jasmine Hudnall, DO – Advance Care Planning Group Visits: Instituting Honoring Choices WI in Verona

Rachel Lee, MD – Lakeview Elementary - Northeast Clinic Food Insecurity Project

Julia Lubsen, MD – Improving Access to Advance Care Planning at Northeast Clinic

Julia McMillen, MD – Partnering with SAPAR, the Madison School Age Parenting Program

Vincent Minichiello, MD – Community-Supported Clinic-Based Obesity Group Visits: Effects on Quality of Life, Mental Health, & Healthy Lifestyle Change

Lisa Netkowicz, MD – Evidence-Based Practice Topics in Maternity Care: Screening for Trichomonas in Pregnancy

Jessica O’Brien, MD – Wingra Nutrition Sessions

Joshua Schulist, MD – Community Health Needs Assessment

Walker Shapiro, MD – Dermatology Teaching for Morning Report

Anna Veach, DO – Improving Access to Advance Care Planning at Northeast Clinic
Faculty Scholarly Work:

Sampling of 19 publications and presentations:


Wolfe J, Evensen AE. In H pylori–positive patients with nonulcer dyspepsia, is eradication therapy better than PPI therapy for preventing long-term symptom recurrence? Evidence Based Practice 18 (12):9-10. 2015.


Temte JL. 2015 Pediatric and Adolescent Immunization Update. AAFP-FMX (Family Medicine Experience), Denver, Colorado, September 29-October 3, 2015


Lochner J, Arndt B, Potter B. Salaries, incentives, fairness: rethinking the structure of primary care physician compensation. Society of Teachers of Family Medicine Conference on Practice Improvement, Dallas, Texas, December 3-6, 2015
Faculty Development:

07/22/15: eConsults with Gastroenterology: Dr. Newcomber, Dr. Dambach, and Dr. Grimes

08/26/15: Community and Population Health in Clinical Teaching: Dr. Arndt, Dr. Lochner, Robin Lankton; EMB Curriculum Overview and the NNT: Dr. Hahn

09/23/15: ICD-10 and Smart Sets: Birgitta Larson Gamez, Vicki Gibson, AnneMarie Brimer, Dr. Potter

10/2/15: Core Faculty Retreat-- Providing Feedback to Residents: Dr. Oriel, Dr. Martonffy, Dr. Carlson; Properly SPICED Seminars: Dr. Stiles; Goal-Oriented Assessment of Learning (GOAL): Dr. Carlson, Dr. Hahn; Mentoring Residents in the Era of Standardized Feedback: Dr. Carr; Community and Population Health: Dr. Rindfleisch, Dr. Edgoose, Robin Lankton

10/28/15: Blended Learning and Using Technology in Education: Chad Shoter, Kathleen O’Connell (DoIT Academic Academy)

01/27/16: Clinical Documentation: Corinne Beck

02/24/16: Population Health: Grace Flood and Dr. Lochner

03/23/16: Delivering/Receiving Feedback: Dr. Huffer; Clinical Documentation: Corrine Beck and Debbie Jones

04/27/16: This Ain’t the Same Old Residency: Stuff You Should Know: Dr. Oriel; Health Equity and Social Determinants of Health: Dr. Edgoose, Dr. Rindfleisch, Dr. Swain, Robin Lankton

05/25/16: Moving Medical Education Forward: Dr. Chheda, Dr. Deci; Encore Sleep: Dr. Klink, Dr. Dambach

06/22/16: The Family Physician’s Role in the Opiate Epidemic: Dr. Randy Brown

CLER Focus Areas Reports

Patient Safety:

Sessions were held in R1, R2 and R3 orientation this year providing discussions around the current culture of patient safety, training opportunities and gaps, and mechanisms for reporting close calls, near misses, or patient safety events. Resident seminars were held on the topics of Hospital Safety and Disclosure of Unanticipated Outcomes and Medical Errors, First year residents participate in Team STEPPS as part of the R1 seminar series. Additionally, Jensena Carlson, MD, Associate Program Director is now a member of the Patient Safety and Quality Committee at St. Mary’s Hospital. She will keep program leadership and residents apprised of key issues. She also invites residents to accompany her to the monthly meeting as key issues are noted on the agenda.

Quality Improvement:

Second and third year residents complete a small scale quality improvement project on the topic of Hypertension or Diabetes through the METRIC module. Residents also participate in QI projects in the clinics:

- Ongoing effort to implement and improve workflows for Centering Pregnancy-- Jessie O'Brien
- Chronic opioid management - improve workflows--Lisa Netkowicz and Sean Duffy
- Clinic scheduling improvement workgroup—Eric Phillippi
• Documentation improvement around opioid prescribing—Alison Brock, Joshua Schulist, Emily Ramharter, Julia Weiser

• Improving miscarriage management; Reducing wait times to see providers; Investigating expanded clinic hours—Emily Torell, Anna Chase, Julia McMillen

• Coordinating with Madison Police Department Mental Health Officer; Working with UW Health Delegation Protocol—Rachel Lee, Jennifer Perkins, Milap Dubal

• Improving Depo-Provera, blood pressure, and colon screening protocols—Julia Lubsen, Bonnie Garvens, Ellen Gordon

• Increasing patient MyChart sign-ups; Updating clinic procedures handbook; Improving distribution of lab results—Anna Veach, Emily Jewell, Michele Malloy

• Residents and faculty participated in the Annual Program Evaluation in October 2015. Topics included improving the resident evaluation system and improving the resident to mentor/advisor relationship.

Transitions in Care: The program continues to use the SIGNOUT competency cards on the inpatient services. During R1 Orientation, residents are trained on how to provide safe transitions of care and follow the program-established protocol (SIGNOUT). Residents are evaluated on their sign out presentations during transitions of care, and must receive three satisfactory evaluations before being allowed to sign out patients without a senior resident or faculty present.

Supervision:

• All resident patient care in the inpatient and outpatient settings is supervised by Program or Community faculty.
  o Resident schedule templates ensure adequate time for supervision according to the resident’s level of training and acuity of patient need.
  o The Madison program has a supervision policy, which is reviewed annually, that outlines the supervision needs for each level of training in each of the inpatient and outpatient settings. Procedures performed by residents are always supervised by a faculty member who is physically present.
  o PGY-2 residents are observed and evaluated by attending faculty to determine competency for serving as senior residents for care teams and admitting medically stable patients to the hospital with faculty supervision off-site. The evaluation focuses on specific patient care skills, medical knowledge, and communication skills. The program tracks which residents have been evaluated and deemed competent in this area, and faculty on call are notified when a resident has not yet fulfilled this milestone. When residents have not progressed through the supervisory milestone, faculty physicians are immediately present for supervision of care.
  o The program surveys resident satisfaction with the supervision provided by program and community faculty annually. The program also reviews the ACGME Resident survey annually, in which residents are able to express their satisfaction with the supervision provided.
Duty Hours:

- Resident orientation includes detailed education about ACGME rules regarding duty hours and the signs of sleep deprivation and fatigue.
- The *New Innovations* data management system is used to record and audit resident duty hours. Duty hour audits occur on an ongoing basis. Aberrant duty hour reports undergo investigation and correction by the Program as appropriate.
- Results of the ACGME resident survey conducted February 2016 showed that the Madison Program was in full compliance with the duty hour requirements.

**Professionalism:** Time is allocated for the AWARE curriculum, a mindfulness and self-care curriculum for physicians. This is built into the protected seminar time as well as all resident orientations. In October, the Program Director and Associate Program Directors led a resident discussion on physician wellness/burnout and impairment, using the article “Life Support” from Time magazine as a starting point.
WAUSAU PROGRAM REPORT

Academic Year 2015-2016 (July 1, 2015- June 30, 2016)
University of Wisconsin Department of Family Medicine and Community Health

Wausau Program Director: Kevin O’Connell, MD
Education Coordinator: Deanna Froehlich
Number of Residents in the Program: 16
ACGME Self Study Scheduled for: January, 2019

Program Overview:
Under the leadership of Kevin O’Connell, MD, Program Director, Deanna Froehlich serves as the Education Coordinator for the Wausau Family Medicine Program. Five full-time, core Family Medicine faculty and a Licensed Clinical Social Worker provide teaching and supervision for the Wausau residents. Additionally, part-time faculty share teaching responsibilities, and several community physicians contribute to the Program by precepting during residents’ patient care sessions in the clinic. The Weston clinic has three core faculty members to teach and supervise the residents that are assigned to the Family Medicine Practice site there.

In a strong and long-standing relationship with the hospital, the Wausau residency program is located in a state-of-the-art clinical and educational facility on the Aspirus Wausau Hospital campus.

The program welcomed six new residents in the 2015-2016 academic year:

- Hamid Assadi, MD, Ross University School of Medicine
- Quang “David” Cao, MD, Saint James School of Medicine
- Danielle Fenske, DO, Rocky Vista University College of Osteopathic Medicine
- Rose Griffin, MD, University of Sint Eustatius School of Medicine
- Sean Huff, DO, Lincoln Memorial University - DeBusk College of Osteopathic Medicine
- Justin Hwang, DO, Touro University College of Osteopathic Medicine

The 2016 graduating residents and their practice locations are:

- Leanne Anderson, DO, Aspirus Medford Clinic, Medford, WI
- Matthew Callahan, MD, Scripps Coastal Medical Group, San Diego, CA
- Taha El Shahat, MD, St. Agnes Hospital, Fond du Lac, WI
- Benjamin Kaster, MD, Aspirus Wausau Hospital, Wausau, WI
- Erick Moeker, MD, Aspirus Wausau Hospital, Wausau, WI
- Sandra Molteni, DO TBD
- Ashley Wirtz, MD, Aspirus Kronenwetter Clinic, Mosinee, WI
Initiatives and Accomplishments

2016 Match Results: The ACGME granted the program a temporary complement increase. Through the Match and Supplemental Offer and Acceptance Program, the program successfully filled a full resident complement with six residents for the 2016 incoming class.

Residents’ Perspective of the Program:

- The 2015-2016 ACGME resident survey was conducted in January to February 2016 with 100% participation by residents
  - Residents’ overall evaluation of the program was 38% very positive, 43% positive, 14% neutral, and 7% negative.
  - The categories of duty hours, resources, and patient safety/team work were mostly above the national mean.

- Of the 16 residents who were each sent the Annual DFMCH Resident Survey in the fall of 2015, twelve responded (75%). Findings include:
  - Teaching Service was cited as the most useful rotation, in part due to learning opportunities and autonomy.
  - Obstetric and Pediatric rotations received mixed results. Both curricula are undergoing faculty review and updates with input from the Program Evaluation Committee.
  - In the category of Overall Well-Being/Balance, 58% reported being satisfied and 42% reported being very satisfied.
  - In the category of Overall Program Assessment, of the twelve respondents, 100% of them rated the program as very positive or positive.
  - Comments regarding what residents especially like about the program included faculty enthusiasm for teaching, promotion of a sense of responsibility for patient care, and Program Director/attending support.

- Residents were sent core faculty member evaluations through New Innovations. Seven residents completed evaluations in September 2015. Average scores ranged from 4.7 to 5.0, with 5.0 being superior. Six residents completed evaluations in March 2016. Average scores ranged from 4.0 to 4.6 with 5.0 being superior.

In Training Examination Scores:

- All residents completed the 2015 In-Training Examination of the American Board of Family Medicine.
  - The program’s PGY-2s remained above the national aggregate and showed a greater improvement rate in scores than nationally. Aggregate results for PGY-1s and PGY-3s were below the national aggregate.
  - The Bayesian Score Predictor showed the program’s PGY-2s and PGY-3s have a score prediction of over 90%.
The ACOFP In-Service Exam is also given annually to the program’s osteopathic residents. The average score of the seven osteopathic residents for the October 2015 exam was 539. This is above the 2015 national OGME mean which was 503.

**ABFM Certification Exam Performance:**

- All six PGY-3s participated in self-selected board preparation and sat for the ABFM certification exam in November 2015 or April 2016. All six passed the ABFM certification exam on the first attempt.

**Curriculum Initiative and Innovations:**

- Dr. Sorenson established an additional site for the outpatient pediatrics rotation at Aspirus Doctors’ Clinic in Wisconsin Rapids. Five PGY-2s and PGY-3s participated in the rotation there.

- In order to increase continuity encounters with patients less than 10 years of age, Dr. Sorenson developed a longitudinal continuity pediatrics rotation with a pediatrician at Aspirus Medford Clinic. One PGY-3 was able to participate and saw over 100 continuity pediatric patients through this rotation. The goal is for the resident to spend one day a week at the rotation site for at least 16 weeks over a six month time period. The program is currently working to establish two additional rotation sites for residency year 2016/2017.

- Dr. Thao worked with the residents and Aspirus obstetricians to re-work/re-design the obstetrical curriculum. The updated curriculum provides for a more obstetric-centric training rotation with emphasis on management of normal labor and delivery through increased exposure to the obstetrics floor and increased exposure to Family Medicine obstetrics. Dr. Thao implemented a standard orientation to be given to every resident starting the obstetric rotation which was a desire of the Obstetric preceptors as well as the Family Medicine community partners.

- Dr. O’Connell established Tuesday morning didactic sessions at the hospital. Various specialties (e.g. radiology, hematology/oncology, hospitalists) are contributing to the presentations.

- Teaching Service (TS) underwent the following changes:
  - The TS block requirements for DOs and MDs were equalized.
  - The availability of PGY-2s and PGY-3s was increased to assist on TS.
  - Caps were established and have been especially important on three-person TS blocks.
  - Community attendings from high volume clinics were informed of the above changes.
  - Drs. Bolan and Strick became the primary teaching attending “rounders” with residents. Each is scheduled for two weeks each block. This has provided more didactic time, support, and consistency for the residents.

- Dynamic changes at the national, state, and local level in the health care environment and the ACGME, combined with specific needs and changes at the program level are leading the
program to begin exploring if a longitudinal curricular design would best meet our program’s needs instead of the current traditional block structure.

Resident Well-Being/Resilience Initiatives:
- Initial discussions have been raised at resident meetings regarding implementation of well-being/resilience initiatives for the program. Progress will be reported to GMEC.
- The program faced some hardships with a decreased PGY-2 class and some residents needing extended leave time. Over the year, program leadership saw the residents’ resilience in action as they not only stepped up to the extra demands created by these situations, but also came around each other with support and care.

Resident Grad Awards:
- Esprit de Corp Award- Ashley Wirtz, MD
- Outstanding Teaching Award-Eric Moeker, MD

Resident Scholarly Work:

Posters & Presentations:
All PGY-3 residents are required to give a Grand Rounds CME presentation at Aspirus Wausau Hospital which meets a scholarly activity requirement for ACGME. In addition to increasing scholarly activity, goals include strengthening relationships between Medical Staff and residents and to increase engagement with local specialties. It is the resident’s responsibility to choose a topic and find a faculty advisor to work with him/her. This year’s Grand Rounds were as follows:

Leanne Anderson, DO-Updates to the management of hypertensive disorders and preeclampsia during pregnancy

Matthew Callahan, MD -Telemedicine in the outpatient setting

Taha El-Shahat, MD-Sepsis: insights, outlooks, and a review

Benjamin Kaster, MD-Tools to help overcome the obesity epidemic for the primary care physician

Eric Moeker, MD-Disseminated intravascular coagulation: “death is coming” bridging the gap between pathology, treatment and outcomes

Community Projects or Community Work:
The Patient Centered Medical Home model is in operation in both faculty and resident clinical practice. Last year’s focus on diabetes continues. This year a focus on hypertension was added in conjunction with Aspirus-wide efforts. The hypertension focus emphasized team-based care and resulted in education of faculty, residents, and clinic staff regarding taking a correct blood pressure, following a system-wide algorithm, ordering of drugs, intervention, and re-checking blood pressure and properly documenting it. Ashley Wirtz, MD wrote a proposal for the FMP to obtain a BpTRU automated oscillometric device and educated the clinic about and promoted its use.

Hamid Assadi, MD and Rose Griffin, MD worked with Dr. Thao and his ongoing research into the health of the Wausau area Hmong population.

A Community Paramedicine pilot program began in early 2016. Residents involved are Alexandria Oleinik, DO, Hamid Assadi, MD, and David Cao, MD. Emergency Medicine Technicians visit CHF, COPD, and pneumonia patients at home within 30 days of hospital discharge.
A resident quality improvement project from last year resulted in Aspirus wide brochures informing patients how to register and use MyAspirus (patients’ internet connection with doctors’ offices).

Alexandra Oleinik, DO and Benjamin Kaster, MD each gave a presentation regarding bodily changes experienced during puberty to fifth graders at a local grade school.

Annually, residents provide physical exams for middle and high school children participating in sports. Residents also staff sporting events such as high school football games and cross country meets.

Faculty Scholarly Work:

Publications:


Posters & Presentations:


Community Work:

Thao, Kevin K. Survey of the Health of the Wausau Area Hmong Population, Summer 2015 and ongoing. Dr. Thao utilizes both residents and medical students to assist with the surveys and research.

Faculty Development:

9/25/2015: Rural Medical Educators Faculty Development Conference in Sauk City, Wisconsin.

9/29/2015: Faculty/Resident Pair Mentoring in Wausau, Wisconsin.

10/15 – 10/18/2015: National Institute of Program Director Development (NIPDD) in Denver, Colorado.


4/1 – 4/5/2016: Program Director Workshop and NIPDD in Kansas City, Missouri.

5/2016: Department of Family Medicine and Community Health Faculty Development Workshop in Madison, Wisconsin.

5/24/16: Medical Student Teaching for Residents and Faculty in Wausau, Wisconsin.
CLER Focus Areas Report

Patient Safety:
- Time is provided for residents to complete compliance activities regarding patient safety and physician wellness, including fatigue management and self-care.
- Residents represent the Program on hospital committees including the Institutional Review Board and Pharmacy/Therapeutics.
- Didactic conferences focused on patient safety included suicide assessment, self-injury, use of general screening tools, and developmental screening: Wisconsin medical home initiative birth to 3.

Quality Improvement:
- All PGY-2 residents are required to participate in a year-long quality improvement project centered on increased service and safety to patients. This year’s projects were:
  - Well woman/well man exam templates
  - Well child checks
  - Advanced directives/code status
- A resident quality improvement project from last year resulted in development of Aspirus-wide brochures informing patients how to register and use MyAspirus (patients’ internet connection with doctors’ offices).
- Ages and Stages Questionnaires (ASQ) and Modified Checklist for Autism in Toddlers (M-CHAT) screening tools were rolled out.
- Didactic conferences focused on quality improvement included ICD-10 training; healthcare for Hmong patients; and pain, hypertension, and WIR.
- Resident metrics are reviewed with them on an individual basis as part of the Practice Management curriculum with a current focus on diabetes and hypertension metrics. Residents learn what is measured and why, who is looking at the results, and the impact at both the clinic level and within the system. It is emphasized that the metrics are an indicator of the quality of our patient care.
- PGY-2 and PGY-3 residents receive quarterly productivity reports of performance and efficiency.
- Residents participate in clinic meetings regarding operations and quality improvement efforts.

Transitions in Care:
- A part time faculty member is heading up a Community Paramedicine pilot program which began in February 2016. Three residents are involved in the program. Through the program, Emergency Medical Technicians visit CHF, COPD, and pneumonia patients at home within 30 days of hospital discharge.
- The Patient Centered Medical Home Nurse is working with faculty on Transitional Care Management and has introduced it to residents. A goal is to reduce hospital readmissions by arranging Primary Care Physician follow up within 7-14 days of hospital discharge.
- Healthy Planet Epic has been introduced throughout Aspirus. Goals are to improve transitions of care, identify gaps in care, and patient engagement with a longitudinal plan of care.
Supervision:
- All resident patient care (Family Medicine Clinic, Aspirus Wausau Hospital, Aspirus Weston Clinic, nursing homes, patient homes and other settings) is supervised by Program or Community faculty.

- Resident schedule templates ensure adequate time for supervision according to the resident’s level of training and acuity of patient need.

- Aspirus Wausau Hospital has specific and detailed policies regarding supervision of residents in the hospital setting. These were reviewed in 2014.

- Residents with proper documentation may provide patient care services under the supervision of an attending physician as outlined by the HCFA/CMS guidelines. This includes:
  - Performing and recording history and physical examinations
  - Assimilating and ordering treatment plans including diagnostic tests, medications, and therapies
  - Performing daily rounds and writing progress notes
  - Hospital discharge planning
  - Patient education and family meetings
  -Performing procedures and assisting in surgeries

- Evaluative conferences with faculty advisors take place at least semi-annually. Evaluative conferences with the Program Director take place at least annually.

Duty Hours:
- Resident orientation includes detailed education about ACGME rules regarding duty hours and the signs of sleep deprivation and fatigue.

- The New Innovations data management system is used to record and audit resident duty hours. Duty hour audits occur on an ongoing basis. Aberrant duty hour reports undergo investigation and correction by the Program as appropriate.

- Results of the ACGME resident survey conducted in January-February 2016 showed that the Wausau residents were in full compliance with the duty hour requirements.

Professionalism:
- The Aspirus Chief Medical Officer gave his annual presentation to residents and faculty regarding professionalism at Aspirus.

- The PGY-1s’ first rotation in Practice Management/Community Medicine includes a presentation by the Aspirus Patient Liaison regarding professional conduct as well as patient rights and responsibilities.


- Resident Leanne Anderson, DO taught at the Procedures Fair at UWSMPH in March 2016.

- The Association of Family Medicine Residency Directors selected resident Alexandra Oleinik, DO as one of ten residents to receive a scholarship to attend the April 2016 Family Medicine Congressional Conference in Washington, D.C.
Osteopathic Program Report
Academic Year 2015-2016 (July 1, 2015- June 30, 2016)
University of Wisconsin Department of Family Medicine and Community Health

Osteopathic Program Director: Mark Robinson, DO
Education Coordinator: Jenny White
Number of Residents in the Program: 39
AOA Inspection completed in September 2015

Program Overview
Currently in a five-year accreditation period, the longest time awarded by the American Osteopathic Association (AOA), Mark Robinson, DO, serves as the Program Director and Director of Medical Education for the Statewide Osteopathic Residency Program. Jenny White serves as the Education Coordinator, and Michelle Grosch, MA and Susan Rotter provides additional support for the program.

As a single program operating in multiple locations, core teaching faculties are located throughout the state as follows:

- Baraboo - Jamie Kling, DO
- Eau Claire - Deborah Raehl, DO
- Madison - Sarah James, DO; Russell Lemmon, DO; Maggie Larson, DO
- Milwaukee - Mark Robinson, DO; Loras Even, DO
- Wausau - Michael Bolan, DO; John Wheat, DO

Each location is dually-accredited by the American Osteopathic Association (AOA) and the Accreditation Council for Graduate Medical Education (ACGME). Additionally, each program received Osteopathic Recognition from the ACGME effective July 1, 2015.

In a dually-accredited and osteopathic recognition program, osteopathic residents train with their allopathic resident colleagues. Osteopathic graduates of the program are eligible to take both the osteopathic and allopathic medical board examinations. In addition, our program is a member of the HEARTland Network Osteopathic Post-graduate Training Institution (OPTI) that is sponsored by Des Moines University.

The Program is approved for 40 osteopathic positions statewide. These positions are not assigned to specific locations or year of training, so flexibility exists for residents to apply at locations which seem best suited to individual needs.

In academic year 2015-2016, 39 residents participated in the osteopathic program as follows:

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<th>PGY-1</th>
<th>PGY-2</th>
<th>PGY-3</th>
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<tbody>
<tr>
<td>Baraboo</td>
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<tr>
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<td><strong>15</strong></td>
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</table>
2016 graduates and their post graduate plans are:

**Eau Claire**
- Megan Hoel, DO, Mariner Clinic, Superior, WI
- Chameng Vang, DO, AllinaHealth, Coon Rapids, MN

**Madison**
- Maria Din, DO, Dean Clinic West, Madison, WI
- Jasmine Hudnall, DO, UW Palliative Care Fellowship, Madison, WI
- Anna Veach, DO, Main-Dartmouth Family Practice, Neuromuscular Medicine Residency, Waterville, ME

**Wausau**
- Leanne Anderson, DO, Aspirus Medford Clinic, Medford WI

**Milwaukee**
- Krystina Pischke, DO, ThedaCare Physicians, Neenah, WI
- Jessica Schmid, DO, Southwest Health, Platteville, WI
- Kara Stoll, DO, Aurora Wiselives, Milwaukee, WI
- Leah Welsh, DO, Fellowship in Neuromuscular Medicine, Athens, OH

**Initiatives and Accomplishments**

**Curriculum:**
This past year we implemented resident case presentations in our Statewide Osteopathic Conferences. Residents presented a case from their clinical practice and demonstrated OMT techniques applicable to the case.

The mock practical board exam session of the conferences remain a popular way to help residents prepare for their osteopathic board exam.

In the clinical setting, new evaluation forms were implemented to give residents improved feedback from patients and faculty for encounters involving osteopathic manipulative treatment.

**Osteopathic Recognition:**
Our six sites were among the first 18 programs in the country to receive Osteopathic Recognition through the ACGME in the November 2015. We are well situated to continue providing high-quality osteopathic education when the AOA stops accrediting graduate medical education programs in 2020, and to serve as an example for other programs looking to achieve Osteopathic Recognition.

**Chief Residents:**
Jared Dubey, DO (Madison) and Anna Veach, DO (Madison) served a lead role as osteopathic Chief residents. This resident leadership role is a one-year term, and includes participation in the program’s Statewide Osteopathic Education Committee, in the HEARTland OPTI Resident Committee, and at various recruitment activities throughout the year.

**Match Results:**
The Program successfully matched nine residents through the National Matching Service Match (NMS), three through the National Resident Matching Program (NRMP), and one off-cycle transfer, who will begin training in academic year 2016-17. The new incoming osteopathic residents are:
Eau Claire
- Steven Long, DO, Rocky Vista University College of Osteopathic Medicine

Madison
- Kathryn Ledford, DO, Western University of Health Sciences/College of Osteopathic Medicine
- Angela Marchant, DO, A.T. Still University of Health Sciences-School of Osteopathic Medicine in Arizona
- Ashley Taliaferro, DO, Des Moines University College of Osteopathic Medicine

Milwaukee
- Matthew Gill, DO, Western University of Health Sciences/College of Osteopathic Medicine
- Kayla Parsons, DO, Chicago College of Osteopathic Medicine of Midwestern University
- Alison Perry, DO, Chicago College of Osteopathic Medicine of Midwestern University
- Mary St. Clair, DO, Edward Via Virginia College of Osteopathic Medicine
- Joseph Vogelgesang, DO, Ohio University Heritage College of Osteopathic Medicine

Wausau
- Caitlin Harris, DO, Touro University College of Osteopathic Medicine
- Amanda Schoenfuss, DO, A.T. Still University of Health Sciences-Kirksville College of Osteopathic Medicine
- Casey Totten, DO, Michigan State University College of Osteopathic Medicine
- Tswljwfm Vang, DO, West Virginia School of Osteopathic Medicine

Resident Scholarly Work:

**Presentations:**

**Anderson L.** Case presentation: The patient with an upper respiratory infection. UW DFMCH Statewide Osteopathic Conference. Baraboo, November 2015.

**Crane M.** Case Presentation: OMT for Pain Control. UW DFMCH Statewide Osteopathic Conference. Baraboo, March 2016.

**Hoel M.** Case Presentation: Back pain in pregnancy. UW DFMCH Statewide Osteopathic Conference. Baraboo, Nov 2015.

**Hudnall J.** Pediatric Limp Case Study. Poster Presentation. ACOFP Annual Conference. San Juan, Puerto Rico, April 2016.

**Hudnall J.** Case Presentation: GERD and Osteoporosis. UW DFMCH Statewide Osteopathic Conference. Baraboo, Sept 2015.


**James S.** OMT for MDs. UW DFMCH Faculty Development Workshop. Madison, May 2016.


**Schmid J.** Case Presentation: Scoliosis. UW DFMCH Statewide Osteopathic Conference. Baraboo, Sept 2015.

**Stoll K.** Case Presentation: Common Running Injuries. UW DFMCH Statewide Osteopathic Conference. Baraboo, May 2016.


**Veach A.** Post-Surgical OMT. Joint Primary Care Conference. St. Mary’s Hospital, Madison, WI, March 30, 2016.


**Publications:**

**Quality Improvement Projects:**


**Faculty Scholarly Work:**

**Publications:**
*Raehl, D.* “E-Cigarettes: What Do We Know?” at Sacred Heart Hospital Grand Rounds October 8, 2015; Eau Claire, WI

*Raehl, D.* "Biometry" and "Limited vs. Complete Scan" Presentation and Proctor at Obstetrical Ultrasound Conference October 1-3, 2015; Madison, WI

*Raehl, D.* “Foot and Ankle Tendinopathies” at Sacred Heart Hospital Grand Rounds January 14, 2016; Eau Claire, WI