



Family Physicians of Oregon

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THE OFFICIAL MAGAZINE OF THE
OREGON ACADEMY OF FAMILY PHYSICIANS



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Family Physicians of Oregon

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About the cover:

Crater Lake is beautiful any time of year but this shot of Phantom Ship in the winter is breathtaking. Photo by Dr. David Abdun-Nur.



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OREGON ACADEMY OF
FAMILY PHYSICIANS

MAKING HEALTH PRIMARY

EDITION 56

• PRESIDENT'S MESSAGE



DAVID ABDUN-NUR, MD, OAFP PRESIDENT
MOUNTAINVIEW FAMILY PRACTICE - FAMILY PHYSICIAN

Just another day.

It is the week after Thanksgiving. You will be reading this in January, due to the usual delay in publishing.

Christmas lights outside our bedroom window serve as an alarm clock this time of the year. I turn on the bedroom lights, get up, and make my way to the kitchen to make coffee and breakfast. I was on call last night - a quiet one with no admissions. I still log into EPIC and check the status of my patients in the hospital. I am scheduled to assist one of our orthopedic surgeons to perform a hip arthroplasty on one of them. I also check on a patient at our mothership hospital in Medford (about 30 miles south). He is relatively healthy, seventyish, and is being treated for Aortic Stenosis. He has been mildly symptomatic, but his ECHO continued to show progression until the last reading, which showed critical stenosis. A month ago, we discussed fixing the valve and how a TAVR procedure might be effective and minimally invasive. With a blood dyscrasia, and Polycythemia Vera, cardiology feels his critical stenosis outweighs the risk. This morning, I read the cardiologist's most recent progress report. At admission they did a nasal swab for COVID testing, causing a severe nosebleed. He became hypotensive and was admitted to the ICU. He does not compensate well, due to his AS, and goes into renal failure and shock. Emergency balloon valvuloplasty and an aortic assist device are placed with pressors and intubation. Now, two weeks into his stay in the ICU, he remains unresponsive, intubated, unable to be weaned, and on dialysis. We must consider the withdrawal of life support. Does COVID claim another victim indirectly? Did we make the right choice, or did we wait too long? These thoughts weigh heavy on my mind as I start the day.

Surgery goes well and my patient gets a new hip. Our region and hospital have not been hit too hard by COVID but we are seeing our numbers rise sharply in recent weeks. Due to hospital capacity, my patient with a new hip will be sent home directly after recovering in the Post Anesthesia Unit. Thank goodness for Exparel which will give the patient three days of fairly pain-free recovery at home and lessen the load on our hospital census.

At the office, we are seeing a lot of patients with COVID-like symptoms. We now have the state supplied BinaxNOW COVID-19 Ag tests. Fifteen-minute results are great but how do I see and test these patients in the office without exposing staff and other patients? Our office (of four physicians and three FNPs) has decided that patients with respiratory symptoms will be checked in from their car. A medical assistant will bring them a swab to self-swab their anterior nostril and then we will test in our lab and after fifteen minutes, we have the results. Today my first three patients tested are all positive. Fortunately, they are relatively young and healthy with mild to moderate symptoms. One is a contractor who will be out of work for two weeks; everyone in his company needs to be tested and possibly quarantined. Patient two, a single mother of a toddler who has been working from home, will not be able to send her child to daycare for a few weeks as they both quarantine. With these patients, we spend more time on the social issues than the medical problems that COVID is causing.

Our county has seen relatively few cases of COVID up until a few months ago. Due to the politization of the health response, many individuals have been ignoring the preventative recommendations from the health department and instead criticize the government. This is life in the state of Jefferson!

I spend part of my lunch hour on the phone with our hospital's Medical Director. We are in the process of doubling the number of ICU beds and they are asking for community doctors to help with the expected load of COVID patients. Our hospital is presently at capacity; we expect with the rise of numbers in our community in the next month, we will exceed capacity. Three of the providers in our office still do inpatient care and we are trying to figure out, with the hospital, how to handle the expected influx of patients, especially critically ill ICU patients that are likely to overload our hospitalist physicians. By the time this is published we should know the answer.

Mid-afternoon I look outside and see a rare sight these days: sun and shadows. After a week of freezing fog and little to no sunshine, it is a welcome sight. I hope it holds on until

tomorrow afternoon when I take a half day off for a bike ride. (*postscript: it did!*)

At the end of the day, we have an informal huddle and find out that one of our patients who later tested positive COVID came into our waiting room, not letting anybody know he was sick. He waited for his appointment, was seen, tested and came up positive. Fortunately, he was wearing a mask and the waiting room was not very full. It looks like we need to work on our protocols!

I'm sure the above day may sound very familiar to many of our family medicine doctors in the OAFP. Our daily challenges and struggles are especially important to share with each other. In this edition there is an article by Dan Sengenberger, DO, FAAFP about the Labor Day fires and his clinic in Phoenix, Oregon. We invite other OAFP members to share their stories as they help strengthen and heal each other in the challenging times we face.

SPRING 2021
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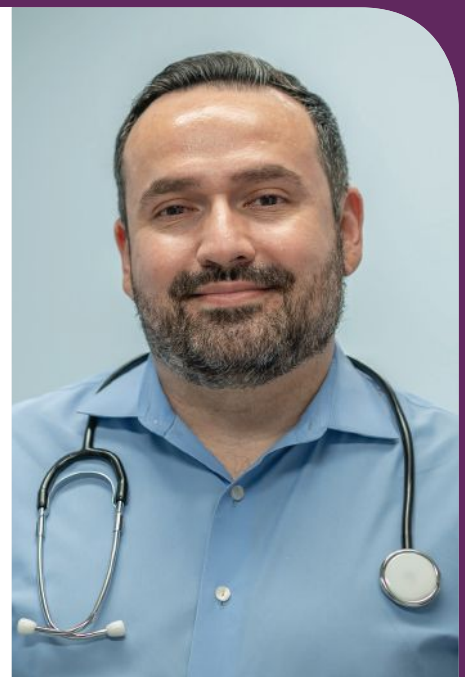
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• GREETINGS FROM THE OAFP



BETSY BOYD-FLYNN, OAFP - EXECUTIVE DIRECTOR

An Extraordinary Year

I write this column at the close of the year when the days are at their shortest, as our time spent living with COVID mitigation strategies enters its ninth month. Today, the first doses of Pfizer's vaccine arrived at Legacy. For many reasons, it feels like a bright day for hope.

Even in this year of such tremendous change, at its core, what OAFP does for members has stayed steady. As Dr. Chang noted in her Spring magazine column, the OAFP Board recently clarified its focus on Evolution, Advocacy, Education and Workforce. During a summer when the impact of systemic racism emerged so clearly, your Academy launched a task force on Equity, Inclusion and Diversity, to ensure that in addition to advocating for equity in health, we can assess our processes so that OAFP leadership and policy-making opportunities are equitable within OAFP membership. In addition, through our program for family medicine residencies, ORCA-FM, we will work to bring education on implicit bias to residents and faculty, and hope some of that curriculum can be offered to our general membership to satisfy cultural competency requirements.

We have worked to keep you informed during rapid cycles of change, and I want to thank Louise Merrigan for her outstanding work on that effort. Together, we have pivoted our educational offerings and our meetings to take advantage of technology we had never used at OAFP before 2019. Your Board of Directors and volunteer leaders have been quick to adopt these tools to ensure the organization keeps running smoothly and even in a year with financial uncertainty, we are in a solid position.

For the 2021 legislative session and beyond, OAFP leaders are working with intention to build common cause with other organizations within health care and aligned with our interests in advancing access to high-quality primary care in a system that works for everyone. We learned through the COVID-19 crisis that collaboration with public health and community-based organizations is an essential part of a resilient health care system, and we continue to build that collaboration.

In 2021, a virtual Annual Conference will be held April 22-24. We are excited to have invited T.R. Reid as a key speaker at the event, and the Education Commission is hard at work pulling together an outstanding program.

Our Advocacy Day in the spring will look different, as well. On March 10 and 11, we will offer members a chance to attend virtual legislative briefings and 'visits' with legislators, and we will work in collaboration with the OMA and other medical specialties on some joint events that week. With no need to travel to Salem, we are hopeful to have better engagement than ever this year!

We will continue to represent your interests on critical issues like community physician engagement in the COVID-19 vaccination campaign, and efforts to keep moving forward on payment reform that makes sense for primary care and supports expanded access to advanced primary care for all.

One last note: your membership in this organization is literally what makes it possible for us to do this work. We are so grateful you continue to make that choice.

A handwritten signature in black ink, appearing to read 'Betsy'.

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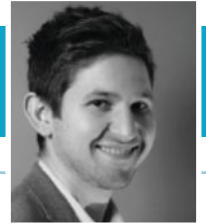


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• PUBLIC POLICY AND LEGISLATIVE AFFAIRS



SAM BARBER, LOBBY OREGON - OAFP LOBBYIST

As the COVID-19 pandemic rages on, some advocates are focused on a different pandemic leading up to the 2021 Legislative Session—substance abuse, and in particular, alcohol abuse. Oregon boasts the third highest untreated addiction rate in the nation, while ranking 47th out of 50 in access to addiction services. When it comes to child abuse and neglect, alcohol is involved in 58.6% of child removal cases. But perhaps the most staggering figure is that alcohol kills five people a day in Oregon, roughly twice as many as COVID-19 until the most recent surge.

All of this has led a coalition of social service providers, the health care industry, and local governments to seek a means of increasing Oregonians' access to addiction services and instituting a single point of accountability to oversee a new continuum of care. To accomplish this, they are proposing a 20% increase to alcohol excise taxes. Projections say this could raise upwards of \$700 million to help fund a statewide coordinated prevention program, bolster intervention and engagement systems in primary care and hospitals, increase residential beds and outpatient treatment infrastructure, and pay for robust recovery supports.

While Oregon has the lowest beer and wine taxes in the entire country, it remains to be seen whether legislators are willing to enact such taxes that would inevitably impact some of the hardest hit businesses in 2020, namely restaurants and breweries. If it's any indication of the current political climate, the Governor opted to leave such a tax out of her proposed budget.

The Governor *has* included in her budget a variety of proposals aimed at health equity. First, she proposes new funding to help implement what is referred to as REAL D—race, ethnicity, language, disability data. The Legislature passed a bill during the second special session this summer requiring medical providers to collect and submit this data for every patient who receives a COVID test. Similarly, her budget includes funding for

sexual orientations and gender identity data (SOGI) implementation and a statewide trauma-informed training program that provides technical assistance to providers.

Data are most certainly needed to identify and validate the existence of health inequities. That said, the implementation of REAL D collection has been burdensome and expensive for providers. If that data collection effort is expanded to all patients, and/or if SOGI data collection becomes mandated, both would have major financial and administrative impacts on primary care clinics around the state. The OAFP Commission on External Affairs will watch closely as these proposals are rolled out and provide input on how we can meet the intended goal of health equity in the most efficient and effective way possible.

On the whole, there are many unknowns even with the 2021 Session right around the corner. The public, including advocacy organizations and lobbyists, will not be allowed in the building for at least some of the session. How that will impact the number of bills, access to legislators, and what Democratic leadership will prioritize remains to be seen. The budget outlook is better than predicted over the summer, but the state is still looking at a ~\$2 billion budget gap depending on how you calculate it. Without help in the form of another federal stimulus, difficult cuts will have to be made, or taxes will have to be raised—neither is easy to do. Further increasing the uncertainty is whether Republicans will stick around this Session. Democrats retained supermajorities in both chambers in the recent election; that's enough to pass any legislation (including taxes) without a single Republican vote. But they did not pick up enough seats to prevent Republicans from walking out as they have the last two sessions. Without Republicans in the building, the Democrats do not have the requisite quorum to hold floor votes, preventing the passage of any legislation regardless of whether they have the votes.

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• FROM THE HILL



JESSICA WEYLER, OHSU DEPT. OF FAMILY MEDICINE - RURAL EDUCATION COORDINATOR
ERIC WISER, MD, FAAFP, OHSU DEPT. OF FAMILY MEDICINE - DIR. OF RURAL MEDICAL STUDENT EDUCATION

Rural Education in 2020, Made Possible Because of You

What a year! COVID-19 significantly impacted health care and our daily lives. We at OHSU Family Medicine would like to start off by thanking the community sites who enthusiastically took students in the midst of a pandemic. Your continued dedication to teaching is impressive and so appreciated. We recognize that teaching medical students in a rural or underserved area takes a village; this work is made possible by the many who educate and support our students. These efforts are done on a purely volunteer basis. We are very appreciative of those who provide spaces for students in their practices, facilitate the Interactive Patient Centered Clinical Inquiries (Small Groups), evaluate Telemedicine Objective Structured Clinical Examinations (teleOSCEs), lecture, and onboard and orient our students. We could not coordinate or direct any of the curricula without such dedicated partners. A special thank you goes to our last two recipients of the Lewis and Ruth Carpenter Teaching Award for excellence in teaching as a community preceptor, **Dr. David Abdun-Nur** of Mountainview Family Practice in Grants Pass (2019) and **Dr. Kanani Dilcher**, formerly of Dunes Family Health Care in Reedsport (2020).

“Northwest Family Medicine in Silverton was one of the best experiences on a clinical rotation. What a great opportunity to work with enthusiastic and compassionate physicians in a rural, private practice. Drs. Sarah and **Tim Peters** are passionate about giving students multiple opportunities to learn and gain hands-on skills. For students considering Family Medicine, I highly recommend this rotation - it provides you with a unique experience and excellent education.”

- Jason Brant MD'22

Our windshield time in 2019 was extensive, exciting, and exhausting. We used this time to be face-to-face with current and future preceptors. We have seen students in action at their clinical sites and have witnessed them presenting to regional and national audiences. We thoroughly enjoyed spending time with our partners at the Oregon Academy of Family Physicians (OAFP), Conference on Rural Health, Society of Teachers of Family Medicine (STFM), Area Health Education Centers (AHEC), Cascades East, Northwest Native American Center of Excellence (NNACoE), and many others. We could not have traveled as far and connected

with as many people as we did if we did not all share common goals. Additionally, we are so thankful for the time we spent traveling last year in light of the current pandemic, safety precautions, and travel restrictions.

2020 was a curveball to say the least, but we are proud to say with the help of many, we added three additional courses to our already extensive catalog and onboarded additional sites. We created two new virtual courses, a four-week rural elective and a two-week Social Determinants of Health elective, as well as an eight-week continuity elective with the Southern Oregon Rehabilitation Center VA in White City. Additionally, nine sites were miraculously able to host their first student rotations (ever or after re-onboarding) in 2020, including Klamath Open Door, St. Charles: Madras Family Care, North Bend Medical Center: Coos Bay and Coquille, Coquille Valley Hospital Primary Care, Curry Health Network: Curry Medical Practice, La Clinica: Medford, Aviva Health: Roseburg Family Medicine Residency and Northwest Family Medicine. In addition, we were grateful to be able to virtually onboard four new St. Charles sites!

In spring 2020, eight students were unable to complete their required rural rotations due to COVID travel restrictions. Although nothing will ever replace the true experience of rotating

in a rural area, we created a remote rural curriculum (with significant help from **Dr. Joyce Hollander-Rodriguez**, Linda Martin Stanger, AHEC partners and more). We formed a robust 108-hour curriculum with added weekly discussions and debriefs. The assignments were designed to help students better understand unique cultural and socioeconomic elements of rural communities. As the year went on, there was worry that more students would require this remote rural elective in order to meet their graduation requirements. We continued to engage with stakeholders to create more potential curricula if needed. To our delight, due to the amazing generosity of rural clinics who were able to physically host students, all other students were able to complete their rural rotations in person. We are grateful to have the remote elective available as a back-up in the future, if needed.

We also created a remote Social Determinants of Health elective and had our first students during the peak of the Black Lives Matter protests. In this elective, students learned about racial disparities in rural America, learned how the pandemic impacts certain communities, and were asked to really put themselves in the shoes of impoverished Americans to better understand patient perspectives.

Additionally, we were able to send our first student to White City at the Southern Rehabilitation Center for a six-week continuity rotation! Both Dr. Pedro Bujosa and Dr. Kacy Mullen led the way to designing this incredible curriculum. This elective is geared toward students who wish to experience family medicine with robust outpatient clinical care by working with the Family Physicians and care teams at the Southern Oregon Rehabilitation

Center and Clinics in White City, Oregon. The White City VA provides comprehensive outpatient primary care to veterans, whether the veteran comes to the clinic, is homebound, or is in need of residential care. Students will have a myriad of outpatient patient care experiences such as: women's health, PACT Care, same day care, residential care, multidisciplinary Home Based Primary Care and behavioral health (PTSD/substance abuse).

"Rotating at the White City VA was a great experience. All my attendings were great to work with and very flexible - letting me do as much as I was comfortable doing. I was able to work in residential patient care, go on home visits, and same day care appointments. I also rotated with mental health providers and in the radiology department. This experience gave a very well-rounded view of what the VA has to offer."

- Mary Parker MD'22

Finally, due to the amazing efforts of Sheila Jordan and **Dr. Robert Ross**, we were able to get to know the providers and staff, discuss curricula, and even go on virtual tours. As a result, we just submitted a proposal to the OHSU School of Medicine Curriculum Committee to add four new St. Charles Family Care Clinics throughout Oregon as teaching sites.

We cannot thank our OHSU and community faculty enough for teaching our students during this unprecedented time. We are so excited for the day that we can get out on the road again to thank you in person and continue to grow our student education team.



Seeking Fellowship Trained Geriatrician UCLA Affiliate in Los Angeles County

The Family Medicine Residency Program at Pomona Valley Hospital is seeking a Geriatrics fellowship trained physician to join the core faculty. This is a full time appointment through Premier Family Medicine Associates, Inc., the medical group that administers the residency for Pomona Valley Hospital.

This opportunity is perfect for someone who wants to teach residents and have a part-time, well supported practice caring for both the frail and healthy elderly. In addition, there is a practice opportunity for inpatient geriatric medical co-management with the Pomona Valley Hospital surgical trauma service.

The program was founded in 1997 and has 8 residents in each class. With the full support of the sponsoring institution we are committed to academic excellence and are working toward designation as a Program of Excellence. We are looking for candidates with commitment to resident education and quality patient care. Duties may include didactic teaching, precepting in geriatrics clinic, attending on the primary care and consultation inpatient services, and caring for patients in long term care and rehabilitation facilities with residents.

Situated within 3 miles of 4 large retirement communities; the program is a great fit for anyone interested in geriatrics. The sponsoring institution is a 440 bed community academic hospital, 30 miles east of Los Angeles, committed to expanding geriatric services, with the possibility of starting a geriatrics or palliative care fellowship program. The residency program has a strong geriatrics curriculum in place. Seven of our graduates have gone on to Geriatric and Hospice and Palliative Care fellowship training programs.

The medical center serves an ethnically and culturally diverse community. The hospital is a Safety Net provider; both the hospital and the family health center provide care to the underserved, underinsured, and the well insured of all ages.

Please submit letter of interest with CV to:

Lynne Diamond, MD
Designated Institutional Official (DIO)

Pomona Valley Hospital Medical Center
Geriatrics, Hospice and Palliative Care Medicine

Office 909-469-9493

lynne.diamond@pvhmc.org





DAN SENGENBERGER, DO, FAAFP, OAFP BOARD MEMBER
LA CLINICA – MEDICAL OFFICER FOR OPERATIONS AND OUTCOMES

Evacuation and Devastation in Phoenix



La Clinica's Phoenix Health Center (left-center of photo with gray roof) is surrounded by burned out manufactured homes, as well as business across Hwy 99

The last patient of the morning had left La Clinica's Phoenix Health Center. Medical Director **Victoria Cordy, MD** got a call from the operations director. "There's a fire about 10 miles away. Would you like to evacuate early?" Three other clinicians and over a dozen staff were finishing their work for the morning. A nurse walked outside for lunch, then came back inside and said, "There are embers falling in our parking lot!"

That Tuesday, **Mary Cutler, MD**, was planning an oil change for her car in Medford. As she started heading north from her home in Ashland, she found I-5 closed. She retreated home and learned the news of a small human-caused fire, started near Alameda Drive in north Ashland. The fire was rapidly spreading north along the Greenway, which runs north paralleling I-5 from Ashland through Talent, Phoenix, Medford, and Central Point. By

the hour, Jackson County Emergency Management was announcing ever-enlarging evacuation zones northward.

Residents of the Rogue Valley are familiar with wildfires in the surrounding mountains, leaving the Valley full of smoke for days or weeks at a time. When the National Weather Service warned of high winds and low humidity on September 7 and 8, most of us were anticipating a distant wildfire and smoke in the Valley. Except this one would result in tens of thousands of evacuations and thousands of burned homes by the next morning.

Back at Phoenix Health Center, Dr. Cordy's response on the phone was a clear, "Yes, we will evacuate!" Staff rapidly put signs on the doors and headed home. Dr. Cordy had been scheduled for all virtual visits that day. She yearned to get home to her family in Ashland, but she already knew that the major roads south—I-5 and

Highway 99—were closed because the fire had crossed on all sides of these routes. Her heart was with her patients, and she packed her laptop, stethoscope, and Chap Stick to a La Clinica site further north. Before she started her car, she wondered if this was the last time she'd see the clinic. For better or worse, she had come to love the people and the place and said to herself, "Oh my gosh, is this really happening?" Then COVID invaded her thoughts, and she rushed back in to grab N95 masks and hand sanitizer. Thirty minutes later, she found herself doing video visits with patients and families as they were considering evacuating, asking, "What should we do, doc?"

Her good friend and fellow La Clinica Medical Director, **Liz Banowetz, MD**, lived well out of the evacuation zone and offered Dr. Cordy a bed. That evening, Dr. Cordy knew her home and family were safe, but she didn't know about her clinic, her patients, or her staff. She was shaking all night as she texted and called, in disbelief that such devastation could happen so quickly.

Dr. Cutler rose early the next day to drive to the Jackson County Expo Center. As the deputy health officer for Jackson County Health and Human Services, she was to lead the medical section at the designated evacuation center at the Expo. Homes and businesses were still smoldering along I-5 as she slowly drove north, making room for emergency vehicles still fighting spots of fire.

By the time she got there, several other family physicians had already arrived, including **Jani Rollins, MD** and **Brandan Hull, MD**. Their first priority was caring for almost 50 patients from the burned Northridge Center, an assisted living facility in the same block as the Phoenix Health Center. Patients had a variety of complex needs, including ostomy care, quadraplegia, and complex medication regimens. By that night, dedicated County staff were able to find permanent housing for each the assisted living patients. This still left over 100 evacuated families at the Expo, some not knowing if their home was intact. Medical care then transitioned to management of chronic health conditions as well as acute mental illness. Behavioral health staff were recruited from around the Valley to provide brief counseling and connect people with resources. The evacuation area then had its own brief scare when a new fire sprouted nearby, fortunately contained within hours with ground and air fire suppression.

La Clinica's Phoenix Health Center was in the same block as Northridge Center. Based on early



Dr. Cordy (blue sweater) and several other employees at Phoenix Health Center looking at a wall of notes from co-workers at other centers

photographs of the area, it was assumed lost. By noon the day after the fire, new pictures from the road showed the clinic still standing, surrounded by a large neighborhood of burned out homes and businesses. However, the city had lost significant infrastructure, including roads, power, and internet. La Clinica's servers with computer and phone lines were located at Phoenix Health Center, and those needed to be moved to restore communications. The Phoenix staff set up at another La Clinica and began seeing patients there later that week. Four staff members and one board member lost their homes, and many other staff were evacuated for weeks until they could return. Once the final assessments were made, 2357 homes in Talent, Phoenix, and north Ashland were lost, 75% of which were manufactured homes. Many of these homes were occupied by people who have limited income, no insurance, or did not qualify for Federal assistance.

Today, if you drive I-5 between Phoenix and Ashland, you can see the burned trees with dried leaves still on the branches, disfigured highway signs, and miles of burnt and twisted manufactured homes. It will take months to clear the damage, years to rebuild, and generations to heal the collective trauma of the Almeda Fire.

True to their names, the cities of Phoenix and Talent are rising and moving forward to rebuild their communities. Four weeks after the fire, staff returned to the Phoenix Health Center. Though surrounded by burnt homes and businesses, they were cheered on by supportive patients and community members. Power was back, the computers were up, and Dr. Cordy and her staff were eager to heal.

IMPLICIT BIAS

Why Is It Important for Family Physicians to Understand?



DANIELLE D. JONES, MPH
AAFP CENTER FOR DIVERSITY AND HEALTH EQUITY - DIRECTOR

Implicit biases are the unconscious associations individuals form in response to social conditioning and audiovisual cues. In primitive persons, they were a useful tool for quickly triggering the flight or fight reaction in response to danger. Today the reaction is often elicited in response to race and/or ethnicity.

In the delivery of health care, implicit bias has shown to directly drive disparities in a number of diagnostic and treatment recommendations, including pain, coronary artery disease, kidney dialysis, contraception, and prenatal care.¹⁻³ More recently, it has been suggested that implicit bias may influence clinicians' decision-making with regards to testing for and treating COVID-19⁴. It is important for family physicians to understand that despite their best intentions, not even they are immune to the neurological phenomenon of implicit bias. By raising their awareness, family physicians can learn skills to minimize the influence of implicit bias on their clinical decision-making process.

Step One: Training to Build Awareness and Skills

The American Academy of Family Physicians (AAFP) recommends educating physicians about implicit bias and strategies to address it to support culturally appropriate, patient-centered care and reduce health disparities. The AAFP Board of Directors also recently adopted a race-based medicine policy opposing the use of race as a proxy for biology or genetics in clinical evaluation and management and in research. AAFP encourages clinicians and researchers to investigate alternative indicators to race to stratify medical risk factors for disease states.

AAFP has developed training resources to assist family physicians, family medicine residents, and medical students in recognizing and overcoming implicit bias and combating racism. These resources cover the neurobiological process that leads to the formation of unconscious associations in the

It is important for family physicians to understand that despite their best intentions, not even they are immune to the neurological phenomenon of implicit bias. By raising their awareness, family physicians can learn skills to minimize the influence of implicit bias on their clinical decision-making process.

context of current medical education and training, making implicit bias easier to understand. AAFP's training also includes the perspectives of patients who share their experiences with bias in the clinical setting. This helps physicians relate the concept to patient-centered care. Lastly, the training provides a set of skills physicians can practice in and out of the clinical setting to further reduce their reliance on unconscious associations.

While designed primarily to address implicit associations that arise during physician-patient encounters, the same skills can be used in relationships between physician peers, especially in the context of employee relations such as hiring and promotion. The training was developed using resources cited in medical literature as effective for training in the health care setting. It includes self-assessments and case study examples similar to those used in medical education and training.

AAFP began piloting this training with members of its Board of Directors and commissions, as well as executive leadership and staff. It is now in the second phase of the pilot, working with a select

group of chapters to measure the effectiveness of the learning outcomes and engagement as part of AAFP's compliance as a continuing medical education provider. AAFP plans to share what it learns through this pilot to inform future education on implicit bias.

AAFP, through The EveryOne Project, has also developed an Implicit Bias Training Guide to promote awareness of unconscious associations among primary care physicians and their practice teams. The Guide includes a facilitator's guide, participant's guide, a series of videos, and customizable PowerPoint presentations that can help facilitate practice teams' in-service or lunch-and-learn sessions. This resource, exclusive to AAFP members, is available at aafp.org/patient-care/social-determinants-of-health/everyone-project/eop-tools/implicit-bias-resources.mem.html.

Another training opportunity is the Health Equity Fellowship, a collaboration between AAFP and the Association of Family Medicine Residency Directors. The goal of the fellowship is to cultivate a cohort of family physicians as subject matter experts capable of driving policy and system changes that produce equitable health outcomes in their local communities and across primary care.

The American Board of Family Medicine is also committed to assisting family physicians in turning the tide on implicit bias. Its new Health Disparities/Equity Self-Directed Performance Improvement Clinical Activity addresses many different dimensions of care—such as assessing race/ethnicity, socioeconomic status, sexual orientation/gender identity, disability, rural, and the underserved. The activity also provides an opportunity for delegates to develop a plan for closing gaps in care, such as disparate outcomes of common screening activities (e.g., cancer, HIV) and/or conditions (e.g., quality measures for hypertension, diabetes).

Beyond Training

While training may be an effective intervention for targeting health care inequities that result from physicians' unconscious associations, additional upstream interventions are needed that target the use of race as a proxy in medical decision-making and the health care system more broadly. Currently, the way in which race is used as a proxy in medical decision-making allows for differential diagnosis and treatment

recommendations for which there is no biological or genetic justification. AAFP opposes the use of race-based medicine and encourages family physicians and other clinicians to investigate alternative indicators. In addition, interventions that aim to implement more equitable policies, procedures, and processes in the delivery of care must also be considered.

Addressing the root cause of health inequities will require structural change on multiple levels.

AAFP hopes that members see implicit bias training as an opportunity to be part of the solution. By acknowledging and then actively working to become aware of and address one's own personal biases, family physicians can collectively begin to engage and dismantle the systems which impact both them and their patients.

1. Hoffman, K.M., et al., *Racial bias in pain assessment and treatment recommendations, and false beliefs about biological differences between blacks and whites*. Proc Natl Acad Sci U S A, 2016. 113(16): p. 4296-301.
2. Daugherty, S.L., et al., *Implicit Gender Bias and the Use of Cardiovascular Tests Among Cardiologists*. J Am Heart Assoc, 2017. 6(12).
3. Kogan, M.D., et al., *Racial disparities in reported prenatal care advice from health care providers*. Am J Public Health, 1994. 84(1): p. 82-8.
4. Milam, A.J., et al., *Are Clinicians Contributing to Excess African American COVID-19 Deaths? Unbeknownst to Them, They May Be*. Health Equity, 2020. 4(1): p. 139-141.

Danielle D. Jones, MPH guides the strategic priority of AAFP's Board of Directors towards a leadership role in addressing diversity and social determinants of health as they impact individuals, families, and communities across the lifespan and strive for health equity. This article has been reprinted with permission from the AAFP.

MEMBERS IN THE NEWS



Jessica V. Burness, MD, Jilliam M. Schroeder, MD, and Johanna B. Warren, MD coauthored the article “Cervical Colposcopy: Indications and Risk Assessment” which was printed in *American Family Physician’s* July 1 issue. Link to article: <https://www.aafp.org/afp/2020/0701/p39.html>



Robyn A. Liu, MD, MPH, FAAFP, Portland, has been appointed to the AAFP Commission on Membership and Member Services for a term of four years. Dr. Liu looks forward to continuing her record of engagement and advocacy within the AAFP.



John P. Muench, MD, MPH was the corresponding author of the article “Assessment of Opioid Prescribing Patterns in a Large Network of US Community Health Centers, 2009 to 2018” published online September 18, 2020. Link to article: <https://jamanetwork.com/article.aspx?doi=10.1001/jamanetworkopen.2020.13431>



Rebecca Cantone, MD’s [TeleOSCE resource](#) has been one of AAMC’s most downloaded resources from their MedEd Portal since March. It addresses a variety of medical conditions to help train future clinicians in practicing telemedicine.



The study led by **Eriko Onishi, MD**, “Patient “Catastrophizing” Associated with Expectations of Opioid Prescriptions for Acute Pain Control” was published in *The Journal of the American Board of Family Medicine* in November 2020. Link to article: <https://www.jabfm.org/content/33/6/858>



Anthony M. Cheng, MD and Jennifer E. DeVoe, MD, FAAFP, DPhil were among other co-authors on the article “Redesigning Primary Care to Address the COVID-19 Pandemic in the Midst of the Pandemic” which was published in the *Annals of Family Medicine*. Link to article: <https://www.annfam.org/content/18/4/349>



Gary M. Plant, MD, FAAFP, has been appointed to a four-year term on the AAFP Commission on Quality and Practice. Dr. Plant practices in Madras and has been an active member in the OAFP and AAFP for several years. He is presently one of OAFP’s two Delegates to the AAFP Congress and was OAFP’s 2020 Family Medicine Doctor of the Year.



On December 15, 2020, **Eva Galvez, MD**, was interviewed by NPR’s Morning Edition Host Rachel Martin. “Why Many Latinos Are Wary of Getting the COVID-19 Vaccine.” Link to interview: <https://www.wbur.org/npr/946617273/why-many-latinos-are-wary-of-getting-the-covid-19-vaccine>



Jamie L. Skreen, DO cowrote a grant which secured a \$25,000 AAFP Family Medicine Cares USA Program award for Portland Street Medicine.

The AAFP Family Medicine Cares USA Program helps free clinics care for the uninsured in the United States by providing grants for the purchase of tangible items, such as exam tables, EHR systems, and medical equipment. Family Medicine Cares also gives AAFP members, residents, and students the opportunity to volunteer their time and talents.

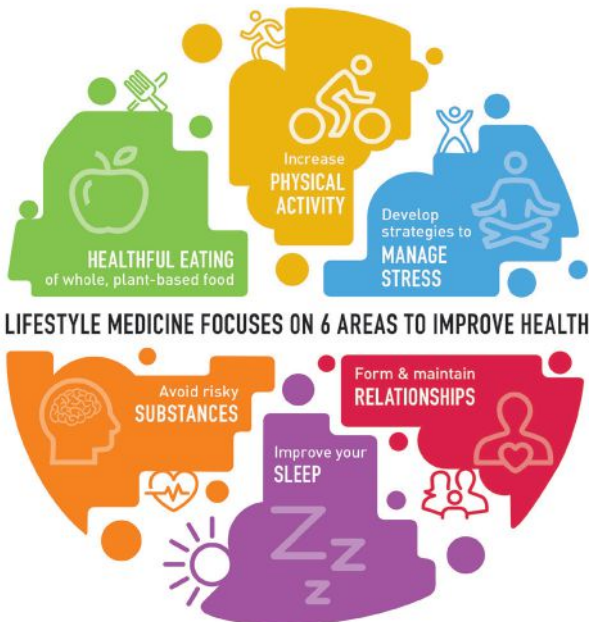
Portland Street Medicine is a free clinic and Federally Qualified Health Center comprised of over one hundred volunteer medical providers, social workers, and care managers dedicated to reaching our most vulnerable community members. They partner with providers in the homeless services delivery system, including Central City Concern, Street Roots, Oregon Harbor of Hope, and many more. Their clinic is in the streets, wherever and whenever people are congregating and leading an unsheltered life. They meet people where they live—in tents,

in camps, in forests, under bridges, and wherever humanity seeks shelter.



Amy Wisner, MD, FAAFP, was an invited guest speaker at November’s President’s Cancer Panel Series “Improving Resilience and Equity in Cancer Screening: Lessons from COVID 19 and Beyond.” The PCP

was established in 1971 and monitors the activities of the National Cancer Program, reporting to the U.S. President on barriers to progress in reducing the burden of cancer. Panel members include NCI, NIH, CDC, and academic thought leaders. Dr. Wisner also serves as a Trustee on the OAFP/Foundation Board.



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STUDENTS SPEAK OUT!

Oregon Health & Science University



For most of us, 2020 has been a year like no other, which was also true for the Family Medicine Interest Group at OHSU School of Medicine. Taking over the reigns just two months prior to the prolonged shutdown, resulting from the COVID-19 pandemic, this year's leads had to adapt quickly to the changing social and educational landscape to ensure they and their fellow pre-clinical classmates were able to enjoy valuable experiences within the scope of Family Medicine. Lunchtime talks became virtual, workshops were replaced with a virtual journal club, and new bonds were forged within the Portland community and across health care entities.

One example of such newly formed bonds includes a new collaboration with the Interprofessional Care Access Network at the School of Nursing. In the face of a pandemic that made mobilizing a purely virtual venture, FMIG and Interprofessional Care Access Network (I-CAN) are happy to be providing seven first-year medical students with the opportunity to partake in the new collaboration. Medical students will team-up with those from the nursing, nutrition, and dental schools at OHSU to assist and support the social and medical needs of under-resourced individuals and families in the Portland Metro area. Often an educational component reserved for a medical student's clinical years, this interprofessional experience will give these medical students a greater appreciation for the work of other health care professionals; a real-world context in which they can practice their bed-side and interpersonal skills; and a better understanding of care-coordination, the essence of quality health care.

This year, FMIG has also connected with the Immigrant and Refugee Community Organization (IRCO) to offer virtual volunteer opportunities. During the summer, FMIG members volunteered as tutors for

IRCO's virtual summer INSPIRE tutoring program, where students aided instructors in leading book clubs, STEM classes and more, with high school and middle school students. This winter, a number of FMIG members will be volunteering with IRCO's Africa House virtual Saturday tutoring sessions.

In late October, FMIG started an effort to create and distribute laminated voter registration signs to OHSU hospitals and local clinics. With the inspiration of other medical centers around the US and the help of the OHSU communications team, we were able to create a bilingual (English and Spanish), non-partisan voter registration poster, complete with a QR code to promote voter registration in Oregon. The FMIG team distributed these signs to OHSU clinics from northeast Portland down to Tigard; copies were also made available online. We hope that future FMIG leads will continue to lead this effort and help distribute these posters every election year!

Moving Lunchtime talks to a virtual format allowed FMIG to invite experts from many fields. We hosted a virologist and a vaccinologist to answer questions at the beginning of the pandemic. We also invited family doctors to speak about their experiences with addiction medicine, treating overweight patients, and the future of telehealth. We were privileged to have legendary family physician **Dr. John Saultz** address the class of 2024 about why family medicine offers a rich career path. Finally, we hosted our annual "Meet the Docs" and "Can I Afford to Go into Primary Care?" panels.

Despite the virtual format and lack of free pizza, the FMIG has built interest in family medicine in the class of 2024. We have chosen a new leadership team to take over when we begin our dedicated Step 1 study period and we are confident that they will continue our work of promoting family medicine at OHSU!



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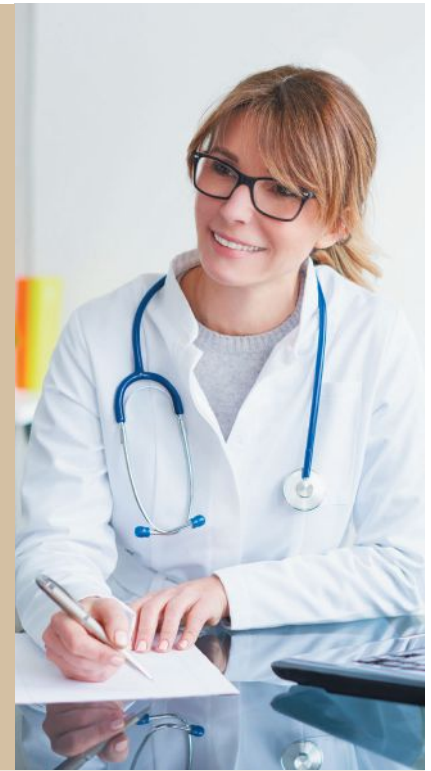
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Introducing Our New Family Medicine Residents

This summer, Family Medicine residents from around the country arrived in Corvallis, Hood River, Klamath Falls, Portland, and Roseburg, to begin their Family Medicine residencies. Each one of them brings their unique talents and perspectives to their programs and patients.

OHSU Portland is a four-year family medicine residency while the other Oregon residencies take three years to complete. Providence Hood River offers training in Rural Family Medicine. Providence Oregon is located in Milwaukie at the Providence Milwaukie Hospital. The Corvallis program is part of Samaritan Health Services and has three clinic locations. OHSU extends its program to Klamath Falls with the Cascades East Family Medicine Residency, another program offering rural training. Roseburg welcomed its first class of interns this year and also offers rural training.



ASHKAN ABEDINI, MD

Samaritan Family Medicine Residency

American University of Antigua College of Medicine

Dr. Abedini was born in Iran but moved to Portland when he was just two-years old. His medical interests include: outpatient family medicine and

hospital medicine.

In his spare time, he likes to go hiking with his dog Leo, spend as much time as possible outdoors, spend time with family and friends and play sports. He loves soccer and was able to attend the 2010 World Cup in South Africa.



ERIC ARDMAN, MD

OHSU Portland Family Medicine Residency

University of Miami Leonard M. Miller School of Medicine

Dr. Ardman's Vietnamese name is "Binh An" which means 'peaceful.' He grew up outside of Philadelphia but spent his formative years in Miami, FL.

In Miami, Eric developed a passion for caring for those on the margins of society and learning about his community so that he may effectively advocate for the necessary change to improve said community. He only speaks when he has something to say; he prefers to listen to others and hear about their lives. He wants to know about his patients' values and family in addition to their chronic ailments and medical problems. He wants to be a helpful, honest guide and supportive presence in the lives of his patients.



AMAL ALYUSUF, MD, MPH

Roseburg Family Medicine Residency

Arabian Gulf University College of Medicine and Medical Sciences

Dr. Alyusuf graduated from medical school in 2006 and then went on to complete a one-year medical internship and a four-year ophthalmology residency at Salmaniya

Medical Complex in Manama, Bahrain.

In 2012, just as Dr. Alyusuf was finishing her residency training in Bahrain, she and her family fled to the United States due to extraordinary circumstances related to political unrest in her home country. After this experience, she co-founded a non-profit organization called Bahrain Rehabilitation and Anti-Violence Organization (BRAVO) that helped survivors of violence. She also volunteered for human rights organizations advocating for survivors and researching violence.

Dr. Alyusuf also recently completed her Master's in Public Health at The George Washington University in Washington, DC in 2019. She joins the Roseburg Family Medicine Residency Program with a wealth of knowledge and life experiences, making her an excellent fit for the community.

Outside of her clinical responsibilities, she loves to read, write poetry, hike, swim and, above all, spend time with her husband and three children.



SHAINA L. BELSKY, DO

Providence Oregon Family Medicine Residency

University of New England College of Osteopathic Medicine

Dr. Belsky loves family medicine because it gives her the opportunity to work with patients of all ages, genders, and backgrounds. She wanted to be in a

field where the focus is on building community, advocating for that community, and understanding the social determinants of health. She is interested in integrative medicine, osteopathic manipulative medicine, addiction medicine and LGBTQ health. She was drawn to Providence Oregon FMR's great community and focus on well-being for both patients and providers.

The Pacific Northwest played a big role in drawing her from the opposite coast; Portland, ME to Portland, OR. Recently she has been enjoying tennis, hiking, camping, board games and exploring her new home.



RACHEL BONESKI, DO

Providence Oregon Family Medicine Residency

Pacific Northwest University of Health Sciences, College of Osteopathic Medicine

Dr. Boneski chose family medicine because she enjoys the diversity. She gets to see pregnant moms and their newborn babies, all the way up to people at the end of life. Family doctors get to know their patients and their patients' families over the years, and have the privilege of being part of their lives.

She enjoys anything to do with animals, the outdoors, plants, and exercising. She keeps busy with her corgi dog, named, "Nala".



ALIX J. COOPER, MD

OHSU Cascades East Family Medicine Residency
Oregon Health & Science University School of Medicine

Dr. Cooper grew up in Hood River - a city well known for its abundance of outdoor activities including windsurfing, kiteboarding, hiking,

mountain biking, and skiing - all activities they grew up loving. Their only long-term ventures outside of Oregon were during college, when they attended University of Puget Sound in Tacoma, WA and majored in Biology with a minor in Bioethics.

During college, Dr. Cooper developed a love of the Seattle Sounders soccer team, thanks to their partner. They moved back to Oregon to go to medical school at OHSU, and during their fourth year of medical school had the opportunity to move to Klamath Falls to complete the rest of their medical education.

Dr. Cooper loves that Klamath Falls offers many of the same opportunities as Hood River did growing up. Their special interests in medicine include transgender health, palliative and end-of-life care, and adolescent health.



THOMAS CRUMM, DO

Samaritan Family Medicine Residency
Philadelphia College of Osteopathic Medicine

Dr. Crumm grew up in Greenville, SC. Before medical school, he worked in the corporate world and was in the United States Marine Corps for six

years. His medical interests include emergency medicine, urgent care, and OMT. His hobbies include distance running, reading fiction novels and politics. He also loves to travel.



RYAN M. DUNKLEY, MD

OHSU Cascades East Family Medicine Residency
University of Minnesota Medical School - Duluth Campus

Born and raised in rural Minnesota, Dr. Dunkley spent a great deal of time exploring the outdoors, hunting and fishing, among other activities. He

attended college at Saint John's University where he majored in Biology and Hispanic Studies. He pursued his love of travelling through study abroad experiences in the Ecuadorian Amazon and Galapagos Islands as well as in Spain. While in college, he met Anna, who is now his wife.

He was not sure what his future avocation would be until he worked as a scribe in an ER; an experience that reinvigorated his interest in medicine. In searching for a medical school, Dr. Dunkley found the rural Duluth campus where the focus was on serving rural and Native American population. This was a perfect fit for him as someone from a rural area with connections to the local Ojibwe band, of which his father is a member.

When the time came to look for a residency, he knew he was looking for full-spectrum training with a rural focus. Klamath Falls was the perfect fit for both he and his wife with mountains, lakes, and an unmatched residency program. He looks forward to becoming part of the Klamath Falls community over the next few years. In his limited free time, he hopes to continue current hobbies like fishing, hiking, birding, and listening to obscure country/folk music while also exploring new pursuits like mountain biking, but mostly he'll be spending time with his wife, new daughter, and his dog, Cedar.



GERMAN S. FERRER, MD

OHSU Cascades East Family Medicine Residency
Oregon Health & Science University School of Medicine

Dr. Ferrer grew up in the small, rural town of Coquille, OR. His path to medicine was an interesting one. While in high school, he spent his time outside of school as

a drummer for local bands, surfing, and working as a wildland firefighter. Somewhere along the lines, he discovered his desire to enter the medical field. Luckily, he also found the love of his life, Becca.

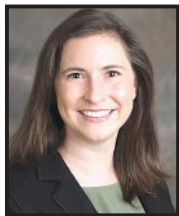
Shortly after they married, they attended Oregon Institute of Technology (OIT) in Klamath Falls together. It was here that he truly found his passion for becoming a physician. It probably began in the cadaver lab where he learned to appreciate the science, technical skills, and sensitivity of medicine as he studied, dissected, and maintained the bodies of those who donated their bodies to science. His interests also led him to attend a medical mission trip to Belize, where he translated for the physicians as they cared for patients; it was during this trip that he grew to appreciate fully the role of a physician and the patient-doctor relationship. He decided to direct his focus towards pursuing medical school, and ultimately attended OHSU in Portland.

Prior to entering medical school, he spent one year teaching chemistry labs at OIT while his wife finished her studies. Dr. Ferrer also completed a year-long fellowship in pathology in between his second and third year at OHSU.

Dr. Ferrer's passion for medicine has always included a desire to practice in a rural area, and while rotating through a variety of specialties, including a very influential rotation at Cascades East - he found that he desired to serve whichever rural community he would end up in as a family medicine physician. He went on to spend his last year of medical school at Cascades East as an Oregon First student, and is excited to be spending the next three years in the residency program.

He is very busy outside of residency fulfilling his many interests and hobbies including, but not limited to, mountain biking, camping, building and working on bikes, working on cars, spending time with his beloved wife and two dogs, spending time outdoors, and generally doing a variety of projects.

continued on page 22



JULIA FINCH, MD

OHSU Portland Family Medicine Residency
The University of Chicago Pritzker School of Medicine

Dr. Finch chose a career in family medicine because it allows her to care for patients of all ages through all stages of life. After earning an undergraduate degree in Women's Studies, she was originally drawn to medicine as a way to advocate for equity, justice, and respect for all people. Dr. Finch is driven by a desire to get to know her patients' families, support systems, and what enables them to live their best lives. With a passion for preventative medicine and integrative health, she derives great satisfaction from partnering with her patients to achieve their goals.

When she's not working, Dr. Finch loves to travel, read, do crossword puzzles, brew beer, and spend quality time with her husband, Shashin, and their Mini Bernedoodle, Denali. As a new resident of Oregon, she appreciates any recommendations for local food, dog-friendly hikes, weekend getaways, and Pacific Northwest plants that will be hard to kill as she learns how to garden.



LEAH HAYKIN, MD

AAFP Student Member Ambassador 2019-2020
OHSU Portland Family Medicine Residency
Icahn School of Medicine at Mount Sinai

Dr. Haykin grew up in northeast Portland, and after a brief hiatus, is thrilled to return to Oregon to continue her training. She was raised to have a deep appreciation of and passion for social justice, the environment, and education. As an undergraduate at Brown University, she studied Health and Human Biology with a focus in Environmental Health. During this time, she volunteered at a free clinic for primarily houseless patients, and conducted research projecting the geographic distribution of climate change health impacts. Through these experiences, she became aware of how our environment – in terms of both physical spaces and social structures – impacts our health and leads to health inequities.

Dr. Haykin was drawn to family medicine during her time at the Icahn School of Medicine at Mount Sinai, where she helped run a free clinic for undocumented patients, led Medical Students for Choice and Family Medicine Interest Group chapters, and performed research on improving primary care delivery among houseless populations in Seattle and rural populations in Ghana.

Within family medicine, she is interested in comprehensive reproductive health, obstetrics, gender reaffirming care, behavioral health, and addiction medicine. She is excited to serve, advocate for, and learn from patients of all incomes and cultural backgrounds. She feels lucky to have the privilege of working with the OHSU Department of Family Medicine's phenomenal team of compassionate faculty and resident providers. Outside of the hospital, she enjoys being outdoors, cycling, hiking, and running, finding new recipes to cook, going to concerts, playing guitar, volunteering with local social justice organizations, learning Spanish, doing yoga, and spending time with friends, family, her partner, and Luna, her grumpy cat.



KATHRYN HOLT, MD

OHSU Portland Family Medicine Residency
University of Michigan Medical School

Dr. Holt grew up in a small town in the foothills of Colorado, where she attended the University of Colorado and double-majored in Molecular Biology and Neuroscience. She moved to Ann Arbor, MI for medical school where she fell in love with family medicine and its longitudinal patient-physician relationships.

Dr. Holt enjoys seeing patients of all ages and life circumstances, but is especially passionate about adolescent health, LGBTQ care, and reproductive health. When outside of the hospital or clinic, she can be found exploring the beautiful outdoor activities that Oregon has to offer with her partner, trying new restaurants, or curling up with a good book.



LAWRENCE HOU, DO

Samaritan Family Medicine Residency
Touro College of Osteopathic Medicine – Middletown Campus

Dr. Hou is from the Bay area of California. His medical interests include point-of-care ultrasound, emergency medicine, urgent care, and procedural medicine. During medical school he experienced the patient side of health care when he had a tumor in his jaw that required surgical resection and reconstruction.

His hobbies include spirited driving, working out, hiking, testing out new technology, listening to podcasts, traveling and continuing his quest to find the best al pastor tacos and bowl of pho.



GABRIELLE KELLY, MD

Roseburg Family Medicine Residency
Oregon Health & Science University School of Medicine

A native Oregonian, Dr. Kelly grew up in Damascus, a community of approximately 10,600 people. She completed her medical education training at Oregon Health and Science University in Portland in 2019 and then went on to complete a one-year general surgery residency training program at Riverside University Health System in 2020. Dr. Kelly has known that she wanted to be a doctor from a very young age. She was born with a condition that required neurosurgery when she was only five months old. Learning about the anatomy, physiology and her own experience was the catalyst that sparked her interest in medicine.

Dr. Kelly brings to the team a wealth of knowledge and unique patient-focused perspective born of her own health history. She is excited to be part of the first residency class in Roseburg and is confident her previous surgical experience will allow her to contribute to creating a truly broad-spectrum family medicine experience.

Outside of clinic, Dr. Kelly enjoys distance running, baking sourdough bread, camping and backpacking with her boyfriend and dog. She is excited to be back in Oregon and exploring the North Umpqua Trail, local breweries and starting a garden.



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AMANDA J. KINLEY, MD

OHSU Cascades East Family Medicine Residency
University of Washington School of Medicine – Wyoming
WWAMI

Dr. Kinley was born in the Rockies, raised at the foot of the Tetons, and is a hard-working Wyoming girl. She loves the snow, the seasons, and the satisfaction of a job well done.

Before moving to Klamath Falls, Dr. Kinley and her fiancé, Eddie, traveled the WWAMI region (WA, WY, AK, MT, ID) for the full two years of clerkships. They continue to live in their travel trailer they affectionately call their GoHome.

She advocates for preventive medicine through healthy living and looks forward to the breadth and variety that her career in rural family medicine will bring. Her wish is to encourage and bolster her patients' healthy life choices and grow to know them so she may provide them the best of care.

Dr. Kinley loves bringing new life into the world and helping families and loved ones through the pain and joy that life brings. She strives for clear communication and understanding.

Hiking, canoeing, singing and skiing, foraging, figure skating, and working outside bring true joy to Dr. Kinley. While in Klamath Falls, she has enjoyed exploring the abundance of natural beauty and opportunities that Oregon has to offer. She is excited to continue to learn, grow, adventure, and teach.



SEEMAL KUMAR, MD, MBA, MPH

Roseburg Family Medicine Residency
St. George's University School of Medicine

Dr. Kumar was born in Fiji and grew up in the Central Valley of California. After medical school, she completed Master of Business Administration in Multi-sector Health Management and Master of Public Health, also from St. George's University.

Dr. Kumar believes family medicine highlights many aspects of the medical field which fit her outlook most. Caring for patients with both acute and chronic issues is one of the more rewarding aspects of her work, and she believes building a strong patient-physician bond is one of the cornerstones of family medicine. Treating the patient as a whole, Dr. Kumar says, is more effective than simply treating their symptoms, and her work in family medicine allows her to give back to the community by participating in health clinics, helping mentor and educate patients, and working hard to help promote preventive care.

Outside of medicine, Dr. Kumar enjoy traveling, hiking, biking, boating and other outdoor activities. She met her fiancé in medical school, and he has supported her through her journey. She and her fiancé travel often between Toronto and California to see their families, but also find time to explore their community.



SYDNEY R. LANDRETH, MD

OHSU Portland Family Medicine Residency
Medical University of South Carolina

Dr. Landreth is a family physician who sees patients of all ages for preventive care visits as well as for the treatment of a wide variety of acute and chronic illnesses. She chose family medicine because she enjoys getting to know her patients and what is important to them over the course of their lives. This helps her to provide care that addresses her patients' health -- physical, emotional, and social -- in the context of their unique lived experiences, goals, and values. Outside of work, Dr. Landreth enjoys spending time with her husband and loved ones, hiking, practicing yoga, reading, and gardening.



DAVID LEE, MD

Samaritan Family Medicine Residency
University of Nevada, Reno School of Medicine

Dr. Lee is from Los Angeles, CA and has a strong interest in academic medicine. Before medical school, Dr. Lee served in the US Marine Corps as a Military Police officer in the wake of 9/11. He was awarded the Global War on Terrorism Service Medal for his service. Outside of clinic, he enjoys cooking, grilling, discovering new restaurants, and spending time with friends and family.



ALDO E. MARTINEZ, MD, MPH

OHSU Portland Family Medicine Residency
Loyola University of Chicago Stritch School of Medicine

Dr. Martinez earned a BA in Spanish and a BS in Biomedical Sciences from Texas A&M University. After graduating Magna Cum Laude, he continued his studies at Texas A&M, earning his Masters of Public Health in Health Policy & Management (also with Honors). He is thrilled to be at OHSU Portland Family Medicine Residency.



DANIEL MORTENS, DO

Samaritan Family Medicine Residency
Arizona College of Osteopathic Medicine of Midwestern University

Dr. Mortens is from Farmington, MI and is interested in rural medicine. He is well suited to Oregon life as his hobbies include hiking, playing guitar, woodworking, skiing, spending time with his girlfriend and their two dogs and brewing beer.



CHASE MUSSARD, MD

AAFP Comm. on Education (COE) Resident & Student Issues, Student Representative
AAFP COE National Conference Planning, Student Representative
AAFP FMIG National Coordinator

AAFP Resident & Student Leader

OAFP COE, Resident Representative

OHSU Portland Family Medicine Residency

East Tennessee State University Quillen College of Medicine

Dr. Mussard comes to the PNW from the Appalachian Mountains of Eastern TN. He specializes in the field of family medicine, caring for patients of every age, gender, and walk of life. He absolutely loves family medicine because it allows him to be the best physician he can be to his community, fitting the needs specific to his patients, no matter what they may be.

Growing up seeing only a family doc, he was impacted with the value of family medicine from an early age. He is also super passionate about advancing primary care to be the backbone and leaders of our ever evolving health care system, advocating for our patients each and every day.

Integrated with his passions for family medicine, Dr. Mussard also enjoys time with his wife, Madison, and daughter, Lily. He was raised in the small "micropolitan" of Cookeville, TN and migrated back east to the mountains of his birthplace to run for the NCAA Division 1 ETSU Bucs, where he met Madison, and then stayed for medical school in Johnson City.

They enjoy traveling and all things outdoors. On any evening or weekend you may run into them out running in SE Portland, exploring all the amazing breweries and cuisine scenes of PDX, hiking/kayaking around Mt. Hood or the Columbia River Gorge, strolling through the neighborhood with a cup of coffee, or any other amazing adventure that our region provides! He and his family are eager and excited to make Portland and the Pacific Northwest their new home!



RUBAMA NASIR, DO

Providence Oregon Family Medicine Residency
Touro College of Osteopathic Medicine - Middletown Campus

Dr. Nasir chose family medicine because it combines all of the qualities of medicine which

she finds attractive and provides a platform for fostering incredible longitudinal relationships with her patients. The versatility of the scope of practice will encompass her interests.

Given the emphasis and structure family medicine has dedicated to the relationship between a patient and their doctor, it provides a perfect platform for her passion for understanding health disparities and proposing solutions through teamwork and advocacy.

For fun, she enjoys dancing, concerts, trying new restaurants, being outdoors, and spending time with family and friends.



TRIET ANH (Tom) NGUYEN, DO

Providence Oregon Family Medicine Residency
Touro College of Osteopathic Medicine - Middletown Campus
Dr. Nguyen grew up in a house that doubled as a clinic in Bao Loc, a small town in Southern Vietnam. His father had moved there shortly after finishing medical

school to provide health care for the community. As a kid, he enjoyed following his father around to see patients and watched him comfort them. His father's compassion towards his patients sparked Dr. Nguyen's interest in becoming a primary care physician.

During medical school, Dr. Nguyen realized that Family Medicine was the specialty in which his heart felt most fulfilled. He took great pleasure in meeting a diverse patient population, from the very young to the very old, and from many different backgrounds. He valued the continuity of care for which family medicine is known and understands that it is a privilege to build a long-term therapeutic relationship with patients and their family members, gain their trust, and lead them to better health. After his sub-internship at Providence Oregon FMR, he knew Milwaukie was the place for him. He loves the rigorous, unopposed, community-based training that the program offers and its commitment to the underserved.

Outside of medicine, he enjoys spending time with his wife and two kids, going to the beach, clamming, watching and playing sports, and lifting weights.



BAO-TRAN NHAN, MD

Providence Oregon Family Medicine Residency
University of Colorado School of Medicine

Dr. Nhan's story began as an immigrant from Vietnam. Acting as her family's interpreter since the age of five has shown her the challenges of language and cultural

barriers. Growing up in rural Oregon taught her the innumerable barriers to accessing health care. Her experiences taught her the challenges that many patients face, and cultivated her passion to care for communities in need. She aspires to foster life-long relationships and accompany patients on their journey toward better health.

Dr. Nhan grew up in a close-knit community along the Oregon coast and is forever grateful for how that community has supported her family throughout the years. Because of this, she has always wanted to give back to her community. While in high school, she volunteered at the local Providence hospital and witnessed how compassionately her community was treated. She knew that she wanted to be a Providence resident and is thrilled that she is working with such an amazing group of individuals.

Relaxing on the beach, enjoying the abundant and delicious Oregon cuisine, being surrounded by nature and wildlife, and shopping are activities that she enjoys in her free time.

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PATRIK OSORNIO CENTERWALL, MD

Samaritan Family Medicine Residency
Universidad de Montemorelos, Escuela de Medicina
Although Dr. Osornio Centerwall grew up in Silverton, OR, he was invited to join the Mexican Olympic track and field team.

As an athlete, he is interested in sports medicine, wilderness medicine and nutrition. Outside of clinic, he enjoys horseback riding and anything to do with horses, camping, hiking/mountaineering, overlanding, fishing, hunting, sports (baseball, soccer, and football) and board games.



JACQUELINE PARILLA, MD

OHSU Portland Family Medicine Residency
Rutgers New Jersey Medical School
Dr. Parilla is excited to be a member of OHSU's Family Medicine Residency Class of 2024.



MONICA A. PICARD, MD

OHSU Portland Family Medicine Residency
University of Pittsburgh School of Medicine
Dr. Picard believes that health care is a human right and that all people deserve high quality medical care. She loves getting to know her

patients and is living proof that doctors are not scary. Her interests include disability rights, sexual health, mental health, and preventive medicine. Her academic interests include anti-racist medical curricula and disability medicine. To all of her patients, past, present, and future, she says, "Thank you for being you!"



SONIYA PIMPARKAR, DO

OHSU Portland Family Medicine Residency
Pacific Northwest University of Health Sciences, College of Osteopathic Medicine
Dr. Pimparkar was born in Sydney, Australia, but spent the majority of her childhood in London,

England. She grew up learning how to speak two Indian languages (Hindi and Marathi) and quickly fell in love with learning more languages and understanding other cultures. As a college student, she worked as a medical interpreter/translator for Spanish speaking patients to develop fluency in Spanish. In her medical practice, she is interested in exploring how diverse upbringings and backgrounds contribute to a person's perception of their own health and can change their approach to medicine and wellbeing. She also believes that medicine should be easily understood and accessible to everyone, and as a physician, she

hopes to make all of her patients feel comfortable navigating through medical decisions and seeks to help others understand how their health and lifestyles are interrelated.

Dr. Pimparkar enjoys teaching and believes that it is the role of a physician to empower patients by providing information and answering questions with patience and compassion. She chose family medicine because she enjoys caring for and creating lasting relationships with patients in every stage of life.

Outside of medicine, she enjoys long bike rides whilst listening to the latest audiobook, playing piano/guitar, and singing. She is excited to settle down with her fiancé and make Portland their new home!



FERNANDO J. POLANCO, MD

ORCA-FM Policy Scholar
Providence Hood River Family Medicine Residency Rural Training Program
St. George's University School of Medicine

Dr. Polanco was born in Guatemala then moved to Canada in 1989 at the height of the Guatemalan Civil war. He was raised in a rural town in northern British Columbia. Shaped by his own experiences growing up, he became passionate about integrating social justice with health sciences. He has extensive experience in Indigenous health research, worked in health policy with marginalized populations and worked in harm reduction/needle exchange prior to starting medical school. He believes that family medicine has a unique ability to foster relationships both at an individual and community level.

When not working, he enjoys coaching and playing soccer, surfing, backcountry snowboarding, playing classical guitar, and speaks both Spanish and French.



ETHAN PRAIRIE, MD

Providence Oregon Family Medicine Residency
University of New Mexico School of Medicine

Dr. Prairie chose family medicine late in his medical school journey after realizing he enjoyed taking care of everyone with all the common issues we face: chronic pain, diabetes, depression/anxiety etc.

He chose Providence Oregon for residency because it felt like a welcoming environment that would encourage and support him to become a better person and doctor.

In Portland, he and his wife enjoy hiking and paddle boarding! Other hobbies include backyard cookouts, taking friends' money in poker, and yelling at the TV watching sports.



COLE PUFFER, MD

OHSU Cascades East Family Medicine Residency
University of Minnesota Medical School – Duluth Campus

Dr. Puffer’s love of rural places started early while growing up exploring the woods and fields of southeastern Minnesota with his three brothers. He

was raised in a medical family and on his way to college in Decorah, IA, he vowed he would be the one to find something different to do.

Decorah is a small town nestled in the bluffs and river valleys of the Driftless region, and there Dr. Puffer found his attention split by his love for biology and philosophy. He found it incredible to study evolutionary genetics and human anatomy in the mornings and be debating the nature of knowledge itself and investigating the human soul in the afternoons. Slowly, he realized that medicine is largely the combination of these two disciplines, and he set his sights on medical school. At seemingly the last moment possible before the end of college, he met his future wife Devon, and a few months later they packed up to move to their next adventure in Duluth, MN on the shores of Lake Superior.

One year after moving to Duluth, he was accepted into medical school at the University of Minnesota Medical School, Duluth Campus, which is focused on training physicians for rural medicine. He spent his third year in Bigfork, a town of 400 in northern Minnesota, learning how important family physicians are for medical access in rural towns. The physicians there covered the emergency room, hospital, clinic, and urgent care, and inspired him to do the same. He first heard about Cascades East in Bigfork where a former resident is now practicing. It did not take much convincing for the young couple to begin seriously considering Klamath Falls as the next stop on their adventure, and meeting the faculty and residents during the interview sealed the deal.

In his spare time Dr. Puffer is often found outside running, biking, hiking, skiing, backpacking, or gardening. He and Devon also love to adventure with their five-year-old border collie, Kaiser, who is always excited to go for a R-U-N. If it is warmer than seventy degrees, he’ll be inside cooking with Devon, reading, or trying to learn how to play the banjo.



RYAN REESER, DO

Samaritan Family Medicine Residency
Western U. of Health Sciences College of Osteopathic Medicine of the Northwest

Dr. Reeser is from Albany, OR and was the office manager of a local medical clinic prior to medical school. Interestingly, he completed his medical internship in Cape Town and Durban, South Africa.

His medical interests include sports medicine, exercise, nutrition, lipidology, and metabolic disease.

In his off time, Dr. Reeser enjoys hiking, taking his dog on walks, reading, and working out.



CAMILLE REYNOLDS, DO

Samaritan Family Medicine Residency
Pacific Northwest University of Health Sciences, College of Osteopathic Medicine

Dr. Reynolds grew up in Rathdrum, ID and then took an interesting route on the way to Corvallis.

She played Division 1 basketball in college, served as a community garden and farming coordinator for AmeriCorps in Alabama, and was a biologist at an engineering firm on the Gulf Coast.

Her medical interests are functional and integrative medicine, osteopathic manipulation, women’s health, and direct primary care.

Dr. Reynolds enjoys trail running, cycling and mountain biking, sauna-ing, cooking, skiing, backpacking and camping, reading, and listening to music in her spare time.



CARLY J. RITCHIE, MD

OHSU Cascades East Family Medicine Residency
University of Minnesota Medical School – Duluth Campus

Born and raised in Cloquet, MN, Dr. Ritchie fell in love with the outdoors and rural living. She went to the University of Minnesota Duluth and received a degree in Biomedical Sciences with a Chemistry minor.

She then continued on to medical school at the University of Minnesota Medical School Duluth Campus where she cemented her love for rural family medicine.

So much time in Duluth gave Lake Superior a special place in her heart. She spent her third year of medical school in the Rural Physician Associates Program (RPAP) where she was able to do her clinical rotations as the only student in a small town of 2,700, which was by far the highlight of medical school.

Now, she is thrilled to be continuing her rural family medicine training in Klamath Falls where there are so many outdoor activities. Dr. Ritchie moved here with her partner Robert and their Australian Shepard Sadie.



MARY ROUNTREE, DO

Samaritan Family Medicine Residency
Rocky Vista University College of Osteopathic Medicine

A native of Woodland Park, CO, Dr. Rountree is happy to be in Oregon for her family medicine residency.

Her medical interests include women’s health, integrative medicine, public health, and OMT. Before medical school she worked in an acupuncture clinic which inspired her interest in integrative medicine.

Away from clinic, she enjoys yoga, hiking, skiing, fly fishing, and exploring her new home here in Oregon.

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JARED D. SCHAEFER, MD

AAFP Student Membership Ambassador 2017-2018
OHSU Cascades East Family Medicine Residency
Saint Louis University School of Medicine

Dr. Schaeffer is from a small town in rural Oregon, the son of a Christmas tree farmer and a dental hygienist.

Growing up, he spent his summers working in the Christmas tree fields alongside his siblings, cousins, and friends, and made many memories and lasting relationships.

Dr. Schaeffer attended Oregon State University for his undergraduate studies, during which time he was able to study abroad in Spain to learn “just not quite enough Spanish.” Before applying to medical school, he worked as a medical scribe, during which time, he also met his wife, Cassidy. They married just before moving across the country to start their next adventure in St. Louis, MO, where Dr. Schaeffer attended Saint Louis University School of Medicine.

As a medical student, he loved every rotation and considered a number of different specialties, but ultimately he felt that he could make the greatest impact by training to practice broad spectrum family medicine. Lucky for him, there happens to be an excellent program with that very focus in his home state, and he couldn't be happier than to be training in Klamath Falls. He is blessed to have two beautiful daughters, both born during medical school, alongside him and Cassidy for this journey. In his free time he enjoys running, hiking, reading, board games and spending time with his family and friends.



LOGAN SMESTAD, MD

OHSU Cascades East Family Medicine Residency
University of Minnesota Medical School - Duluth Campus

Dr. Smestad is one of the four Minnesotan's that made the great trek to Oregon this year. He grew up in a small farming community in Minnesota and studied

at Gustavus Adolphus College thinking that medicine or teaching was going to be his future path. Instead, he switched directions became a bench researcher in plant genetics at the University of North Dakota. The lab life became lonely and Dr. Smestad missed interacting with people, so he moved back home to Minnesota. He found work as a substitute K-12 teacher and became the head coach of his former high school nordic ski team. After chasing kids with pointy things strapped to their arms and legs for a season, he decided it might not be too bad of an idea to get an EMT certification if he was to coach again the following year.

Dr. Smestad grew to love the fast-past nature on the ambulance and went on to become a paramedic working on the urban streets of North Minneapolis. It was here that he grew frustrated with the 911 system and realized the true impact that primary care could have on underserved populations. With the blessing of his wife, he applied and was accepted medical school. As a part of his third year he participated in RPAP, living in the small town of Grand Rapids, MN for nine months.

Dr. Smestad comes to Klamath Falls with his wife, Danielle and their three dogs. He is excited to live near mountains and expand on his always growing list of hobbies – upland bird hunting, trail running, mountain biking, nordic skiing, rock climbing and fly fishing – to name a few.



MELISSA E. SNELL, DO

Roseburg Family Medicine Residency
Pacific Northwest University of Health Sciences, College of Osteopathic Medicine

Dr. Snell was born in Los Angeles, CA, and grew up in Salt Lake City, UT. She received a bachelor's degree in psychology from Brigham Young University-Idaho, Rexburg, ID.

Dr. Snell is excited to be a part of Roseburg Family Medicine Residency Program's first class, setting the stage for doctors who join in the future. She looks forward to learning from the strong leaders of the residency program and gleaning as much as she can from the dedicated group of faculty physicians.

Away from clinic, Dr. Snell enjoys reading, playing the piano and guitar, singing, cycling, mountain climbing and camping. She is very excited to explore Oregon and its many outdoor recreational activities.



ASHLEY SPARKS, DO

OAFP Board of Directors, Co-resident Representative
OAFP Task Force on Equity, Inclusion & Diversity, Member
Roseburg Family Medicine Residency
Pacific Northwest University of Health Sciences, College of Osteopathic Medicine

Dr. Sparks grew up in the rural town of Yelm, WA. She earned her undergraduate degree in Biology from Saint Martin's University in Lacey, WA.

Dr. Sparks endeavors to do more than treat patients: she intends to be a physician who is both artful in the practice of medicine and skilled in listening and looking at problems from an alternative point of view.

Dr. Sparks is excited to be a part of the first Roseburg Family Medicine Residency class, set the expectations of what it means to be a family medicine resident in the new program, and provide feedback to help shape the residency in its early years. Away from the clinic, she loves to hike, kayak, practice yoga, cook, read, spend time with her dog and SCUBA dive. While in Douglas County, Dr. Sparks looks forward to spending time on the Umpqua River, hiking around the area, finding new lakes to explore and shopping at the Farmer's Market.



JEFFREY STOLSIG, DO

Providence Oregon Family Medicine Residency
A.T. Still University School of Osteopathic Medicine in
Arizona

Dr. Stolsig spent most of his youth travelling overseas and applied to medical school hoping to eventually practice in a rural and international setting. He chose family medicine because it is unique in the medical community, in that it allows you to practice in a huge variety of environments. You can truly build the practice you want and continue to adjust it as you progress in your career. His hobbies include dual-sport motorcycles, camping, cross country skiing, and making sourdough bread.



CHRISTY SUNNY, MD

Roseburg Family Medicine Residency
American University of Antigua College of Medicine

Dr. Sunny was born in India and moved to Chicago when she was 5 years old. She completed her undergraduate studies at Kasturba Medical College International Center, Manipal, India. While in school in India, Dr. Sunny worked with children in orphanages and people living in slums. During trips to Haiti, she worked with doctors to establish pop-up clinics in different communities. In both places, she spoke to people about preventive medicine, communicable diseases and hygiene. People in these areas have such limited access to health care, but they had a thirst for knowledge. Educating patients on their conditions and coming up with a treatment plan together solidified her desire to become a doctor who focuses on education and preventive medicine. Dr. Sunny focuses on building relationships with her patients by spending time explaining disease processes, treatment options, lifestyle changes and prevention methods. She believes in going beyond the description of symptoms to treat each patient as a whole. She is a very social person...” the start of a new paragraph. In her free time, Dr. Sunny makes it a point to explore. She believes it’s very important to immerse herself in the community and culture to experience something new and meet people from different walks of life. Her hobbies include traveling, cooking, hiking, volunteering, dancing, painting, wine tasting, and reading.



LINDSEY THIMMIG, MD

AAFP Student Membership Ambassador 2017-2018
OHSU Portland Family Medicine Residency
Georgetown University School of Medicine

Dr. Lindsay Thimmig [pronounced “tim-ig”] is a family physician, meaning she cares for people of all ages from newborns to the elderly. Dr. Thimmig chose family medicine because she believes that prevention is the best medicine and because she likes being able to care for patients no matter what health problem or concern they might have. She works with patients to make lifestyle changes to improve their health, and prefers to start with these changes before prescribing medications or recommending surgeries. She has trained under some of the leading experts in plant-based nutrition and Lifestyle Medicine, including Dr. John McDougall, Dr. Neal Barnard, and Dr. James Loomis. Outside of work, Dr. Thimmig aims to spend as much time outdoors as possible. She also enjoys relaxing at home with her orange cat and going on adventures around Oregon with friends and family. She also loves cooking up plant-based recipes in her spare time.



SIMRAN WALLER, MD, MPH

OAFP Board of Directors, Co-resident Representative
OAFP Task Force on Equity, Inclusion & Diversity, Member
ORCA-FM Policy Scholar
Roseburg Family Medicine Residency
St. George’s University School of Medicine

Dr. Waller was born in Dearborn, MI, and raised Benicia, CA, near the San Francisco Bay area. She earned her medical degree from St. George’s University School of Medicine, Grenada. Dr. Waller also completed her Master of Public Health from the same university and is certified in Lifestyle Medicine from Doane University. Dr. Waller’s interest in medicine was piqued by her grandfather who was a surgeon in India, though she says he functioned more like a modern-day family medicine physician, visiting rural areas to provide basic health care to underserved families. She cherished hearing about each patient’s background, their relationship with her grandfather, and the importance of his treatments in their overall well-being. Through her grandfather, she found her passion for family medicine. She truly admires the relationship patients have with their family physician and believes prevention and health promotion are essential components of the care she provides to her patients. Dr. Waller is also excited to work with people from diverse backgrounds and varying ages, balancing compassion and empathy along with clinical care. Away from the clinic, Dr. Waller enjoys reading suspense novels and thrillers, doing art projects with her daughter, trying new restaurants and recipes, taking trips to the lake for tubing and jet skiing, photography and dance. She is excited to begin her journey with the residency and looks forward to visiting wineries, parks, hiking and everything else the Umpqua Valley has to offer.

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SOPHIA WHITE, MD

OHSU Portland Family Medicine Residency
Weill Cornell Medical College of Cornell University

Dr. White is a family physician. She chose family medicine because she wants to care for individuals and families through all stages of their lives. She is especially interested in preventive medicine, women’s health, nutrition, and chronic disease management. Dr. White grew up in Portland, but spent time in Minnesota, California, Spain, and New York after high school. Prior to attending medical school, she taught middle school and high school science. She is excited to be back in Oregon. Outside of work, Dr. White enjoys spending time with family and friends, cooking, running, and reading.



TSZ HO (ERIC) WONG, MD, MPH

Roseburg Family Medicine Residency
Ross University School of Medicine

Dr. Wong was born and raised in Hong Kong. The preventive, cost-effective, pro-active, whole-person, integrative approach to health care he witnessed in Cuba inspired him to pursue a career in family medicine. That experience led him to Missouri where he became an assistant physician. It was there he had the opportunity to treat an underserved population that further pushed him to a career in direct primary care. It helped Dr. Wong better understand how a trust-based relationship with a physician in concert with

preventive care and health promotion can keep patients well and lower health care costs.

The opportunity to attend to families, as a whole, has made him feel integrated with the community, allowing him to connect on a much more personal level with patients. His goal is to empower his patients and enhance their self-confidence so they can make positive changes that will improve their health and ultimately their lives. Dr. Wong is excited to be a part of the family medicine residency program and brings with him experience working with diverse communities and an enthusiasm for improving the well-being of the Douglas County community.



JESSICA WORRELL, MD

Providence Hood River Family Medicine Residency Rural Training Program

The University of Oklahoma College of Medicine

Dr. Worrell is from Oklahoma. She grew up on a ranch in a rural community where she learned to be independent and resilient and decided that she wanted to become a full spectrum family physician and serve a rural population. In her personal statement she wrote: “I want to be more than just a healer, I aspire to be educational, inclusive, humane, and dedicated to the health and safety of my patient no matter their status or background”. Her non-medical interests include: jazz, piano, poetry, kickboxing, backpacking, nature and wildlife, rock-climbing, cross-country and hanging with her dog Opal. She is so very excited to be moving to the Pacific Northwest and become an Oregonian.

ORCA-FM Update

This fall we took advantage of the shift to virtual meetings to offer a Virtual Residency Fair for all of Oregon’s Residencies. The event was a big success, drawing over 200 medical students from all around the country, and helped the programs get more time to interact with potential applicants in advance of the crush of the application period.

The ORCA-FM Policy Scholars program launched as planned in September and has held monthly events via Zoom for representatives from each program. The goal of the program is to give participants contact with every aspect of physician advocacy so that they can fully understand the opportunities ahead their careers.

The December event included **Russell Kohl, MD, MPH, FAFAP**, the Vice Speaker from AAFP’s Congress of Delegates, **Nathalie Jacqmotte, MD**, OAFP’s outgoing Speaker of the Congress, **Gary Plant, MD, FAFAP**, OAFP Senior Delegate to AAFP, **Stewart Decker, MD**, OAFP President-Elect, and **Robyn Liu, MD, MPH, FAFAP**, who has served as a delegate to the AAFP National



Conference of Constituency Leaders. Participants got an overview of how policy is made within AAFP (and by extension, OAFP) then broke up into small groups to discuss the issues on their minds and begin shaping proposals for the 2021 Congress of Members.

Other sessions have welcomed **Kevin Ewanchyna, MD, FAFAP**, who serves as the OMA President and has co-chaired an implementation group on health care cost growth, **Evan Saulino, MD, PhD**, who is a longtime advocate and expert around primary care spending, advocates from the larger Oregon health care sector, **Elizabeth Baxley, MD, FAFAP**, the CEO of the ABFM, **Eric Wisner, MD, FAFAP**, Interim Director for Oregon AHEC, OAFP Lobbyist Sam Barber, and Eric Waskowicz from AAFP’s advocacy team. In January, we will hear from **Sen. Elizabeth Steiner Hayward, MD, FAFAP** and Rep. Rachel Prusak, a trained family medicine nurse practitioner, about the issues they are working on, and effective advocacy during the upcoming - likely virtual - legislative session in Salem.

Call for Poster Abstracts from Students, Residents and Fellows

Students, residents and fellows from around Oregon are invited to submit scholarly abstracts from research, quality improvement, education, workforce, practice facilitation or implementation projects. All subjects related to primary care are encouraged. Projects in progress, as well as completed projects are encouraged.

Selected abstracts will be presented as posters during the **VIRTUAL poster session of the OAFP/ ORPRN Spring Weekend on Thursday evening, April 22, 2021**. Posters will be judged by a panel of researchers, physicians, primary care staff and quality improvement experts. Prizes will be awarded to the top three posters, based on clarity of presentation and scholarly rigor.

Email your abstract to bbf@oaf.org by Feb 20, 2021. Selected abstracts will be notified by Mar 15, 2021.

Abstract Requirements

- Limit abstract to 500 words. This does not include the title or authors.
- Type the body of the abstract as one paragraph. The abstract should be written in the third person.
- The abstract should contain the subheadings described below, as appropriate.
- The abstract should not contain charts, graphics, references, or acknowledgments.

Abstract Format

Title: Type title in bold at the top of the abstract.

Author(s): List author(s) with presenter listed first.

Institution(s): List the schools or programs for each of the authors.

Email: Include the email of the presenter AND the mentor/director/faculty on the project.

Context/background: The abstract should begin with a sentence or two summarizing the rationale for the study or project, providing the clinical (or other) reason for the study or project. In addition, the author should give a sentence or two about the importance of this work to family medicine/primary care.

Objective: State the objective or study question addressed (eg, to determine whether...). If more than one objective is addressed, the main objective should be indicated and only key secondary objectives stated.

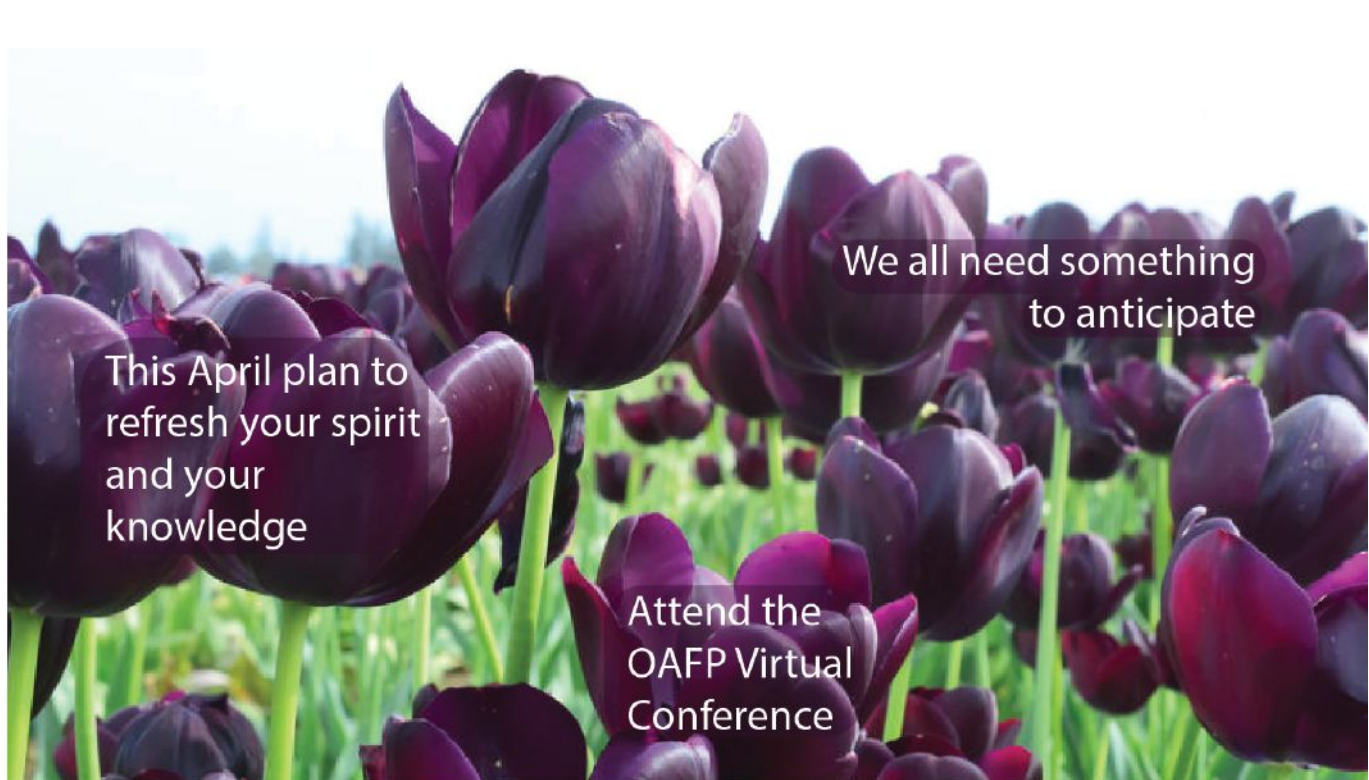
Methods: Include as appropriate any of the following: **Design:** Describe the basic design of the study or project. Use descriptors such as randomized controlled trial, cohort, case control, survey, case series, cost-effectiveness analysis, quality improvement or qualitative study. For new analyses of existing data sets (secondary data analysis), the data set should be named and the basic study design disclosed; **Setting:** Describe the study setting(s) such as general community, a primary care or family medicine practice, hospital, nursing home or other facility, etc.; **Participants:** State the important eligibility (inclusion and exclusion) criteria and key sociodemographic features of participants. Provide numbers of participants and how they were selected; **Intervention/Instrument:** Describe the essential features of any interventions or of any data collection instruments or surveys.

Results: Give the primary study outcomes, if available. Measurements that require explanation for a general medical audience should be defined. If in progress, describe the type of results you anticipate presenting, and the +.

Conclusions: Summarize the key take home point of the project or study.

Note: For brevity, parts of the abstract should be written in phrases rather than complete sentences.

Any questions? Please contact ORPRN@OHSU.edu



We all need something
to anticipate

This April plan to
refresh your spirit
and your
knowledge

Attend the
OAFP Virtual
Conference

SAVE THE DATE
April 22 - 24, 2021

Details will be posted as they are finalized at
www.oafp.org/april2021

2021 VIRTUAL CONFERENCE HIGHLIGHTS

LOTS TO LEARN...

- Renowned health care expert & author, T.R. Reid
- Synchronous & asynchronous CME offerings
- KSA Study Hall
- COVID-19/Vaccine Update
- Student & resident programming

OPPORTUNITIES TO SHINE...

- Poster session for students & residents
- Conferring of Fellows
- Installation of new board members

WAYS TO CONNECT...

- Congress of Members
- OAFP/Foundation Auction
- OAFP Policy Scholars' reception
- Virtual networking

MOST IMPORTANTLY...

- Being together safely, remotely

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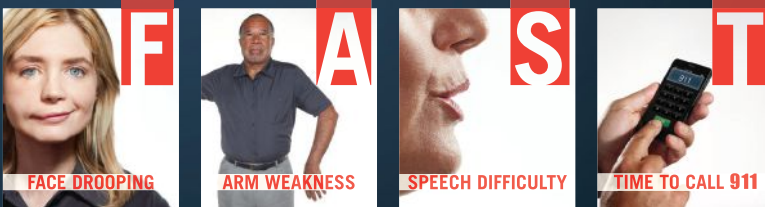
To learn more about joining Washington Permanente Medicine Group, please reach out to Donna Zulauf, Donna.E.Zulauf@kp.org Physician Recruiter, or apply at www.wpmgcareers.org

Call for Resolutions

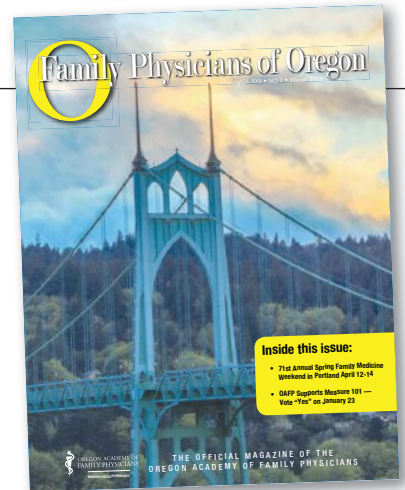
Each year at the OAFP Annual Spring Family Medicine Weekend, the Congress of Members considers resolutions advanced by our members on key policy issues impacting our members and their patients. In recent years, resolutions have covered topics including public health and safety, administrative simplification, Academy operations, and more. Those resolutions drive chapter policy and often AAFP policy.

The External Affairs Commission is available to support drafting resolutions to support productive consideration of the issues at hand. If you have an idea for a resolution, take a moment to review current policy as reflected in the OAFP Policy Handbook. A guideline to writing resolutions is also available. **Send your draft resolutions to Betsy Boyd-Flynn at bbf@oafp.org**

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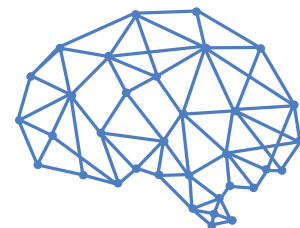


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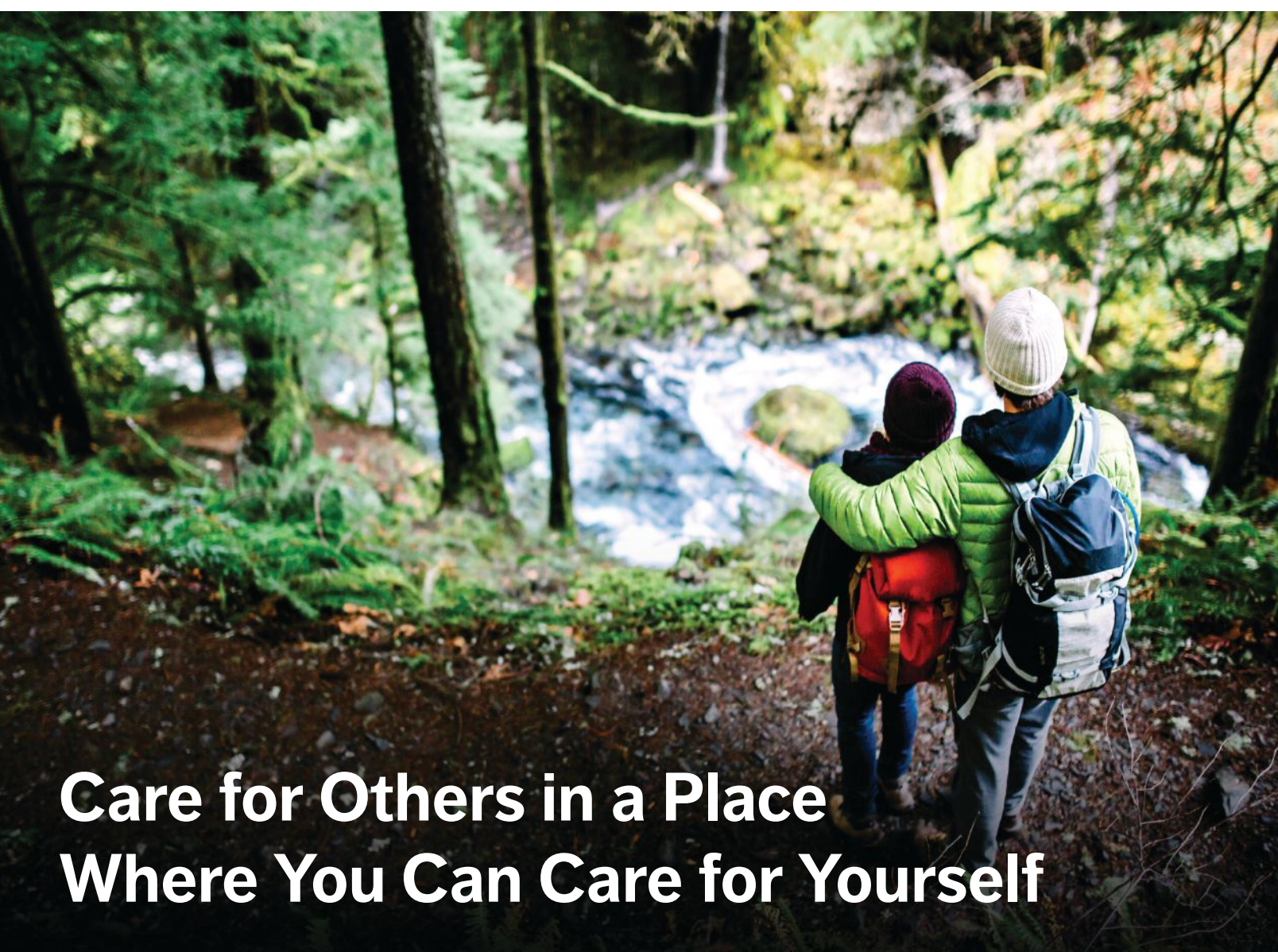
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