

# Family Physicians of Oregon

VOL • XVII • NO 3 • SPRING 2023

## Inside this Issue:

- The Duality I Live: Parenting Through Med School
- Hillsboro Family Medicine Residents are Pioneering Community-based Care
- Abuelas en Acción Comes to Annual Meeting



OREGON ACADEMY OF  
FAMILY PHYSICIANS

MAKING HEALTH PRIMARY

THE OFFICIAL MAGAZINE OF THE  
OREGON ACADEMY OF FAMILY PHYSICIANS





**CNA**



# Serving Oregon Physicians for More Than 50 Years

## **Customized Coverage for Oregon Physicians, Created by Oregon Physicians**

While other insurance carriers have come and gone, CNA has been a fixture in the Oregon marketplace, helping physicians navigate the healthcare landscape for over 50 years. Our tenured professionals average 32 years of experience, and our strong partnership with the OMA helps ensure you get the coverage you need. With local claim professionals and a comprehensive risk control program, CNA creates insurance solutions to help keep your practice running smoothly, year after year.

For more information, contact CNA's Portland office at 800-341-3684 or visit [theoma.org/cna](http://theoma.org/cna).



VOL • XVII • NO 3 • SPRING 2023

# Family Physicians of Oregon

Oregon Academy of Family Physicians  
3439 NE Sandy Blvd. #264  
Portland, OR 97232  
503.528.0961  
Web site: [www.oafp.org](http://www.oafp.org)

4	President's Message
6	Greetings from the OAFP
8	From the Hill
10	OAFP Foundation Awards
12	Public Policy and Legislative Affairs
14	Equity, Inclusion & Diversity Task Force
16	A Profile – Erin Glasrud
18	Students Speak Out!
20	Foundation News
22	Dr. Tony Germann Named OAFP Family Doctor of the Year

Family Physicians of Oregon is published quarterly by Publishing Concepts, Inc. in cooperation with the Oregon Academy of Family Physicians.

The information contained in *Family Physicians of Oregon* is for informational purposes only. The Oregon Academy of Family Physicians (OAFP) assumes no liability or responsibility for any inaccurate, delayed, or incomplete information, nor for any actions taken in reliance thereon. The information contained has been provided by the individual/organization stated. The opinions expressed in each article are the opinions of its author(s) and do not necessarily reflect the opinion of OAFP. Therefore, *Family Physicians of Oregon* carries no responsibility for the opinion expressed thereon.

Readership of this publication includes more than 1800 family physicians and their professional associates. Medical students and staff at OHSU and Western U/COMP-Northwest also receive the magazine.



**About the cover:**  
Starfish at Strawberry Hill State Park on the Oregon Coast south of Cape Perpetual between Florence and Yachats. This is one of my favorite locations on the coast for great tide pooling. In addition to amazing starfish, there is almost always a group of Harbor Seals hanging out on the rocks to watch. Photo by Alex Morley, MD, FAAFP



[pcipublishing.com](http://pcipublishing.com)  
Created by Publishing Concepts, Inc.  
David Brown, President • 1-800-561-4686 ext. 103  
[dbrown@pcipublishing.com](mailto:dbrown@pcipublishing.com)  
**For Advertising info contact**  
Jesseca Youngblood • 1-800-561-4686 ext. 115  
[jyoungblood@pcipublishing.com](mailto:jyoungblood@pcipublishing.com)



OREGON ACADEMY OF  
FAMILY PHYSICIANS

MAKING HEALTH PRIMARY

EDITION 65

## • PRESIDENT'S MESSAGE



NATHALIE J. JACQMOTTE, MD - OAFP PRESIDENT  
NORTHWEST PRIMARY CARE, SELLWOOD

# More Unity Than Division

As I contemplate my term of being your OAFP President, I realize that it has been an interesting year. It has been an honor to be here and now with all of you. It feels like a year of a journey between our extremely challenging locked-down-pandemic-time and into a new much different return-to-some-margin-of-normalcy-time. This journey will take us places I think we have not fully understood. The post pandemic reality for health care, and humans in general is still being written.

This organization is in great hands. Our OAFP team of Betsy, Louise and Kayla is amazing. They deeply care about the mission of our organization, and about the learning we need to do. They pivot quickly to what needs to be addressed. They are bright and gracious people. I want to acknowledge them because they do much of the deep work of this organization, with our help. They are the continuity and the backbone. I am so grateful they are spending their time and talent with us!

We are continuing to work on the role of equity, inclusion and diversity in our organization. We want to include all the voices in our community and in our conversations. We want leadership and membership that represents the human rainbow of family physicians in Oregon. We encourage you all to participate.

We continue to work at balancing the different voices in our group. We want respectful dialogue in our state. It is very important. So many conversations have become more polarized in the past few years. I believe that there is more that unites us as family physicians, people and patients, than divides us. I think it is important to have common ground. It is also important to return

to our policies and procedures to make sure the conversations and dialogues do not cause harm to vulnerable groups. This will continue to be a delicate balance. The pandemic has shaken confidence in our profession, relationships, and many conversations around expertise, trust and data. As individuals and organizations, we will need to continue to figure out how to have difficult conversations successfully.

One of the rewarding experiences I had this year was going to the National Congress of Delegates, as your OAFP Board President, in Washington DC. It was very impressive and exciting to see the powerful voices of family doctors from across the country, with very different opinions on many issues, coming together in a Democratic process to set policy for the AAFP. It is clear that more unites us than divides us.

I think of the OAFP as my team, taking care of the people of Oregon in the best way we can, in all our varied settings. I appreciate all your work in all your different roles taking care of the beautiful human rainbow of people in our state.

Sincerely,

A handwritten signature in black ink, appearing to read 'Nathalie J. Jacqmotte'.

Nathalie J. Jacqmotte, MD

# JOIN THE VALLEY FAMILY!

## Now hiring PRIMARY CARE PHYSICIANS for clinics throughout South King County

Valley Medical Center is an acute care hospital and clinic network committed to providing safe, quality, compassionate care since 1947, and is a component entity of UW Medicine.

### About Valley

- Oldest and largest public district hospital in Washington state
- Serves 600,000+ residents in one of the nation's most culturally diverse communities
- Thriving medical center and the largest nonprofit healthcare provider between Seattle and Tacoma
- Dedicated to our mission of "Caring for our community like family," including our "work family"
- Safety is our core value, with respect, compassion, collaboration, equity, diversity, inclusion, innovation, wellness and excellence as some of our most important priorities

### Valley Medical Center Clinic Network

- Primary care clinics in Covington, Kent, Maple Valley, Newcastle and Renton serve as a medical home for care management
- Urgent care clinics provide a safety net of after-hours care, including telehealth and walk-in consult
- 50+ specialty clinics provide access throughout the district

### Qualifications

- BE/BC in family medicine/internal medicine
- Ability to obtain:
  - Medical professional license in Washington state
  - DEA with full prescriptive authority

### Benefits of working at Valley

- Competitive salary, generous vacation and sick leave, relocation assistance, public student loan forgiveness program participation, and valuable healthy living benefits—learn more at [valleymed.org/careers/benefits](http://valleymed.org/careers/benefits)
- Endless opportunities to learn and grow, including leadership positions
- Form long-term relationships with patients and the community
- Benefit from colleague collaboration, ranging from new grads to seasoned professionals
- Full support staff and manageable patient panels with ancillary support, including RN Care Management
- High income potential (base salary guaranteed for the first two years while you build your practice)
- CME—time and a stipend

### Our distinguished recognitions include:

- Patient-Centered Medical Home by the **National Committee for Quality Assurance (NCQA)**
- **American Medical Association's 2022 Joy in Medicine Health System Recognition Program** for our efforts to improve physician well-being and combat burnout
- **The Joint Commission's** award of full accreditation triennially for meeting and exceeding national and safety performance standards



"I truly think that every single person on the care team and administration bring value to the team and really are working together to make sure that we deliver care the best that we can to our patients in our community."

**Dr. Shannon Markegard, DO**



### CONTACT:

**Mindy Schneider**

Provider Recruiter

[mindy\\_schneider@valleymed.org](mailto:mindy_schneider@valleymed.org)



**UW Medicine**

VALLEY  
MEDICAL CENTER



To learn more about provider careers at Valley, visit [valleymed.org/job-openings](http://valleymed.org/job-openings).



# • GREETINGS FROM THE OAFP



BETSY BOYD-FLYNN, OAFP - EXECUTIVE DIRECTOR

## Space to Learn

In our last issue, we published a letter from two members, **Drs. Steven Wahls and William Toffler**, that responded to an article about gender-affirming care from the previous issue. I want to be clear that the responsibility for publishing that letter was mine. My intention was to provide space for a different viewpoint from among our members, in the spirit of valuing the Academy as a place where professional standards and norms are hashed out. However, my motivation for that decision is less important than the impact it had.

In the days and weeks after the magazine hit mailboxes, several members let me know that reading the letter in an OAFP publication had been deeply hurtful to them. As the letter was presented, several individuals questioned whether OAFP's policies and values had changed in a fundamental way.

It was humbling to realize that I had handled a critical issue wrong. I remain deeply grateful for the feedback so many offered. I exchanged emails with some, had phone conversations with others, and tried to focus on listening and responding thoroughly rather than hastily.

To be clear, **OAFP members voted in 2020 to support access to gender-affirming care, and to protect the professionals who provide it.** Policies on this and a host of other issues related to health care and health policy are set by the OAFP members who attend the Congress of Members each year. Any member can submit a resolution for consideration by the Congress, submit testimony on the resolutions before the Congress, attend and participate in the Congress. Our policy handbook is accessible through our website.

In late February, the Executive Committee met and discussed potential responses to the members who had shared their concerns and approved a multi-part plan. The first step was an email in March alerting readers to this issue. This column is the next step, and we have used email again

to draw readers' attention to this column. We are continuing to find opportunities to provide evidence-based education for our members on the topic of gender-affirming care within this magazine, at our annual conference, and through collaboration with other organizations across the state. **This year we are actively supporting legislation that protects the clinicians who provide that care, and the individuals who seek it.** Finally, we are making some process changes to the magazine itself.

Here's what will be different:

- Physicians will review every article or contribution on clinical topics.
- Whenever we run opinion content, whether a letter or an op-ed, we will note any existing pertinent OAFP policy.
- In the future, if we publish a letter to the editor, we will offer authors of the original piece, or members profiled, an opportunity to respond in the same issue.

It is easy to bemoan how polarized our country has become, and difficult to avoid news coverage of a growing ideological divide that is reflected in part within the practice of Family Medicine. As I write this in mid-March, legislatures in at least 22 states have proposed dozens of laws that would restrict or ban outright gender-affirming care for minors and, in some states, for adults. This is a topic that will continue to deserve coverage in our magazine. We almost certainly will not get it right all of the time but learning means making mistakes. Thank you for giving us space to learn.

Thanks for your time.

A handwritten signature in black ink that reads "Betsy".

# The Core Content Review of Family Medicine

## *Why Choose Core Content Review?*

- Online and Print Editions Available
- Cost Effective CME with No Travel
- Stay Medically Relevant - Make sure you are ready for the new FMCLA (Family Medicine Certification Longitudinal Assessment) Exam alternative
- 98% Board Exam Pass Rate - Pass or get your Money Back
- For Family Physicians by Family Physicians
- Core is produced by the CT Academy of Family Physicians



**The Core  
Content Review  
of Family Medicine**

*North America's most widely  
recognized program for:*

- Family Medicine CME
- ABFM Board Preparation

*Ordering is Easy*

- Visit [www.CoreContent.com](http://www.CoreContent.com)
- Call 888-343-CORE (2673)



**Follow us on Facebook:**

**Core Content Review of Family Medicine**



AMBER HOLLINGSWORTH

OHSU SCHOOL OF MEDICINE – DEPT. OF FAMILY MEDICINE, COMMUNICATIONS PROGRAM SUPERVISOR

## Hillsboro Family Medicine Residents are Pioneering Community-based Care

The OHSU Family Medicine Residency Program at Hillsboro Medical Center welcomed its first class in 2021 and became fully accredited last fall. See how the program's unique community connection is changing health care in Oregon.

Nearly two years in, Program Director **Kay Nordling, MD, FAAFP** and Hillsboro's first sixteen family medicine residents have made big strides in developing a program with the community at its core. Twenty miles from downtown Portland, HMC has a unique patient panel, with people from agricultural and rural areas and significant Spanish-speaking and Pacific Islander/Native Hawaiian populations. From the beginning, the program has worked side-by-side with community members to design needs-based, impactful rotations and didactics.

"This program has the academic backing of OHSU, but is far enough removed to have that community feel. That's been the most rewarding part for me," says one of Hillsboro's first two Chief Residents, **Esteban Garza, MD**. "We're out there in the community listening and forming relationships." In turn, people are coming into the clinic and bringing their family members, because they know the providers and know someone there speaks their language.

Dr. Garza leads health education sessions in Spanish in partnership with Adelante Mujeres, a nonprofit providing holistic education and empowerment opportunities to low-income Latinas and their families. Residents are doing this kind of work outside of their

required training because they believe in its power to transform primary care.

"In recruiting our first couple classes, we really emphasized the opportunity to be a pioneer," Dr. Nordling says. "These residents helped launch the program, and they're seeing their ideas and successes play out in the community."

For example, during orientation, residents go to community partners like Federally Qualified Health Centers, food banks, the center for aging, and learn more about community resources for their patients. The residents then come back and present what they've learned to the rest of their class.

Residents also spend a week during the summer with the ¡Salud! Program, which provides preventive health care and support navigating health care systems to seasonal and full-time vineyard workers in the Willamette Valley.

By forging these connections, HMC is expanding support networks for patients. "As providers, we don't have to reinvent the wheel – we can connect patients with existing programs and resources right in their neighborhoods," Dr. Garza says.

The residency program has made impressive progress



so far, and is uniquely situated to address the area's changing needs. Hillsboro is growing – the largest housing community in Oregon's history is being built right across from the South Hillsboro clinic.

"HMC is the only hospital in the Portland area that has seen an increase in births recently. This is great news for our new program as we build our OB training for our residents," says Dr. Nordling. "This program is all about being responsive to what the community needs."

Chief Resident **Alexandra (Ally) Bray, MD** explains it's not just about the community outside HMC's walls that makes the program so special: "The people are by far the most rewarding part of this experience. I look forward to coming to work because I know that no matter what happens, I'll be alongside kind, hardworking, and ambitious people. Faculty, clinic and hospital staff, co-residents, consultants, and patients alike. I feel so lucky to be surrounded by such wonderful people."



*Residents deliver a talk on 'Medicina Preventiva' at Adelante Mujeres.*



*Residents table at the Ka Aha Lahui o Olekona Hawaiian Civic Club Unity Expo.*



*Putting their best foot forward at a didactic on the art of the foot exam.*

# 2023 OAFP Foundation Awards

## The McCarthy Award

In honor of **Dr. Eva McCarthy's** leadership and dedication to full-scope osteopathic family medicine in Oregon, and service to the Oregon Academy of Family Physicians, the Academy Foundation established the McCarthy Award, a scholarship awarded to a DO student who has matched to a family medicine residency. We are proud to announce this year's McCarthy Award winners.



**Lillie Blair**  
OMS-IV

Western University of Health Sciences College of Osteopathic Medicine of the Pacific Northwest

Matched into Family Medicine at Providence St. Peter Hospital (Olympia, WA)

### **Why have you chosen to pursue a specialty in family medicine?**

I was drawn to family medicine because of the broad patient population along with the relationship centered focus of care. During my preclinical years I grew a passion for women's health and thought briefly of going into OB/GYN but was quick to change my mind after my

phenomenal family medicine rotation. I was able to see infants to elderly with a wide variety of pathologies and was able to perform a lot of in-office procedures for which patients were very grateful. I also found I could still incorporate my passion for women's health while being able to focus on other areas of medicine that I love, treating patients from a more holistic perspective.



**Alisha Harrington, MAOM, LAC**  
OMS-IV

Western University of Health Sciences College of Osteopathic Medicine of the Pacific Northwest

Matched into Family Medicine at Samaritan FMRP (Corvallis)

### **Describe a personal experience that changed your life and how you believe this experience will affect your role as a family medicine physician.**

The first time I traveled abroad was after I graduated with my Masters' degree in acupuncture. I went to Nanjing, China, for an internship in the Chinese hospital system to see how they integrate

eastern and western medicine. Over six weeks, I learned about more than integrated health systems and patient care. Eager to take in the culture and sights, I rented a bike and took a different route to the hospital daily. I spent lunchtime exploring new cuisine and learning about the colorful lives of the various healthcare providers with whom I worked. Learning about new people and their unique way of life broadened my horizons and instilled a new sense of curiosity and cultural awareness.

As my travels throughout Asia continued, my perspective widened further. Seeing so many distinct expressions of culture, food, architecture, landscapes, and mannerisms reminded me that being open to something new and unexpected often leads to more enriching possibilities. Our experiences and relationships mold us. Collectively, over generations, the patterns of those relationships become our culture. It is vital to acknowledge that each patient we work with is unique, shaped by experiences that have been different from ours. To best serve the needs of our patients, we need to recognize and honor their culture, heritage, and perspective. As a family medicine physician, I will continue to utilize an open and curious mindset to employ patient-centered care and grow as a provider.



## The Lundy Award

The Mary Gonzales Lundy Award is a scholarship award named in honor of Mary Gonzales Lundy, former Executive Director of the OAFP and dedicated supporter of the specialty of family medicine. It is with great honor that we announce this year's Lundy Award Winners.



**Erin Glasrud**

MS-4

Oregon Health & Science University  
School of Medicine

Matched into Family Medicine at UC  
Davis FMRP

### **Please describe which of your accomplishments is the most meaningful to you and why.**

The accomplishment that is most meaningful to me is my medical school scholarly project, for which I wrote an evidence-based curriculum on transgender healthcare and social issues, presented it to first- and second-year medical students at OHSU, and collected data on the extent to which this benefited students' understanding of the topics covered. Transgender health is not taught extensively, if at all, in medical school curricula, and lack of provider education is known to contribute to the poor experiences that many trans patients have when accessing healthcare. As a transgender person, I was highly aware of this when entering medical school,

and had initially planned for this to be a passion project that I completed on my own time; however, when it was time for me to choose a topic for my graduate thesis I realized that by formalizing my project I could potentially have a greater impact than I would otherwise. My goal for this project was to increase preclinical medical students' exposure to transgender healthcare and information about the social issues faced by trans people, with the intention of preparing them to work with transgender people during their clinical years. The presentation was very well received by students, who reported what I ultimately determined to be a statistically significant positive increase in their understanding of the material covered. Additionally, students felt that my talk did more to prepare them to work with trans patients than any other class they had taken thus far in medical school, and many students reported that the talk piqued their interest in learning more about gender-affirming care. It is my hope that including more education on transgender care and trans issues earlier in medical education will lead to improvements in the quality of care provided to this population in the future, and this project was my first step towards making this vision a reality.



**Alexandra Levin, MPH**

MS-4

Oregon Health & Science University  
School of Medicine

Matched into Family Medicine at  
OHSU Cascades East FMRP (Klamath  
Falls)

### **What do you see as an essential quality of yours that you will incorporate into your family medicine practice?**

Stories have been a significant part of my life since my ears could hear. My parents read to me from a very young age. When there were no books around, they would make stories up about people passing by or animals we observed. Once I had enough vocabulary, I was the one writing the stories over my morning Cheerios.

When I wasn't creating stories, I was gulping them down. I've loved reading since age four. I am always in the middle of too many books and there are stacks around my house that reflect this predicament. My interest in archaeology was born out of my desire to know the entirety of the human story. Holding fossilized hominid bones and ancient arrowheads was thrilling to me because they represented little chapters in the lives of long-dead beings.

One of my many motivations for pursuing family medicine is that stories are at the center of longitudinal care. Personal tales of love, heartbreak, pain, and success are part of the fabric of family medicine. I care about these aspects of my patients' lives as much as I care about their cholesterol levels. Sometimes I care about those things more because I see how much they matter to an individual's health.

I make space in every patient visit for a little storytelling. Even if it's a same day visit with someone I won't see again, there is always something to learn about the person sitting in front of me on the exam table. It's a challenge with 15-minute appointments and sometimes it gets me into trouble. But it is invariably worth it.



# • PUBLIC POLICY AND LEGISLATIVE AFFAIRS



IRIS MARIA CHÁVEZ  
EQUITY ACTION PARTNERS - OAFP LOBBYIST

*Shakespeare said it, Julius Caesar suffered it, and the Oregon Legislature is about to reenact it – Beware of The Ides of March*

Some bills will be placed in cold storage, perhaps to be retrieved and thawed in the waning days of the session. These are the bills mysteriously moved from one committee to another before the midnight hour strikes. Some are controversial bills, potential trading pieces for end-of-session negotiation. Others are reserve stock to serve as last-minute replacements for important bills that somehow fall off the tracks. These can end up on the storage shelves of the Rules, Ways & Means, or Finance & Revenue committees, which will remain operational long after other policy committees have closed up shop. A bill's resurrection can happen when the public and even legislators least expect it. In this case, the soothsayer may wish to warn us all to 'Beware the Ides of June.'

## What does this mean for the OAFP's priority bills?

**Senate Bill 490 (SB490)** funds OAFP's Oregon Residence Collaborative Alliance for Family Medicine (ORCA-FM) which provides a variety of supportive services and programs for Oregon's family medicine residency sites. ORCA-FM is modeled after successful networks in other states, and has been in operation since 2019. National organizations that shape the next generation of family physicians recognize the value of networks for helping retain and better support the physicians we need, now and in the future.

As of the writing of this column, this bill, sponsored by Senator Deb Patterson and co-sponsored by Senators Lisa Reynolds and Sara Gelser Blouin was voted out of committee on a party-line. We await next steps, ie. fiscal impacts and a vote by Ways and Means.

Although our **House Bill 3444** is not moving forward this session. We remain committed to the bill in the future which calls for the creation the Office of Health Care Affordability. Oregon has made strides in efforts to increase transparency into health care costs and spending, but that transparency has not led to a simplified or more affordable system; instead we still spend too much money on administration in all parts of the system. The Office of Affordability would be a new agency, empowered to determine how best to invest in primary care and behavioral health, cost and quality control, and workforce investment, and to better understand and regulate the entire system.

We continue to track the following bills:

**👍 HB 2538** requires health insurance coverage of health care interpretation services that are legally mandated. Support for this bill will help our members provide service to their patients.

**👍 HB 2574** requires and funds emergency departments to dispense post-exposure prophylaxis treatment (PEP access) for patients who present to emergency departments seeking this medication

**👍 HB 2002** is the Reproductive and Gender-Affirming Care legislative package. Multiple provisions include tightening privacy protections for clinicians who provide abortion and gender-affirming care, and preventing interference with health care centers; provisions for expanding access to care; affirms that gender-affirming care is a covered benefit in Oregon; protects individuals from criminal risk associated with any pregnancy outcome.

**👍 SB 56 and HB 2791** change Corporate Activities Tax eligibility so that expenses related to caring for patients insured by Medicaid or Medicare are exempt from the tax.



## Join us in building the healthiest community!

Integrated Primary Care Model, Family Medicine Residency Program,  
Medication Assisted Treatment Clinic, Care for an Underserved  
Population, Leadership Opportunities

Visit us online to apply!

[www.sp-mc.org](http://www.sp-mc.org) | 360-346-2222

👍 **HB 2486** allows certain pharmacy technicians to administer vaccines; **HB 2278** allows pharmacists to give vaccines to children 6 months and up.

👍 **SB 1089** creates the public corporation/governing board to do the next two years of planning for a state-based universal (single-payer) health pan. Provides for paid staffing for the work. This bill furthers the work of the Joint Task Force on Universal Health Care.

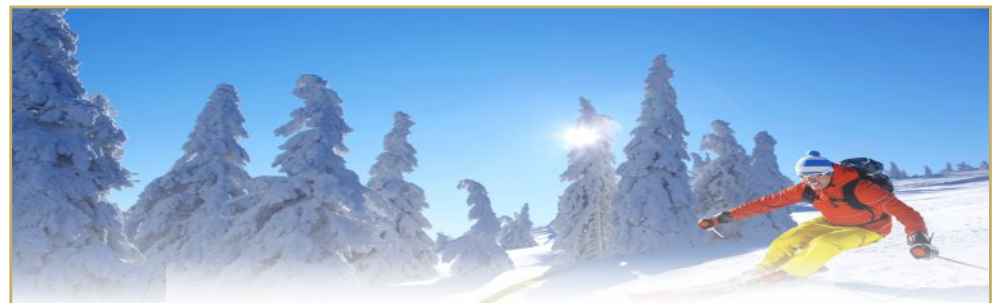
As I write this article, we have yet to take a position on the following bills:

**HB 2584** removes requirement that collaboration agreements between physicians and physician assistants include a performance assessment.

Other PA scope legislation include: **HB3 412** which allows PAs to authorize disability benefits; **SB 927** "specifies physician assistant scope of practice and duties of care when practicing medicine;" and **HB 2583** which changes term to "physician associate."

**SB 849** creates "Internationally Educated Workforce Reentry Grant Program." An amendment is proposed that specifies licensure for people who have passed steps 1 and 2 of USMLE. (-1 amendment already exists).

There is an adage that nobody in the state is safe until the legislature adjourns. Vigilance is mandatory. The impending death of hundreds of bills does not mean the end of the excitement. It simply narrows the playing field and gives greater clarity to the remaining battles.



Yampa Valley  
MEDICAL ASSOCIATES, P.C.

## Family Medicine

**Come join Yampa Valley Medical Associates, a multispecialty primary care practice in beautiful Steamboat Springs, Colorado!**

**YVMA** provides inpatient and outpatient care for newborns, children, adults and local skilled nursing facilities. Our clinic offers on-site ultrasound, point-of-care lab testing, an integrated behavioral health provider, a clinical pharmacist, and a diabetes care manager. We are part of the Primary Care First advance payment model and the UCHHealth Clinically Integrated Network. A wonderful medical home close to world-class skiing, mountain biking, hiking, and more!

[www.yvma.com](http://www.yvma.com)

[jobs@yvma.com](mailto:jobs@yvma.com)



EVA S. MCCARTHY, DO, OAFP VICE PRESIDENT  
SAMARITAN HEALTH SERVICES FMRP - FACULTY

## Abuelas en Acción Comes to Annual Meeting

Recently our task force was asked to choose a podcast for our annual meeting that addresses equity, inclusion and diversity. After listening to several, we chose the March 28, 2022 episode of *Abuelas en Acción: A Multicultural Podcast for Our Common Good* titled "Racism and Systemic Inequities of Climate Change."

The podcast addresses the intersectionality of climate change, health, and immigration. After listening, the one will truly understand the term "redlining" and consider how these real estate practices impact the health of residents in these neighborhoods even today. It will also enable one to identify two actions they can take as individuals to mitigate negative climate change impacts on patients and communities.

*Abuelas en Acción (Grandmothers in Action) are Latinx mothers and grandmothers, Climate Comadres, who strive for a more compassionate and equitable world. Their conversations cross generations with guests, leaders in our communities, who have a passion for justice. Their stories and work all started with a vision and will infuse you with hope for your own communities.*

Consuelo Saragoza, our facilitator for this important session, joins us from *Abuelas en Acción*, where she is a regular host of the popular podcast. She received her Masters of Public Administration from Baruch College of the City of New York where she was a National Urban Fellow. She is a Management Executive for the Latino Network and was the Senior Vice President of Operations and

Development at the National Crittenton Foundation prior to retiring to spend more time with her own *nietos*. She also served for over 24 years as a Senior Advisor of Public Health and Community Initiatives for Multnomah County.

Other episodes include: Decolonizing Music: Confronting Racial Trauma in the Music Classroom; Oregon's Journey to Climate Justice for Oregon's BIPOC; Racial Capitalism: Slow Violence Toward Undocumented and Indigenous Families; Inner Peace in A World of Turbulence, among many others.

### Coming in June

Our next Equity Book Club meeting will take place virtually on Tuesday, June 6 at 6:00 pm. We will be discussing the book *The Sum of Us* by Heather McGhee. This book, a *New York Times* Bestseller, takes on a journey from Maine to Mississippi to California as the author takes a look at the cost of racism. From redlining to the filling in of public swimming pools to the disintegration of voting rights in this country, McGhee not only paints a vibrant picture, but discusses the benefits of working together for a future that is more than a zero-sum game. Ibram X. Kendi says "This is the book I've been waiting for."

Please email Louise Merrigan at [louisem@oafp.org](mailto:louisem@oafp.org) if you are interested in being part of the discussion.





# Incorporating Lifestyle Medicine Into Everyday Practice

## Free Lifestyle Medicine Resources for Physicians



Read *The Journal of Family Practice's* **A Family Physician's Introduction to Lifestyle Medicine** supplement.



Use the American Academy of Family Physicians' **Lifestyle Medicine Toolkit**.



Prescribe free **plant slanted nutrition programs** available online on demand.

Access these and more resources at:  
[ardmoreinstituteofhealth.org/resources](http://ardmoreinstituteofhealth.org/resources)



## 70th Summer Family Medicine Review June 19-23, 2023

YMCA of the Rockies | Estes Park, Colorado

**Information & Registration**  
visit: [medschool.cuanschutz.edu/education/cme - Events](http://medschool.cuanschutz.edu/education/cme - Events)

### Offerings for 2023!

- » 20 Lectures and 20 Workshops
- » Group KSA on Diabetes
- » Needs derived topics including:
  - Provider Wellness*
  - Kidney Disease Management*
  - Women's Health*
  - Wound Care Management*
  - Diagnosis and Management of Hypertension*
  - Long-term COVID Complications*
  - Psychiatric Care/Suicide Prevention*
  - Caring for Patients with Parkinson's Disease*
  - Updates in Primary Care Pediatrics*
  - Management of Patients with Substance Use Disorders*
  - Updates in Transgender Care*
  - COPD Management*
  - Dementia Caregiver Resources*
  - Travel Medicine*



School of  
Medicine

UNIVERSITY OF COLORADO  
ANSCHUTZ MEDICAL CAMPUS

# A PROFILE – ERIN GLASRUD



BETSY BOYD-FLYNN, MA, CAE  
OAFP – EXECUTIVE DIRECTOR

## Looking Forward to What Comes Next

**Erin Glasrud, MS4, OHSU,** recently matched to the family medicine residency training program at University of California Davis.

### What made you decide you wanted to be a family physician?

When I was studying at the University of Oregon, before I had decided to pursue a career in medicine, I took some time to volunteer at a free medical clinic, Occupy Medical, serving unhoused and uninsured people. While I was shadowing one of the physicians, I had the thought: “If I can have the

impact on people’s lives that these doctors have, medicine might be for me.” I ended up becoming a pre-med, and volunteering there for the next three years.

Getting to family medicine was a little more complicated. I first became interested in primary care while working as a medical scribe at White Bird clinic in Eugene the year after graduating from college, where I realized that PCPs are in a unique position to provide holistic medical care, help address patients’ immediate health needs, and connect

people with non-medical services, like housing, that help improve health outcomes. I was also introduced to addiction medicine and gender-affirming care, two of my current clinical passions, during my time there. Soon after, I moved to Portland and worked at a Central City Concern treatment center alongside a family physician who was trained in addiction medicine, helping to care for patients with substance use disorders. It was these experiences that led me to realize that family medicine was the right choice for me.

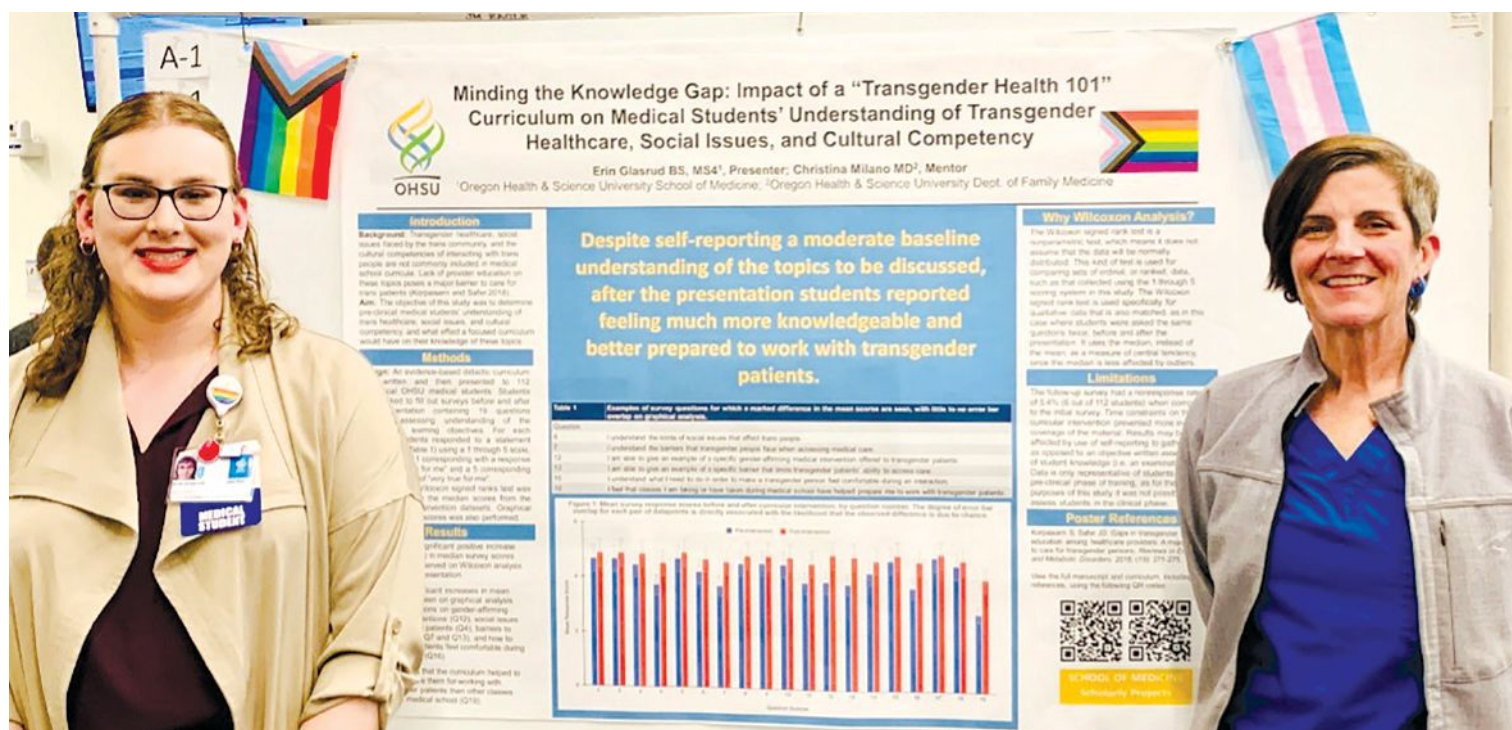


Photo: Erin (left) and her mentor, **Dr. Christina Milano** of the OHSU Department of Family Medicine



## How did (or didn't) your focus change in medical school?

Everyone says that whatever you think you're going to do when you start medical school is not what you will end up going into, but that was not true for me. OHSU's flexible training allowed me to structure my education into a "pre-family medicine" experience, and this helped to solidify my commitment to the specialty. I was able to work with my populations of interest, doing rural rotations in Klamath Falls and Coquille, and also rotating in addiction medicine, tribal health, and at OHSU's FQHC Richmond Clinic in East Portland.

At OHSU, I was also empowered to pursue research focused on gender-affirming care and transgender advocacy. Early on, as a member of the Queer Health Alliance student interest group, I was in charge of organizing lunchtime talks focused on LGBTQ+ health, and I had the idea to write a talk for medical students on providing care to transgender people, informed by my own lived experience as a trans woman. When we were told that we could do educational research for our required scholarly project, I decided I was going to make this passion project I was doing on my own time into my graduate thesis project. For my primary intervention, I wrote a multidisciplinary curriculum informed by medicine, psychology, sociology, and even philosophy, as well as my own personal experiences, and assessed the impact of this curriculum on preclinical medical students' understanding of transgender healthcare, trans-specific cultural competency, and transgender social issues. I found that students reported a much greater understanding of these topics and felt much more prepared to work with trans patients after my talk. In my opinion, part of advocating for the trans community is ensuring that the people who care for these patients understand the nuances of working with them, while also recognizing that, for the most part, they are like any

other patients. I believe that there is nobody better to advocate for them than someone, like me, who has experienced firsthand the discrimination, harassment, and other negatives that come with the process of transition, but also knows how positive transitioning can be for one's quality of life.

I look forward to returning to Oregon after my training, where I hope to open

a free primary care clinic, as well as an addiction treatment center offering medical detox services. Even though I was born and raised in California, I have lived in Oregon long enough that I think of myself as an Oregonian, and because of this I want to help combat health disparities and improve access to care for underserved patients here.

# Discover Work-Life Balance in the Columbia River Gorge

Located 85 miles east of Portland, but a world away, The Dalles is a scenic and friendly small town located on the shores of the historic Columbia River. We have year-round access to outdoor recreation, affordable housing, award-winning wineries, great food and local arts. Come live, work and play here.

## Immediate openings for: Internal Medicine, Pediatrics & Family Medicine

Apply online or learn more by contacting:

**Audra Schmidt**, Physician Recruitment  
audras@mcmc.net | 541.296.7510



Laura Ann Flath, MD  
Internal Medicine



[mcmc.net/careers](http://mcmc.net/careers) | Primary Care | 20+ Specialties | Person-Centered Care

Mid-Columbia Medical Center is a nonprofit health care system with a 49-bed hospital, 24/7 emergency care, immediate care center, cancer care, breast center, cardiovascular services, surgery, physical therapy, behavioral health, and more.



# STUDENTS SPEAK OUT!



STEPHANIE ALDEN, MS2  
OAFP OHSU STUDENT DIRECTOR

Oregon Health & Science University



This March, some of my fellow OHSU Family Medicine Interest Group Members and I participated in OAFP's Lobby Day. We had the opportunity to hear from subject experts on important health care bills being heard this session and from lobbyists on advocacy strategy. OAFP's priority bills this session include House Bill 3444, to establish an office of health care affordability, and Senate Bill 490 to support the Oregon Collaborative Residency Alliance for Family Medicine (ORCA-FM). The goal of ORCA-FM is to connect and support family medicine residency programs in the state.

This is top of mind for medical students, because while the capitol is deep in the midst of public hearings and work sessions, at OHSU, spring is when we look forward to graduation, and more importantly, matriculation into residencies. ORCA-FM already works to support graduate medical education and help Oregon residencies continue attracting great students – and advocates – who will ultimately improve the health of our communities. On behalf of ORCA-FM, OAFP is advocating for SB 490, which, if passed, will help ensure the ongoing financial viability of the program.

Through the OAFP Lobby Day we were able to attend scheduled meetings with the senators and representatives of our districts. Collectively, participants spoke to several legislators who hold key positions on the committees that will dictate the future of these bills. Though the attentions of these elected officials are stretched in many directions, they were quick to recognize the importance of health care professional training in the state. Students and residents were able to share our experiences and advocate for our education in the state of Oregon!

Since attending Lobby Day with the OAFP, our fourth-year students weathered Match Day. This year OHSU will send thirty students into the family medicine field, half of whom are staying in the state of Oregon. As someone who hopes to be in that position two years from now, I am proud of these students who I may one day learn from as an intern. I hope that the advocacy we participated in through the OAFP will improve their experiences and help them become the great physicians and leaders the state of Oregon needs.



OHSU students, family medicine residents, and faculty at OAFP Lobby Day.

## STUDENTS SPEAK OUT!



WESTERN UNIVERSITY OF HEALTH SCIENCES COMP - NORTHWEST



FORREST BLISS, OMS-3  
OAFP BOARD STUDENT DIRECTOR

# The Duality I Live: Parenting Through Med School

Anyone who has been through medical education can appreciate that the experience is extremely humbling. Most medical students spend 60-plus hours per week studying during their pre-clinical years only to get obliterated by practice questions while studying for the first round of board exams. The reward for passing those exams? Two years of clinical rotations in which students can put their knowledge to the test and realize how much they have yet to learn about practical medicine. It's a grueling path, and one that in my experience is only tolerable with radical acceptance of our own limitations and an appreciation of the big picture.

I want to take a moment to discuss my experience as a parent in medical school, for raising children is the only experience in my life so far that has matched medical school both in rigor and potential for growth. I had two young daughters when I started medical school in 2020, and my family has since grown to include five beautiful children, as we have welcomed my nephew and opened our home to foster care. I bring this up partially to open a window into my personal experience but moreover with the hope of teasing out some important parallels on the lessons of humility, privilege, and growth.

Many of my peers think that I am audacious for entering medical school with a family; choosing to add three additional children while in training is

downright incomprehensible to most of them. My children, for their part, have mixed views on the demands of my education. My 7-year-old has already eliminated medicine from her future career options, stating that she "just wants to be free", while one of my 9-year-olds has already planned out her future as a family doctor like her dad (though, "probably I will have kids after I finish school", she says).

My days and weeks oscillate between the patient encounters and practice questions of school and playing with my kids, reading to them at bedtime, and putting the house back together after they are asleep. Sometimes the delineation isn't so clear, as when I wake up to feed the baby in the middle of the night and sneak in a few flashcards while he drinks his bottle. Between these two worlds, I find I seldom have a moment to myself, but lately I have been appreciating the value of silence and taking time to recognize the immense pleasure and reward of my current existence.

In both worlds, I have the honor of being trusted to care for other humans. In both worlds, I am wrong dozens of times every week, each instance representing another chance to improve and grow. In both worlds, my success depends on absolute focus on the situation at hand. I recognize that I have painted a picture in which I am taking full advantage of these opportunities for self-improvement, which

is certainly not the case. I have moments of frustration, impatience, and exhaustion; I have hard days, sometimes even hard months. When I take a step back from my studies or parenting, as I am doing now, I can let go of the everyday trials and appreciate that they are nothing more or less than the cost of self-improvement and a meaningful life.

**TARGETED  
ADVERTISING**  
FOR THE  
MEDICAL  
**PROFESSIONAL**

**CONTACT**  
**JESSECA  
YOUNGBLOOD**  
jyoungblood  
@pcipublishing.com  
1-800-561-4686  
ext 115

# • FOUNDATION NEWS



GINA A. MILLER, MD  
OAFP/FOUNDATION PRESIDENT  
SAMARITAN FAMILY MEDICINE RESIDENCY CLINIC – LEBANON



## 2023 Pathways to Family Medicine Annual Auction

On Friday, April 14, close to 100 family medicine physicians, residents, students, spouses, partners and colleagues met at Salishan Coastal Resort in Gleneden Beach for the Foundation's annual auction.

I am happy to say that we raised well over \$35,000 from a variety of sources: paddle raises, live and silent auctions, 50/50 raffle and donated mileage and honorarium from conference speakers and attendees.

Please join me in thanking the following individuals and businesses.

### BUSINESSES

Amaterra Wines (*SW Portland*)  
Artistic Bliss Portraits (*Cornelius*)  
betsy + iya (*NW Portland*)  
Brasada Ranch (*Powell Butte*)  
Chinook Winds Confederated Tribes of Siletz Indians  
(*Lincoln City*)  
Dave's Killer Bread (*Milwaukie*)  
Enchanted Forest (*Turner*)  
Eugene Ballet (*Eugene*)  
Eugene Emeralds Baseball (*Eugene*)  
Freeland Spirits (*NW Portland*)  
Frida's Whimsy (*NE Portland*)  
Gado Gado (*NE Portland*)  
Gigantic Brewing Company (*SE Portland*)  
The Glass Forge Gallery & Studio (*Grants Pass*)  
Harry & David (*Medford*)  
Hazella Bake Shop (*Lebanon*)  
High Desert Museum (*Bend*)  
Jacobsen Salt Company (*SE Portland*)  
Lincoln City Glass Center (*Lincoln City*)  
McMenamins (*N Portland*)

Mind Levers (*Portland*)  
Multnomah Village French Quarter (*SW Portland*)  
Museum of Natural and Cultural History (*Eugene*)  
Ninkasi Brewing (*Eugene*)  
Northwest Children's Theater & School (*SW Portland*)  
Oaks Park Association (*SE Portland*)  
Off the Waffle (*Eugene*)  
OHSU Dept. of Family Medicine (*SW Portland*)  
Oregon Dairy & Nutrition Council (*SW Portland*)  
Oregon Jamboree Music Festival (*Sweet Home*)  
Oregon Shakespeare Festival (*Ashland*)  
Oregon State Athletics (*Corvallis*)  
Pie Five Pizza (*Corvallis*)  
Portland Center Stage at the Armory (*NW Portland*)  
Portland Japanese Garden (*SW Portland*)  
Pumpkin Ridge Zip Tour (*North Plains*)  
Rogue Creamery (*Central Point*)  
TopGolf (*Hillsboro*)  
Wanderlust Tours (*Bend*)  
Wildlife Safari (*Winston*)  
Willamette Valley Vineyards (*Turner*)



## INDIVIDUALS

**David J. Abdun-Nur, MD &**  
Katherine Abdun-Nur

**Ashkan Abedini, MD, MPH**

**Patricia P. Ahlen, MD**

**Yumi Aikawa, DO, MPH**

Lisa Allard

**Gabe Andeen, MD, MPH**

Zoe AnDyke

**Amanda N. Aninwene, MD**

**William Balsom, MD**

**Heidi Beery, MD & Scott Beery**

Sally Beggs

**MaryLou Belozer, MD**

Betsy Boyd-Flynn

**Darin Brink, MD, FAAFP**

**Brenda Brischetto, MD**

Deb Brown

**Jessica Burness, MD**

**Ruth Chang, MD, MPH, FAAFP**

**Mimi Choate, MD**

Bob Dannenhoffer, MD

**Stewart Decker, MD, MPH, FAAFP**

**Miguel Dela Cruz, MD**

**Sumatha Devarajan, MD**

**Kristen Dillon, MD, FAAFP**  
& Paul Blackburn

**Oby Egeolu, MD**

**Doug Eliason, DO, FAAFP**

Carol Endo, MD

**Teresa Everson, MD, MPH**

**Kevin Ewanchyna, MD**

**Scott Fields, MD**

**Brian Frank, MD**

Ana Gagnon, MDiv

**Eva Galvez, MD**

**Olivia Galvez, MD**

**Roger Garvin, MD, FAAFP**

**Lana Gee-Gott, MD**

**Erin Glasrud**

**Bob Gobbo, MD, FAAFP**

**Michael Grady, MD**

Conor Hegewald, DO

Kimberly Heggen, MD

**Melissa Hemphill, MD, FAAFP**

**Holly Jo Hodges, MD, MBA, FAAFP**

Tochi Iroku-Malize, MD, MPH, MBA,  
FAAFP

**Nathalie Jacqmotte, MD**

**Rose Kenny, MD**

**Robbie Law, MD**

**Alex Levin, MPH**

**Jinnell Lewis, MD**

**Robyn Liu, MD, MPH, FAAFP**

**Mark Lyon, MD**

**Dawn Mautner, MD**

**Eva McCarthy, DO**

**Lance McQuillan, MD**

Louise Merrigan

**Mark Meyers, MD**

**Christina Milano, MD**

**Gina Miller, MD**

**Rick Moberly, MD**

**Kay Nordling, MD, FAAFP**

**Bill Origer, MD, FAAFP**

George A. Pantely, MD

**Jackie Parilla, MD**

**Janet Patin, MD, FAAFP**

**Daniel K. Paulson, MD**

**Gary Plant, MD, FAAFP**

**Liz Powers, MD, FAAFP, MHA**  
& Nic Powers

Maynika Rastoga, MD, FAAP

**Michelle Ritter, MD**

**Glenn Rodriguez, MD**

**Evan Saulino, MD, PhD**

**Jeanne Savage, MD**

**Joe Skariah, DO, MBA, MPH**

**Dwight Smith, MD, FAAFP**

**Ariel Smits, MD, FAAFP**

**Fayza Sohail, MD, FAAFP**

**Sen. Elizabeth Steiner, MD, FAAFP**

**Yoli Suarez, DO, MBA**

**Krista Summers, MD**

**Annie Tubman, MD, IBCLC**

**Tom Turek, MD**

Mathijs Vandenbogaard

**Jonathan Vinson, MD, FAAFP**

**Keith White, MD, FAAFP**

**Eric Wiser, MD, FAAFP**

Kayla Wright

**Stuart Zeltzer, MD**

# Dr. Tony Germann Named OAFP Family Doctor of the Year



*Left, Doctor of the Year, Dr. Tony Germann, with OAFP Executive Director, Betsy Boyd-Flynn. Right, the family behind the family physician.*

**Antonio “Tony” M. Germann, MD, MPH**, the Clinical Medical Director of Salud Medical Clinic in Woodburn was named the Oregon Academy of Family Physicians’ Family Doctor of the Year on April 14<sup>th</sup> during the organization’s 76<sup>th</sup> annual conference in Gleneden Beach, OR. He is celebrated for his commitment to community health, passion for advocacy and public health, service to his patients, and dedication to rural primary care practice.

Dr. Germann graduated from the University of California Davis Medical School in 2008 and then went on to complete his residency at the University of Washington Family Medicine Residency Program. He has practiced for over ten years at Salud Medical Center in Woodburn, and he practices at Silverton Hospital. He currently provides full spectrum family medicine care, including obstetrics and pediatrics. He is bilingual and provides care to his patients in both English and Spanish. A holistic view of health serves as the foundation of his care to patients, and he demonstrates this by doing all he can to ensure access to behavioral health, nutrition, and pharmacy as part of primary care.

During the early COVID-19 pandemic response Dr. Germann played a pivotal role serving on Governor Kate Brown’s medical advisory committee. He led his community through challenging and difficult times by being the lead physician overseeing the triage response for the Yakima Valley Farm Worker Clinic System, and he assisted in the development of the triage safety protocol used by 40 clinics across their system, which covered 160,000 patients. In addition, he served as the physician liaison to the Incident Command Center Response for COVID-19 and was a member of the Marion County COVID Response Team.

As a rural provider himself, Dr. Germann has spearheaded efforts to train Family Medicine residents by creating the Salud Rural Maternal Child Health Fellowship. This program aims to

recruit new family physicians and prepare them for obstetric procedures in rural and underserved areas. This work is especially important as the state - especially within its rural communities – faces physician and other healthcare worker shortages.

Alongside his practice, Dr. Germann advocates for important health care issues and serves on boards and committees. Some of his advocacy endeavors included supporting “Cover All Kids,” Measure 101, and telemedicine bills. He also engages in ongoing efforts to promote health equity and access to care. He serves as a member of the Board on Health Care for All Oregon, the Joint Task Force on Universal Health Care, and as a member of the Oregon Academy of Family Physicians Commission on External Affairs – an entity that ensures members of the organization stay up to date on state and federal regulatory issues.

Dr. Germann received four letters of support of his nomination for Doctor of the Year from patients, three from colleagues, and one from a community leader of the Community City of Woodburn. His patients showed an outpouring of gratitude and admiration for Dr. Germann, sharing that he is a role model, he always treats his patients and their families with kindness and respect, and he takes great care to ensure that each of his patients feels like an active and empowered part of their own treatment process. Colleagues praise Dr. Germann by stating “Tony’s combination of service and advocacy make him an exemplary family physician,” and “he is a wizard at leveraging limited resources to get patients what they need.” The community leader supporting his nomination stated “Doctor Germann, is a genuine caring human being and this shines through in his efforts as a doctor. Every interaction I have seen Dr. Germann have is with kindness and a sense of humbleness that makes those asking the questions feel heard and understood.”

It is with great pride that the OAFP recognizes and honors Dr. Germann for his impact on the field of Family Medicine.



# The Case for Evidence Based Lifestyle Medicine

Ron Stout MD MPH FAAFP, Janet Calhoun MA, Paul Martin MFA

Lifestyle Medicine (LM) is the use of evidence-based, lifestyle, therapeutic intervention—including a whole-food, plant-predominant eating pattern, regular physical activity, restorative sleep, stress management, avoidance of risky substances, and positive social connection—as a primary modality, delivered by clinicians trained in these modalities, to prevent, treat, and often reverse disease.

Early detection of chronic disease has too often been defined as prevention. Mounting evidence indicates that modifiable behavioral risk factors drive the leading causes of morbidity and mortality in the United States. Data analyzed from more than 190 countries found that what people eat and fail to eat, is the leading cause of disease and death.

Addressing lifestyle is recommended as a first-line treatment option in many chronic disease guidelines. However when surveyed, physicians indicate having received little training in behavior change, clinical nutrition and Lifestyle Medicine therapeutic domains. Increasingly there is a recognition that medications and procedures have been insufficient to alter the negative trajectory of our collective health. (VOL 71, NO 1 | JANUARY/FEBRUARY 2022 | MDEDGE.COM/FAMILYMEDICINE A FAMILY PHYSICIAN'S INTRODUCTION TO LIFESTYLE MEDICINE)

Increasingly, the evidence suggests that poor lifestyle habits combined with environments that discourage healthy behaviors have resulted in adverse changes in our epigenetics, microbiome, neuroplasticity, and cellular function. This leads to chronic inflammation and clinical disease. When addressed with improved lifestyle and environment, chronic disease progression can actually be reversed and overall health improved. These findings are summarized in the publication from the Lifestyle Medicine Research Summit (*Frontiers in Medicine, Prioritized Research for the Prevention, Treatment, and Reversal of Chronic Disease: Recommendations From the Lifestyle Medicine Research Summit, 2020*)

The six domains of lifestyle medicine (whole food plant-predominant eating, physical activity, stress, sleep, addictions and social connections) and effective interventions address the vast majority of inflammatory-mediated chronic disease. Case studies of rapid improvement in common chronic diseases have been reported based on both the science and practice of lifestyle medicine. (ACLM case series, Craig et al. 2021) Studies showing disease reversal and prescription medication reduction and elimination for advanced inflammatory-related chronic disease are increasingly being described and embraced as evidence of need for more systematic approaches. (*J. Environ. Res. Public Health 2021, 18(21), 11364*)

Intensive cardiac rehabilitation programs such as those by Ornish, Esselstyn and Pritikin have proven to be effective and exceed clinical outcomes of traditional approaches to preventing recurrent cardiac events and arterial plaque progression. (*Barnard et al 2020, Bodai et al 2018*)

Physicians looking to deliver Lifestyle Medicine can begin by exploring the following resources:

- The American Academy of Family Physicians' implementation guide, "Incorporating Lifestyle Medicine Into Everyday Family Practice".
- A free 5.5-hour CME-accredited Lifestyle Medicine and Food as Medicine Essentials online course is available from the American College of Lifestyle Medicine.
- Also available is "A Family Physician's Introduction to Lifestyle Medicine published in the Journal of Family Practice.

Physician training programs can leverage a host of tools including:

- The American College of Lifestyle Medicine's Lifestyle Medicine Residency Curriculum (LMRC). The LMRC is currently used by over 200 residencies, the majority of which are Family Practice. Health Meets Food/Culinary Medicine is another comprehensive training program utilized in various ways at over 60 medical schools.
- ACPMs Lifestyle Medicine Resources/CME has been used as a Brand differentiator by MDVIP and similar direct to primary care entities.
- The University of South Carolina sponsors an open source curriculum LMed.
- The AMA offers over 50 credits of Lifestyle Medicine CME.

Approaches to engaging patients in therapeutic Lifestyle Medicine, include:

- The free Full Plate Living<sup>®</sup> online programs, group facilitated materials and support resources. It is a proven, small-step approach that helps individuals obtain positive health outcomes.
- A more intensive lifestyle intervention is Pivio, a program delivered through expert-facilitated in-person or virtual group sessions.

Access these and more resources at:  
[ardmoreinstituteofhealth.org/resources](https://ardmoreinstituteofhealth.org/resources)



Oregon Academy of Family Physicians  
3439 NE Sandy Blvd. #264  
Portland, OR 97232

Presorted Standard  
U.S. Postage PAID  
Little Rock, AR  
Permit No. 563



**Zia Choudhury, MD**  
*Family Medicine, Asante*

**Amanda Wolff, CLS**  
*Medical Lab Scientist, Asante*

**PJ**  
*Always up for adventure*

# LOVE WHERE YOU LIVE. LOVE WHERE YOU WORK.

*We value a work and life balance.*

The quality of life in Southern Oregon is as outstanding as our health care. Mountains, lakes and trails await our new physicians, advanced-practice clinicians and new graduates, offering an adventurous work-life balance.

Asante is a Merative 15 Top Health System in the nation for 10 years, with three CMS five-star hospitals. Led by a regional board that cares about you and your family, Asante is an excellent choice for work in a beautiful area to live in.



To find out how you can join our team, scan the QR code with your smartphone or visit [asante.org](https://www.asante.org).

 **ASANTE**<sup>®</sup>  
*Community lives here.*