

Family Physicians of Oregon

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Jon Schott, MD
**2014 Oregon Family
Doctor of the Year**



Oregon Academy
of Family Physicians



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Family Physicians of Oregon

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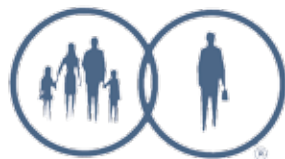


About the Cover:
Alexander, Dawn and Jon Schott, MD, at the Portland Embassy Suites Hotel after Dr. Schott was named 2014 Oregon Family Doctor of the Year at the OAFP's annual celebration luncheon.

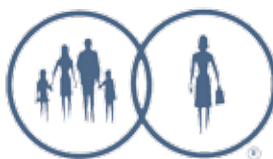


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Oregon Academy
of Family Physicians



EDITION 30

● PRESIDENT'S MESSAGE



LIZ POWERS, MD

So far, 2014 has been a big year for me. For those who know of my usual drive and determination, it may come as a surprise that I've spent all but two weeks of this year on "modified bed rest." In fact, I haven't seen a patient since January 13th, the day I got my own private (and VERY expensive) flight to Portland in a Pilatus PC-12 turboprop. I've learned many things in the last few months, and have grown as much professionally as I have personally, though not in ways I would have predicted.

Right away, I learned that some very weighty decisions (whether or not to resuscitate a 24-week fetus) were initially made for me. I learned that my confidence in the "Ivory Tower" on the hill, filled with knowledge and expertise, was misplaced and quickly fell prey to fear and uncertainty as decisions were made in an academic vacuum, without regard to my family's values. I learned that fear cannot be treated with "evidence." I learned that my respect for the physicians treating me had nothing to do with their medical knowledge and had everything to do with whether or not they heard what I said when they gave me a chance to speak. I learned that it didn't make much difference that I was a physician in this situation -- my medical knowledge, my self-confidence and my proactive involvement helped, but the chasm between the health care system and the patient was too great. My discharge instructions included a clear statement that I was being prescribed Nifedipine against medical

advice. My contractions then were still strong enough to keep me awake during those long nights of waiting.

other thirty-three percent of family physicians that aren't yet working within the PCPCH model?

Becoming a PCPCH is, at its heart, really a cultural transformation, adopting at all levels the Shared Decision Making mantra of "no decision about me, without me."

As family docs, we care for people – a scared couple from Enterprise – not conditions – extreme preterm labor. Knowing our patients over time, in the context of family and community, enables us to inform and guide them toward decisions that are right for them, based on their values.

Our academy, our state, and our nation are doggedly pursuing PCPCH transformation -- helping primary care practices get there, and (at the OAFP level) ensuring that family physicians lead the cause. Well, it's working! There are more than 500 certified PCPCHs in Oregon and 80% of these have achieved Tier 3 status. Sixty-seven percent of Oregon family physicians practice within a PCPCH. BUT are their patients healthier? Happier? More certain that their voices will be heard? Are these physicians more satisfied with their jobs? Do current "quality" metrics really tell us if this experiment is working? When we talk about the primary PCPCH goal of creating continuous healing relationships, many of our older partners will say "we've done that for years – what's new about that?" And what about the

The patient-centered primary care home philosophy of care is about building and sustaining connections, trust, and relationships. But much of the time, it appears to be more about change in workflows and change in roles and responsibilities for medical and office staff. We tend to focus on "transformation" as something that happens within the practice, and outside of the doctor/patient relationship. We adopt EHRs, we employ translators, we expand our hours, we pool messages, and we hire care coordinators to try to achieve team-based care. The end result is that the structures of our practices change, and the overhead increases exponentially. But that leaves the hard part – connecting with patients so that they are empowered to participate in their health care. If we lose sight of that connection, we lose the efficacy of the transformation.

So how do we connect? There are tools developed to help with patient empowerment, but these have not been the focus of the PCPCH movement. It takes more effort to present risks and benefits than to give an opinion. Hard-

est of all is for a doctor to admit (and for patients to accept) that “I just don’t know.” We could intentionally connect with patients where they are by assessing and addressing patient activation and patient literacy levels and by utilizing a “shared-decision-making” philosophy. We could train in Motivational Interviewing, and learn to act as “coaches” rather than “experts.” But this doesn’t come naturally to a profession that has historically been paternalistic – maintaining a space and power differential between doctors and patients.

So, why PCPCH? Why now? Why include the function pieces? I have listened to stories from doctors who gave heart and soul to their practice and communities, and have had that intimate connection with, and continuous commitment to, their patients. I have heard and seen what they gave up for this, and

how, despite their heroic efforts, there was always unmet need. Well, that need continues to grow, outpacing any additional capacity for family and community doctors. Something has to give. The change in structure and function in a PCPCH can let us connect with patients, and meet the growing need, if we remember why we’re doing it. My unexpected trip to Portland reminded me that medicine is not a “recipe” and checking all the Tier 3 PCPCH boxes won’t mean we’re able to do the hard part – sit with patients in uncertainty, guiding them to make their own decisions about what is right for them in situations we ourselves never want to face. Becoming a PCPCH is, at its heart, really a cultural transformation, adopting at all levels the Shared Decision Making mantra of “no decision about me, without me.”

My vision for the OAFP over the next

year is to help physicians and practices at all stages of PCPCH transformation find the patient in this overwhelming change process. I want to connect with practices not currently engaged in the PCPCH process, and not formally doing Shared Decision Making, and hear their thoughts. I want to understand how we can support and help all of our Family Physicians and their practices to sustain and grow during these tumultuous times. We can’t say we know the answers, but we have a vision, and that vision will grow and strengthen as it is shared and developed by many. As we pursue our vision and work for cultural transformation, we need to continue to teach – patients, residents, students, colleagues within and outside of Family Medicine – by listening, and by sitting with uncomfortable uncertainty, always being willing to move forward.

When Someone Deeply Listens To You

By John Fox

*When someone deeply listens to you
it is like holding out a dented cup
you’ve had since childhood
and watching it fill up with
cold, fresh water.*

*When it balances on top of the brim,
you are understood.*

*When it overflows and touches your skin,
you are loved.*

*When someone deeply listens to you
the room where you stay
starts a new life
and the place where you wrote
your first poem
begins to glow in your mind’s eye.*

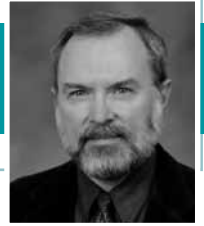
*It is as if gold has been discovered!
When someone deeply listens to you
your barefeet are on the earth
and a beloved land that seemed distant
is now at home within you.*



First family photo from left to right: Nic, Liz, Atticus, and proud big brother, Malakai

If you were at the 67th OAFP Annual Celebration Luncheon held on April 26 at the Portland Embassy Suites Hotel, you know that our incoming President, Liz Powers, MD, was nowhere in sight. In fact, her good friend and residency colleague, Mari Ricker, MD, beautifully read the above speech and poem in Liz’s stead. Liz was at home with her husband and son, readying for the birth of her second child. We are pleased to report that Atticus was born on Sunday morning, April 27, 7 pounds, 3 ounces – happy, and definitely healthy.

● FROM THE HILL



JOHN SAULTZ, MD, CHAIR OF FAMILY MEDICINE, OHSU

In my last *From the Hill* column, I spoke of our discipline's new strategic plan, *Family Medicine for America's Health*. This plan has now been approved by each of the family medicine organizations and an implementation process is being initiated. Over the next year, you will hear a lot about this. The plan includes a series of promises regarding what the public should expect from every family physician and from every family medicine practice. In many ways, the plan reaffirms our commitment to care based on trusting interpersonal relationships and a comprehensive scope of practice from birth to death. At a national level, the plan is a promise by our discipline to lead the change process in American medicine, to eliminate health disparities, and to achieve the "triple aim" of improved health outcomes, improved patient experience, and lower cost of care. Finally, the plan involves an ambitious communications strategy to make sure patients, communities, health care organizations, businesses, and government get the message.

These are big promises and we are making them at a time when we are already knee deep in practice transformation. There is too much work and too few of us. The plan asks a lot from us when we are already stretched thin. For those in practice, it is a commitment to preserving our traditional values while transforming our delivery model to improve efficiency. For those of us in academics, it requires a renewed aggressiveness when it comes to cultivating student interest in family medicine and new curricula to ensure students

and residents are fully prepared for 21st century practice. It will also require an expanded research agenda to provide innovative new ideas. But on a deeper level, this plan requires our specialty to rediscover why we exist in the first place. We do not exist to make integrated delivery systems successful or to help health plans or Coordinated Care Organizations (CCO's) work. Large health systems, medical group practices, and CCO's may or may not turn out to be positive changes for patients. Family physicians exist to serve and protect people and communities and our place is by their side. It seems like every day, someone wants us to "provide leadership" or "transform" some aspect of our practice. Too often the requests come from people who provide no patient care themselves and are motivated by a desire to benefit those who pay for care more than those who receive it. After awhile, this starts to feel like we are watching infomercials on television! We must avoid being swept up in this rhetoric and remain focused on the people and communities we serve. The pace of change is challenging for us, but it is terrifying for them.

So what can each of us do to make *Family Medicine for America's Health* a reality? In no particular order, here are some suggestions:

1. Each individual family physician needs to maintain a full scope of practice designed to care for anyone who comes through the door. This means men and women, young and old, adults and children, sick and well. It is easy to allow our personal competencies to slowly erode. We will be promis-

ing the American people that family physicians are able to care for entire families and we need to live up to this promise. This does not mean that our practices cannot have a focus. It does mean that family medicine is a cradle-to-grave discipline.

2. Every family medicine practice should be able to take care of a majority of patient problems without referrals elsewhere. Specialty consultation rates have increased substantially over the past decade as care needs became more complex and our practices became busier. Health care cannot be affordable if we order too many tests and refer too many patients to specialists. But we are not in this alone. In some cases, coordinating referrals efficiently might best be accomplished by partnering with specialists to incorporate them into the patient-centered medical home with us.
3. Each patient should be able to choose a personal provider and develop a trusting relationship with that provider. These relationships should be nested within high functioning teams so that the patients also develop relationships with every team member including nurses, medical assistants, and clerical staff. If patients choose a mid-level provider for this role, family physicians should be supportive team members and assume care of the patient when the patient's needs require a physician.
4. We need to be present with patients when they are vulnerable and this requires connecting with them when they

continued on page 8

are in hospitals, nursing homes, and hospice care. The patients need to experience our presence and advocacy no matter what their care needs are and no matter where they happen to be.

5. Every family physician must play a role in promoting student interest in family medicine and educating the next generation to be our partners.
6. We need to learn how to use complex information systems to continuously make our practices safer and the quality of our care better.
7. We need to be leaders in patient-centered health care and speak out when the interests of patients are being co-opted by commercial interests, including those of the organizations that currently might be employing us. This requires courage and integrity. In some cases, it might require us to change jobs.

8. We need to be available to patients when they need us and use modern communication and information technology to make this convenient for them.

9. We need to insist on being paid fairly for this work and should stop agreeing to health plan contracts that do not pay for value rather than volume. This means that our compensation must include a monthly payment for every patient to support the expanded services of a medical home. Employed physicians need to insist on this as adamantly as independent physicians. The market research done for our strategic plan suggests that family physicians greatly under-estimate our market clout. It is time to stop the outdated fee-for-service payment model once and for all. *Family Medicine for America's Health* calls for unified action by every family physician

in the nation to achieve this. If health plans are not willing to make these changes, our discipline will develop models to sell care directly to patients on a regional and national scale. Health plans will go broke without us, but they may need to be reminded of this a bit more often.

Nearly everything on this list is consistent with what we have been working on here in Oregon for the past five years, but we have yet to see much progress when it comes to payment reform. So we need to be very serious about item nine on the list. On a national level, these are bold promises. It is up to us to deliver on these promises. Speaking on behalf of those of us at the medical school, I can assure you that the next generation is watching to see if we are serious. If we are, I am confident there will be lots of them joining us.

● PUBLIC POLICY AND LEGISLATIVE AFFAIRS



KEVIN JOHNSTON, MD, OAFP SECRETARY

The goal of the yearly FMCC is to help members better understand federal advocacy, learn about the current priorities for family medicine, receive practical, hands-on experience with the legislative process, and inspire change.

We can easily fall into despair, or even worse, apathy, but know that in the end, we all have the ability and responsibility to try to make a difference.



The Oregon Five: Elizabeth Steiner Hayward, Kevin Johnston, Evan Saulino, Melissa Jeffers, and Michael Goodwin at FMCC 2014.

On April 7th and 8th the 2014 Family Medicine Congressional Conference (FMCC) was held in Washington D.C. with an Oregon contingent consisting of **Elizabeth Steiner Hayward, Evan Saulino, Melissa Jeffers, Michael Goodwin** and me. We travelled to the Capitol for a two-day session that culminated in meetings with four Oregon representatives and both Oregon Senators.

With the cherry blossoms on display and the historical buildings and monuments appearing more beautiful after a few brief showers, the backdrop was set for productive meetings in this exhilarating time of innovation and transformation.

The first day was set aside for the conference. The agenda included a pre-

sentation by Representative Henry Waxman, panel discussions that included key decision makers from CMS and the National Association of Medicaid Directors, as well as staff and policy advisers that clearly have their fingers on the pulse of what is changing in the current health care climate.

While the frustrations were apparent given the argumentative culture that seems to pervade our current government, there was also optimism and hope that we have finally committed ourselves to changing the system for the betterment of primary care on the whole (by investing in physician workforce training and research) that will ultimately improve access to high quality care for our patients.

After spending a day learning how to speak without putting our feet in our mouths, how to get a focused message across, and how to make meaningful contacts that allow continued access to our legislators, the Oregon Five were sent headlong into the Capitol, racing from office building to office building, and into the bowels of the Capitol tunnels to meet our elected officials.

Six meetings were held which included: Rep. Kurt Schrader, Rep. Suzanne Bonamici, Rep. Earl Blumenauer, Rep. Greg Walden, Sen. Jeff Merkley, and Sen. Ron Wyden.

The three areas of focus were Medicaid, Family Medicine Spending Priorities for 2015, and Teaching Health Centers. The message was couched in the data that supports an expanded primary care workforce to drive cost down and improve quality.

Medicaid:

- (1) To extend the enhanced Medicaid payment for primary care services beyond December 31, 2014 and
- (2) to make OB/GYN physicians eligible only if 60 percent or more of their Medicaid billing is for primary care services.

Family Medicine FY 2015

Spending Priorities:

- (1) Appropriate at least \$71 million for Title VII Section 7470 Primary Care Training and Enhancement administered by the Health Resources and Services Administration and
- (2) appropriate at least \$375 million in base discretionary funding for the Agency for Healthcare Research and Quality (AHRQ).

Teaching Health Centers:

- (1) Reauthorize the Teaching Health Center program this year to prevent a disruption in the pipeline of primary care physician production;
- (2) senators should co-sponsor Senate bill 1759 (a bill to reauthorize the teaching health center program);
- (3) representatives should consider introducing legislation to reauthorize the

teaching health center program; and (4) provide a sustainable funding stream such as Medicare Graduate Medical Education, modified to fit this vital program.

After putting more than 14,000 steps on Elizabeth's pedometer, challenging the blisters that arise from wearing high heels (Melissa's, not Michael's), and Evan providing the last encouraging words to get me up five flights of marble stairs (wheezing all the way), the day was done and a sense of satisfaction set in.

Michael Goodwin commented "...you know, I feel like I participated in democracy today."

For myself, sometimes the cynic, I have to say I couldn't agree more. For its' faults, I still can't help but be awestruck at what an amazing system our forefathers laid out in their wise and optimistic, maybe even naïve visions,



Michael Goodwin, MD and Kevin Johnston, MD (after step number 14,001!)

more than 200 years ago. We can easily fall into despair, or even worse, apathy, but know that in the end, we all have the ability and responsibility to try to make a difference.

JON SCHOTT, MD

The 2014 Oregon Family Doctor of the Year

“*In my opinion, there is no better role model than Dr. Schott. As a patient, I have his undivided attention and he makes me feel like I am the most important patient he has. If I could only have one doctor for the rest of my life, it would be Dr. Schott.”*

“There are so many wonderful family doctors throughout eastern Oregon, but no one quite like Dr. Schott. He is always willing to go that extra step to meet the needs of his patients. Jon not only cares for his patients medically, he also takes care of their simple needs. I have seen him many times at the clinic walk an elderly woman out to her car, which could have easily been delegated to support staff. He takes the time to give that elderly woman a big hug, or listen to a hunting story from an old timer. He is truly a compassionate and caring man. Jon’s medical care is entirely comprehensive, and that is why his patients love him so much. Jon is a bright and brilliant medical doctor, but is not blinded by a big ego. If he cannot provide the services for a patient, he will find them. Jon consults other disciplines on a regular basis.”

“Jon is an approachable person. Members of the medical community communicate effectively with Jon because he creates such a collaborative work environment. Besides being very approachable, Jon is dedicated to research-based medicine and outcomes. Jon does not settle for the norm, but seeks out new medical practice ideas.”

On Saturday, April 26, during the OAFP Annual Celebration Luncheon where stellar sentiments and inspiring words are offered to a number of award winners, no one was more humbled than the winner of the 2014 Oregon Family Doctor of the Year Award, **Jon Schott, MD**. When Dr. Schott heard his



Dr. Jon Schott accepting the Doctor of the Year Award.

name being called, he was a bit befuddled. “It didn’t really make sense to me as I feel that I am only as successful as the people around me; I am honored and humbled and can’t believe I was chosen for this award, especially given the list of past recipients.”

The Oregon Family Doctor of the Year award recognizes physicians who provide compassionate, comprehensive family medicine on a continuing basis; are involved in community affairs; and who provide a credible role model professionally and personally to their community, other health professionals and residents and medical students.

Dr. Schott attended medical school at OHSU and completed his family medicine residency at Idaho State University. Shortly after completing his residency, Dr. Schott returned to his roots and began practicing in Baker City. A few years later, with Dr. Schott’s leadership and guidance, four young family doctors established Eastern Oregon Medical Associates (EOMA). EOMA has grown to a team of over 40 clinicians and staff members. In 2010 his group became affiliated with St. Luke’s Health System and is now known as St. Luke’s Clinic/EOMA.

According to **Eric Lamb, MD**, one of Dr. Schott’s practice partners, “Throughout the

pains of a growing business, Jon continued to be our Managing Partner, while continuing to teach OHSU medical and physician assistant students as well as inspire the rest of us in the practice to do the same. His vision to deliver quality medical care to our friends and neighbors in rural Oregon is ongoing and I look forward to his continued inspiration and leadership as we continue to provide quality health care to people in our region.”

Dr. Schott’s friend and colleague, **L.J. Fagnan, MD**, presented the award to Dr. Schott. His wife, son, and clinic manager were on hand for the surprise announcement. According to Fagnan, “Jon loves his community, his practice, and his patients. Early on when EOMA was making investments in practice change, it wasn’t always easy to see what the business model was for these quality improvement initiatives. Jon told me that he would pump gas in order to make ends meet to have a family medicine practice that his clinician partners, staff, and community would be proud of. Dr. Schott exemplifies the best of a dedicated family physician and is deserving of the 2014 Oregon Family Doctor of the Year Award.”

Dr. Schott’s name will be submitted to the American Academy of Family Physicians in nomination for the American Family Doctor of the Year.



Dr. Schott with his clinic manager, Cindy Denne.

ILANA HULL & NATHAN DEFREES 2014 Co-Lundy Award Winners



2014 Mary Gonzales Lundy Award winners – Nathan Defrees and Ilana Hull, accompanied by Mary Lundy.

The Lundy Award was established in 2000 to honor the retirement of Mary Gonzales Lundy who served since 1979 as Executive Director of the Oregon Academy of Family Physicians. The award is presented to an OHSU graduating senior who is entering a family medicine residency. The awardee is chosen by the trustees of the Oregon Academy of Family Physicians Foundation on the basis of an essay titled “My Ideal Practice” and the applicant’s demonstrated record of community service. This year, due to the quality of the nominees, two students were recognized for this award.

Ron Stock, MD, President of the OAFP Foundation, presented **Nathan Defrees** and **Ilana Hull** as this year’s Lundy Award recipients by the Oregon Academy of Family Physicians Foundation at the annual celebration luncheon.



Nathan and Ilana flanked by Ron Stock and Evan Saulino.

Ilana Weinbaum Hull majored in Health and Societies at the University of Pennsylvania before heading to graduate school at the London School of Economics. There she studied health policy, planning and financing. Her experiences throughout medical school – as a committee administrator for the Oregon State

Legislature, a Policy Analyst for the Oregon Health Fund Board, and a Legislative Aide for Senator **Elizabeth Steiner Hayward** – have given her the tools to be an excellent physician advocate.

Ilana is thrilled to be staying in the area with her husband, Scott, and son, Makai, as she begins her medical career at the Providence Family Medicine Residency Program.

Nathan Defrees, known fondly as one of the three bike boys who traversed 1,000+ miles across Oregon in the summer of 2011, visiting rural family physicians and spreading the word about health advocacy, is a lifelong Oregonian who grew up on a Baker City cattle ranch.



OHSU Bike Boys -- Nathan, Matt Sperry, and Wes Fuhrman.

Nathan has been the student representative for the past two years on the OAFP Board of Directors, Co-Chair of the Family Medicine Interest Group, a Ford Family Foundation Scholar, an OHSU Rural Scholar, and a recipient of the Alpha Kappa Kappa award and an Arnold P. Gold Foundation Humanism in Medicine Inductee.

His care and concern about community health, working with the underserved, and working in a rural setting, will suit him well as he travels with his wife Jesse, to begin his internship at the Family Medicine Residency of Idaho.

67th Annual Spring CME Weekend is a Hit in Portland!

With over 200 conference attendees roaming the halls of the Embassy Suites Hotel in Portland, participants found there was something for everyone during this year's Annual CME Weekend. Whether you were learning how to tackle the ongoing challenges of Patient-Centered Primary Care Homes with your clinic staff at an all-day workshop, getting an update on osteoporosis, melanoma, celiac disease, diabetes or cervical cancer screenings, finding out about new drugs in the marketplace, determining available treatments for back pain, or discovering how to use motivational interviewing to strengthen your partnership with your patients, the OAFP faculty presented their "A" game through thoughtful discussions, meaningful examples, and hands-on presentations.

The conference was kicked off by an outstanding keynote lecture entitled

"Growing Others: Physician Leadership in Transforming Health Care" by Matthew Wynia, MD, AMA Director of Patient and Physician Engagement for Improving Health Outcomes. The feedback to the

presentation was excellent, ranging from "Every doctor in the country needs to hear this talk" to "excellent synthesis of material" to "the best lecture I've heard at an OAFP meeting."



For the second year in a row, the OAFP sponsored a “New Physicians Get Together” to give physicians within the first seven years of practice the opportunity to discuss the peaks and the valleys of life as a family physician. According to **Melissa Jeffers, MD**, a new physician just out of residency, the event was a great success. “I think the time spent together was very positive. There were doctors from Hood River to Klamath Falls and from Madras to Portland. We had lively discussions about practice styles, the pros and cons of hanging your own shingle, the effects of the Affordable Care Act, providing medication samples to needy patients, as well as the congenial camaraderie of getting together with people with a common goal and focus.”

Members also were able to socialize at the OAFP Foundation Happy Hour &

Auction and the Student-Physician event at Kells Irish Restaurant following the auction. **Charlie Procknow**, FMIG Co-Leader, said, “There was a great turnout of family physicians and students from all years at this event. It was a perfect way to build community within FMIG as well as to interact with community physicians we often don’t get exposure to. I hope this tradition continues!”

The weekend culminated with moving acceptance speeches from our physician and student award winners at the annual Celebration Luncheon.

For those of you in attendance this year, we are glad you were able to join us. For all members, we hope you can join us next year when we host the Annual Spring CME Weekend on April 16-18, 2015 at Salishan Lodge in Stevenson, Washington.



THANK YOU

We wish to offer a heartfelt thanks to the following sponsors of our 67th Annual CME Weekend. Their financial support helped the OAFP continue to offer vital academic information and training to our members.



SUPPORTERS: (Contributed to the Celebration Luncheon and the Morning Coffee Break)

Oregon Dairy Council/Nutrition Education Services
FamilyCare Health Plans

EXHIBITORS

Angel Flight West
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Matrix Medical Network
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PacificSource Health Plans
PeaceHealth Laboratories
PeaceHealth Sacred Heart Medical Center
Providence Health & Services
Samaritan Health Services
Yakima Valley Farm Workers Clinic
ZoomCare

“LIGHTS... CAMERA... AUCTION” IT’S A WRAP AND THE RESULTS ARE IN!!

Raffle tickets for a wine country getaway; vacation spots in the woods, in the city, and in the mountains; one-of-a-kind, handcrafted furniture pieces; custom mirrors and stunning photographs; a sought-after mouthwatering apple pie; certificates to restaurants and theaters; and an unparalleled outpouring of generosity ensued at this year’s OAFP Foundation Auction.



cians, students, and residents will be able to continue: the Laurel G. Case Award for

Rural Experiences, the Mary Gonzales Lundy Award, the Tar Wars anti-tobacco and the Ready, Set, FIT! health education programs, the Ethics Lecture Fund, the Locum Tenens Fund, and FMIG activities.

We appreciate each of the following donors of goods, services, and cash donations for their generous support. We are thankful for all who attended and participated in the silent and oral auction on Friday, April 25. A special thanks to our OAFP and Foundation Board members who contributed to the offerings at this year’s auction:

Pat Ahlen, MD

- Al’s Garden Center
- Annie Bloom’s Books
- Artists Repertory Theatre
- Trish Banning, Hasson Realty
- Banning’s Restaurant & Pie Shop
- Bottle and Bottega
- Broadway Rose Theatre
- Bullwinkle’s Family Fun Center

James Calvert, MD

- John Case, Classic Chauffer
- Cheesecake Factory
- Columbia Gorge Hotel
- Cornerstone Wealth Management
- Jane Conley
- Cookies by Design

Peter & Lisa Dodson, MD

- Embassy Suites Downtown Portland

Shawn & Charles Engelberg

Lynn & Jeff Estuesta

- Bobby Ghaheri, MD

Kerry & Marc Gonzales

Jenny & Mike Grady, MD

- High Desert Museum

- Imago Theatre

- Inn at Spanish Head

- Julie & Mark Johnson

Vesna Jovanovic, MD

- Marcia Kies, Hasson Realty

- Kyra’s Bake Shop

- Lakewood Theatre Company

- Jan & Howard Levine, Sussman Shank

- Mary & Richard Lundy

Mark Lyon, MD

Susan & Fred Matthies, MD

Brian McCormick & Maria Czarnecki, MD

Lance McQuillan, MD

- McMenamins Edgefield
- Andrea & Dennis Mehigan
- Mink Boutique
- Mount Bachelor Village Resort
- Francie & Dale Naftzger
- Ulla & Patrik Nielsen
- Cheryl Ogburn & Andy Clark
- OMSI

Peggy O’Neill

- Oregon Shakespeare Festival
- Oregon Zoo

Bill Origer, MD

Janet Patin

Gary Plant, MD

- Popina Swimwear
- Portland Center Stage
- Portland Japanese Garden

Portland Spirit

Justin Rodriguez & Joyce Hollander-Rodriguez, MD

Molly & Glenn Rodriguez, MD

Salishan Resort

Sherrie & John Saultz, MD

Suzanne & Chris Shepanek

Skamania Lodge

Kim & Jeff Spathas, DMD

Stash Tea

Deborah & Ron Stock, MD

The Loaded Brush

Susie & Brian Thompson, Pioneer

Outfitters

Tollen Farms

Rita & Tom Turek, MD

Phil Unverzagt & Dale Bookwalter,

Oregon Freeze Dried

Marilou & George Waldmann, MD

Wanderlust Tours

Wendy Warren, MD

Keith White, MD

Willamette Valley Vineyards

Ellen & Rick Wopat, MD

World Class Wines



Proceeds from the auction go to a variety of programs, including the Laurel G. Case Award for Rural Experiences, the Mary Gonzales Lundy Award, the Tar Wars anti-tobacco and the Ready, Set, FIT! education programs, the Medical Ethics Lecture Fund and the Locum Tenens Program.



2014 POSTER CONTEST WINNERS

BE THE SMARTEST FISH IN THE SCHOOL, DON'T GET SMOKED!



2014 Tar Wars Poster Contest Winner, Flynn Nyman, with his certificate and gift card. Flynn was thrilled and surprised that his poster took first place!

Flever, creative, and to-the-point. That's exactly what this year's winning poster, submitted by fifth grader, Flynn Nyman, is all about. Flynn is in Kristin Erickson's class at Jefferson Elementary School in Corvallis.

For over 20 years, the OAFP Foundation has supported the Tar Wars anti-tobacco education program by providing free classroom materials, physician and medical student presenters, and an end-of-year poster contest. The program is provided to fourth and fifth grade students throughout the state of Oregon. **Troy Garrett, MD**, a family physician at the Samaritan Family Medicine Resident Clinic in Corvallis, who has been a long-time presenter of the Tar Wars program, was the volunteer presenter this year in Ms. Erickson's classroom. Dr. Gar-

The Tar Wars message is simple and consistent: to help children decide to live healthier, tobacco-free lives. The program educates students about being tobacco-free, provides them with the tools to make positive decisions regarding their health, and promotes personal responsibility for their well-being.

rett states that "It's fun to present Tar Wars because the students are so excited and energetic, and prevention is so much more rewarding than treating an established disease." So true!

The Tar Wars message is simple and consistent: to help children decide to

live healthier, tobacco-free lives. The program educates students about being tobacco-free, provides them with the tools to make positive decisions regarding their health, and promotes personal responsibility for their well-being. The annual poster contest is an extension of the

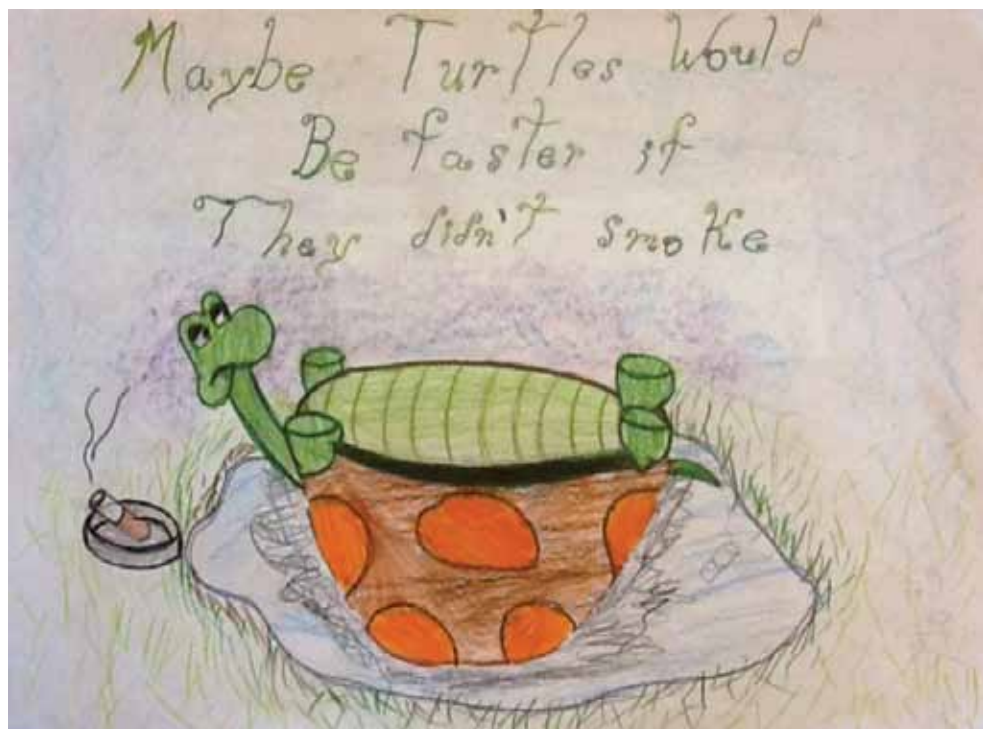
program, where students are encouraged to create original artwork and their own positive anti-tobacco message.

Our second place winner is Moira O'Bryan from the Lighthouse School in North Bend. **Janet Patin, MD**, was the

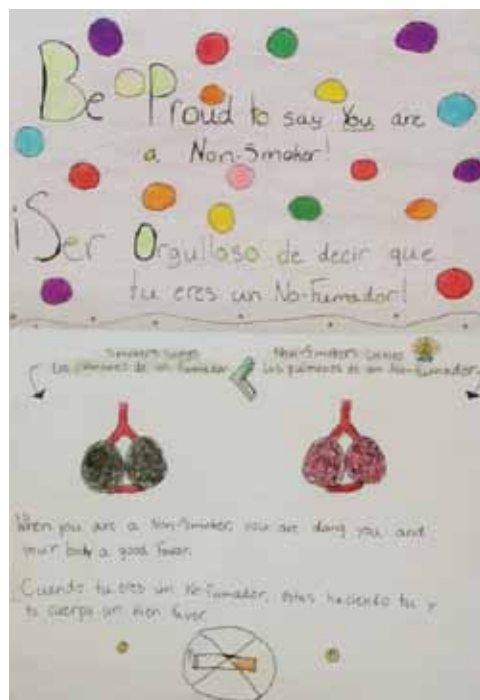
presenter in Amanda Rice's fifth grade classroom. The third place winner is Nellie Hanson, from Holly Sarich's fifth grade classroom at Trost Elementary in Canby. The presenters for this classroom were two OHSU medical students, **Alina Sat-**

terfield and **Craig Rudy**.

Each of the top three winners received a certificate and \$50.00 gift card and Flynn's poster was sent to the AAFP headquarters to be judged in the national poster contest this summer.



Second place winner, Moira O'Bryan's poster caption: "Maybe turtles would be faster if they didn't smoke."



Third place winner, Nellie Hanson's poster caption: "Be proud to say you are a non-smoker." (Pictured in English and Spanish)

A special thanks to our 2014 presenters:

According to the AAFP, there is strong evidence that advice from a health professional can more than double the success rates of smoking cessation. Thank you to our presenters who gave their time to preclude young children from using tobacco products:

Britta Ameel	Dominique Greco, MD	Katherine Merkle, DO	Kayli Senz
Daniel Barrett, MD	Anthony Gunsul, DO	Miranda Merrill	Eryn Stubblefield
Bethany Bartlett	Stephen Hallas, DO	Alex Niu	Blake Sullivan
Aubrey Bridges, PA-C	Quinn Halverson	Brenda Nui	Christopher Sullivan
Michael Brydone-Jack	Elliott Harman	Neil Olsen, MD	Sara Tanabe
Sarah Click	David Hayes, MD	Janet Patin, MD	Kim Thai
Amie Davenport	Maya Heck	Ian Penner, PA-C	Sheila Thurber
Heather Davidson, PA-C	Whitney Humphrey	Michelle Pies, DO	Steven Wahls, MD
Michelle Dillier	Max Kaiser, DO	Corbett Richards, DO	Keith White, MD
Lara Gamelin, MD	Lucy Kwong	Craig Rudy	Weili Zhang, DO
Troy Garrett, MD	Michael Latteri	Bethany Sappington	
Shabnam Ghazizadeh	Christopher Leesman, DO	Alina Satterfield	
Brook Goddard	Katherine McDonough, DO	Heidi Schroeder	

STUDENTS SPEAK OUT!

Stories from OHSU students involved in the Family Medicine Interest Group (FMIG)

In our last update, many of our FMIG members were helping to plan the Health Care Equality Week (HCEW) Screening Fair. **Taryn Hansen** (class of 2016 and an FMIG co-chair), was a co-leader of this year's event. The annual fair was held on April 6th in O'Bryant Square in downtown Portland. This is an interdisciplinary event that is organized by medical, dental, pharmacy, nursing, physician assistant and osteopathic students across the state. One of the most promising take-aways of this year's fair was talking to patients who now were regularly being seen by a doctor due to the ACA's Medicaid expansion. This was an inspiring change from last year's fair, where most attendees could not remember the last time they had seen a physician. As a result, we saw a much more avid interest in specialty services such as vision and hearing services, as most attendees had already received health maintenance screenings and immunizations in their family physician's office. Of course, there is still a tremendous need for safety net services such as HCEW, but we were all encouraged to see how our new health care law is affecting individual patients throughout the city.

While Taryn and other FMIG members were providing services for our urban underserved patients at the HCEW event, FMIG co-chair **Ashley Bunnard** planned a retreat to provide care in a rural underserved environment and to expose students to family physicians and residents practicing in a rural setting. In early May, **Stacey Jesser, Annette Whitney, and Rita Aulie** attended this rural retreat with Ashley at the Cascade East Rural Family Medicine Residency in Klamath Falls. After taking a tour of the clinic, the medical students sat in

with the attending physicians and residents for Friday morning rounds. This was followed by a three hour practical skills workshop (which addressed fish hook removals, foreign body dislodgement, ring removals, and assorted skin biopsies).

The remainder of the afternoon was spent staffing the Cascades East Mobile Clinic. Students were accompanied by fam-

ily physicians **Chris Zowtiak** and **Larry Cohen**, and first-year resident **Mak Hofmann, DO**, to the Klamath Falls Gospel Mission. There, students and faculty saw seven guests of the Mission requiring aid for uncontrolled diabetes, restless leg syndrome, and severe alcoholism. The evening was spent with faculty and residents spanning all three years at a local restaurant. Good



Ashley Bunnard, Stacey Jesser, Annette Whitney, and Rita Aulie staff the Cascades East Mobile Clinic.



times were had by all, and the students were able to see the generous workings of a fantastic Oregon family medicine residency program.

After wrapping up a busy spring, we are now in a time of transition with FMIG student leadership. This year's co-chairs Ashley Bunnard, Taryn Hansen, and I am passing the FMIG baton on to MS1 students who will resume leadership roles for next year's school year. **Emma Cantor, Rita Aulie, Brianna Mueller, and Annie Mancini** will all act as co-chairs in next year's FMIG. We are all very excited to see what they will be able to accomplish in the year to come.

SAVE THESE DATES

SAM STUDY HALL -- ASTHMA

December 13, 2014, Portland

68TH ANNUAL SPRING CME WEEKEND

Scientific Assembly & Congress

April 16 – 18, 2015

OAFP/Foundation Auction, April 17

Skamania Lodge, Stevenson, WA

**For more information, contact
Kerry Gonzales at the
Oregon Academy of
Family Physicians
www.oafp.org
(503) 528-0961
Fax (503) 528-0996**

Match Day 2014 Results...

A New Chapter for OHSU Family Medicine Graduates

Here's the story in numbers. On March 21, 2014 at 9:00 a.m., over 16,000 U.S. medical school seniors across the country anxiously awaited the results of the National Resident Match Day; the largest Match Day in history. Over one hundred of these students gathered in Richard Jones Hall on the OHSU campus along with their friends, family members, and faculty to find out where they would spend the next three years of their lives; 23 of these students matched in a Family Medicine Residency Program (up from 17 last year); 9 matched to in-state programs – **Elyssa Ackerman, Caroline Barrett,**

Wes Fuhrman, Ilana Hull, Carolyn Litchman, Ruolan Liu, Anna Olson, David Simmons and Matthew Sperry.

Elyssa Ackerman told us she settled on Family Medicine as her specialty of choice after completing her Rural Scholars rotation in her hometown of Grants Pass working with **David Abdun-Nur, MD** (new OAFP board member, see page 25) at Mountainview Family Practice. Ackerman said, "I had an incredible time experiencing continuity of care with my patient population. I am very excited to begin my residency training at Providence Milwaukie this June!"



Elyssa Ackerman and Nic Blake – both ecstatic about their residency placements!

Congratulations to these OHSU medical students who have matched in Family Medicine:

Elyssa Ackerman

Providence Milwaukie

Caroline Barrett

Providence Milwaukie – *Hood River track*

Nicholas Blake

University of Montana, *Missoula*

Dean "Nathan" Defrees

Family Medicine Residency of Idaho, *Boise*

Shelli Flynn

Conroe Reg. Medical Center, *Conroe, TX*

Weston Fuhrman

Oregon Health and Science University

Marla Hill

Swedish Medical Center, *Seattle, WA*

Ilana Weinbaum Hull

Providence Milwaukie

Emily Justusson

Mayo School of Grad. Medical Education, *Rochester, MN*

Kelsey Koenig

Medical College of Wisconsin, *Waukesha, WI*

Brian Lear

Central Washington Family Medicine, *Yakima*

Carolyn Litchman

Providence Milwaukie

Ruolan Liu

Providence Milwaukie

Belinda Luk

Central Washington Family Medicine, *Yakima*

Autumn Metzger

University of North Carolina, *Chapel Hill*

Jasminka Mujic

Southwest Washington Family Medicine, *Vancouver*

Anna Olson

Oregon Health and Science University – *Klamath Falls*

Thu Pham

St. Joseph Hospital, *Chicago, IL*

Anisa Richardson

Southwest Washington Family Medicine, *Vancouver*

David Simmons

Providence Milwaukie

Matthew Sperry

Providence Milwaukie – *Hood River track*

Isabelle Trepiccione

Swedish Medical Center, *Seattle, WA*

Geoffrey Winder

Kaiser Permanente – *Napa/Solano, CA*

MEMBERS IN THE NEWS

HONORS, AWARDS AND ACCOLADES



DR. STOCK

Ronald Stock, MD, Portland, received the fifth annual Dr. George E. Miller Patient Safety Award at the OMA's Annual Meeting held on April 25. This award was named after George E. Miller, MD, a pediatrician and dedicated advocate for improving patient safety, who passed away in 2007.

Dr. Stock is a geriatrician, clinical health services re-

searcher, Associate Professor of Family Medicine and Director of Regional Clinical Education at OHSU. He is also the Director of Clinical Innovation for the Oregon Health Authority's Transformation Center.

Prior to his move to OHSU in 2012, Dr. Stock practiced geriatrics and family medicine in Eugene for 20 years and served as the Medical Director of the Gerontology Institute and the Center for Medical Education & Research for PeaceHealth. He has dedicated his professional career and his health services research to improving the quality of health care for older adults, with a focus on redesigning the primary care delivery system in a community for vulnerable and frail elders and assessing methods to develop and measure team-based care in the clinical setting.

He currently serves as a member of the Institute of Medicine Best Practices Innovations Collaborative and the National Quality Forum's Measurement Applications Partnership Clinician Workgroup advising HHS on quality measures for practice, public reporting and pay for performance. More recently he joined the technical assistance team supporting the CMS Comprehensive Primary Care Initiative in Oregon and is the current President of the Oregon Academy of Family Physicians Foundation.



DR. LAW

Robbie Law, MD, received the Lewis and Ruth Carpenter Teaching Award for Teaching Excellence in an Outpatient Setting. Dr. Law earned his medical school degree and completed his residency at OHSU. The award is given annually to a volunteer faculty member of the OHSU Depart-

ment of Family Medicine who is actively engaged and committed to one-on-one teaching in the ambulatory setting and is based solely on nominations from third- and fourth-year medical students. Dr. Law has been precepting since 1992 and was nominated by fourth-year medical student Matthew Sperry who spent a rotation with Dr. Law at the Dunes Family Health Care in Reedsport. After practicing in Reedsport since 1981, Dr. Law recently joined the staff at Lower Columbia Clinic in Astoria.



NATHAN DEFREES

Nathan Defrees, received the 2014 OAFP Outstanding Graduating Student Entering a Family Medicine Residency Award. Nathan has served on the OAFP Board of Directors for the past two years; first as the student-elect and then as the student director. Read more about Nathan on page 13.

Fourth year medical student, **Autumn Metzger**, received the Robert B. Taylor Family Medicine Award. The award honors Robert B. Taylor, MD, professor emeritus and former department chair, and is given to a graduating student each year who best exemplifies the qualities of the ideal family physician. Students are chosen based on scholarship, leadership and dedication to the Family Medicine as a specialty over the course of their four years at OHSU. Autumn, who will be entering residency at the University of North Carolina, is currently on a medical mission in Africa.



DR. EMORY

Sylvia Emory, MD, was installed on April 26 as the President of the Oregon Medical Association (OMA) at the OMA's Annual General Membership Meeting. Dr. Emory received her medical degree and completed her residency at OHSU. She is board certified in family medicine and currently practices at Westmoreland Medical Clinic in Eugene.

In addition to Dr. Emory, other OAFP members installed as OMA officers at the association's meeting included: **Nancy Hutnak, DO**, Baker City, OMA President-Elect and **Robyn Liu, MD**, Portland, Young Physician Trustee.

MOVERS AND SHAKERS



DR. WARREN

Amanda Warren, MD, returned to her roots when she recently joined the Providence Medical Group in Canby. After graduating from Canby High School (where her three children now attend), Dr. Warren received her medical degree from the University of Minnesota and completed her family medicine residency at Swedish Medical Center

in Seattle. She is thrilled to have the opportunity to help support families in her own hometown.



DR. TEGGLASSY

Zoltan Teglassy, MD, a family physician and internist who has been practicing for over 16 years, has joined the Samaritan Family Medicine Southwest Clinic in Corvallis. Dr. Teglassy received his medical degree at Semmelweis University of Medicine in Budapest, Hungary and completed his internal medicine and family medicine residencies at

MAV Hospital in Budapest and St. Elizabeth Medical Center in Utica, New York, respectively.

INTERESTING BUSINESS WE SHOULD ALL KNOW NEW OAFP BOARD MEMBERS ANNOUNCED



A new slate of officers was elected at the Annual Spring CME Weekend held in Portland in late April. The officers are **Liz Powers, MD**, Enterprise, President; **Lisa Dodson, MD**, Portland, President-Elect; **Daniel Paulson, MD**, Eugene, Vice President; **Kevin Johnston, MD**, Burns, Secretary; and **Peter Reagan, MD**, Portland, Treasurer.

Meg Hayes, MD, Portland, and **Michael Grady, MD**, Silverton, are the Delegates to the AAFP and **Glenn Rodri-**

quez, MD, Portland, and **Elizabeth Steiner, MD**, Portland, are Alternate Delegates to the AAFP.

Marc Carey, MD, PhD, Portland, is the Speaker of the Congress and **Nathalie Jacqmotte, MD**, is the Vice Speaker of the Congress.

In addition, three new board members were elected to the existing board (which includes **Mari Ricker, MD**, Portland, OMA Trustee; **Ruth Chang, MD**, Portland, Director; **Lance McQuillan, MD**, Corvallis, Director; and **Sarah Lamanuzzi, MD**, Klamath Falls, Director): **David Abdun-Nur, MD**, Grants Pass, Director; **Heidi Beery, MD**, Roseburg, Director; and **Robyn Liu, MD**, Portland, Director. **Bristol Schmitz** was selected as the Student Director.



DR. ABDUN-NUR

David Abdun-Nur, MD, has been practicing at Mountainview Family Practice in Grants Pass (the first Patient-Centered Medical Home in Oregon!) for the past 10 years. He has been an instructor at the OHSU School of Medicine since 2005.



DR. BERRY

Heidi Beery, MD, a graduate of the OHSU Cascades East Family Medicine Residency Program in Klamath Falls, joined the staff of Evergreen Family Medicine in Roseburg in 2012 after working for the Umpqua Community Health Center.



DR. CAREY

Marc Carey, MD, PhD, received his medical degree and doctorate in neuroscience from the OHSU School of Medicine and his residency at the Providence Milwaukie Hospital Family Medicine Program before beginning his practice at Providence Medical Group Southeast.



DR. JACQMOTTE

Nathalie Jacqmotte, MD, joined the staff of Northwest Primary Care, Sellwood Clinic, in 2002, where she practices full-spectrum family medicine. She received her medical degree from OHSU and completed her residency at the Tacoma Family Medicine Residency Program.

continued on page 26



DR. LIU

After completing her residency at OHSU Family Medicine & Preventive Medicine Residency Program, **Robyn Liu, MD, MPH**, was a staff physician at Greeley County Health Services in Kansas. Upon returning to OHSU in 2011, Dr. Liu became an Assistant Professor of Family Medicine where she provides full-scope family medicine at the Family Medicine Clinic at the Center for Health & Healing.



BRISTOL SCHMITZ

Bristol Schmitz, MS3, Student Director, was raised in Portland and graduated from Notre Dame in 2011 with a degree in mechanical engineering. Bristol has been involved with FMIG, EMIG, and has been a board member of the Oregon Rural Health Association and the student delegate to the AAFP Student and Resident Conference. He was also an OHSU Rural Scholar and recently received the Gary L. Lee, MD Memorial Scholarship for Compassion, Academic Excellence and Leadership. Upon completing residency, Bristol hopes to practice in rural Oregon.

HAVE AN ITEM FOR “MEMBERS IN THE NEWS?”

Family Physicians of Oregon welcomes short announcements about OAFP members and their clinics. If you have undertaken a practice move, have been the recipient of an honor or award, or just plain have interesting information to share, by all means, let us know! Tell us about your news and we will be sure to print it. Photographs are welcomed. Send submissions to:

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