Augusta University and the University of Georgia partnered to create a four-year medical education program in Athens to help alleviate a statewide shortage of physicians that threatens the health of Georgians. The Partnership Pulse is published bi-annually for alumni, friends, and the medical community of Augusta University and the University of Georgia.
From the Campus Dean

It has been a busy fall and winter at the Medical Partnership!

In August, we welcomed a new group of Medical College of Georgia students to the Medical Partnership campus. We can’t wait to see what amazing accomplishments they will have over the next four years.

We are continuing to prepare for the expansion of our class size from forty students per class to sixty students per class by the year 2021. Our first increase will happen this upcoming fall when we enroll 50 first year medical students to the Medical Partnership class.

As part of the expansion, our learning space in Russell Hall on UGA’s Health Sciences Campus received a major renovation in the summer of 2019. Enhancements included a new state of the art simulation center and clinical skills labs, renovated large classroom spaces for active learning, a larger library with natural light, five additional small group rooms, and additional office space for the increases in faculty and staff. You can see pictures of the renovated space in this issue of the Partnership Pulse. Students, faculty and staff are really enjoying the new, modern look and feel to the spaces in Russell Hall.

In October, we hosted an open house event to celebrate the class size expansion, and our current medical students offered tours of our new facilities to alumni and local community members. Both AU President Keel and UGA President Morehead were able to attend, as well as MCG Dean Dr. David Hess and our local State Representative Houston Gaines.

This past fall and spring we welcomed excellent new clinical and basic science faculty to our campus to assist with our additional teaching needs for our class expansion. Hats off to our search committee for all their work over the past year, and to Drs. Boegehold and Morris for chairing this important committee. Their work will continue this year as we add more faculty and staff to support our final enrollment of 240 students at the Medical Partnership.

In conclusion, we’ve had some amazing accomplishments over the past year! Every member of our team is vital to our success, vital to our day-to-day work and vital to us continuing to thrive. Our community physicians are the backbone of our two years of clinical curriculum offered at the Medical Partnership – thanks to them we are able to deliver an excellent, high quality education here in northeast Georgia. Lastly, thanks to our leadership at Augusta University and the University of Georgia for their vision and support as we work to address Georgia’s physician shortage.

Enjoy this issue of the Partnership Pulse – I look forward to sharing our continuing progress!

Michelle A. Nuss, MD
Campus Dean for the AU/UGA Medical Partnership

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Class of 2023 joins the Medical Partnership

Row 1: Rachel Gerald, Sophia Sakers, Diane Park, Pomi Yun, Samantha Schoenl, Jasmine Patterson, and LaDonya Jackson.

Row 2: Tom Layman, Kisa Watson, Alexis LeBlanc, Annelise Bonvillain, Maryam Mansoura, Emmy Thornsberry, and Emily Blom.

Row 3: Sophie Zacharewicz, Zachary Adams, Dina Teshager, Syed Hyder, Kathryn Harbin, and Matthew Adams.

Row 4: Oliver Davidson, Dev Adams, Robert Korb, Laura Pride, Blaine Spivey, Tyler Crawford, and Lily Francis.


Row 7: Tanner Martin, Charlie Crossnickele, David Kang, and Sebastian Kohl.
The Augusta University/University of Georgia Medical Partnership welcomed 40 new Medical College of Georgia students to the Athens campus this past semester.

The Class of 2023 represents a wide variety of faces and backgrounds. The group is split almost perfectly with 22 males and 18 females. They hail from cities all over the world, with most coming from the state of Georgia.

UGA is the most represented college with 14 of the new students holding an undergraduate degree from the university. Georgia Tech (6), Emory (4), Berry College (1), Georgia College and State University (1), Georgia Gwinnett College (1), and Mercer (1) were the other represented Georgia institutions. The other 12 in the class got their education out of the state. They come from as far west as Utah State and as far north as Williams College in Williamstown, Massachusetts.

While keeping up with studies and excelling in the classroom are important, they also know a school-life balance is key. The Class of 2023’s hobbies are just as unique as their backgrounds: they enjoy hiking, baking, reading Harry Potter, traveling, visiting botanical gardens, watching The Office, and playing sports.

The overall MCG 2023 class is just as diverse as the Medical Partnership campus—with over 3,100 applications, only 230 were admitted. There are 106 males and 123 females, and they come from 55 different colleges and universities. The overall GPA of the class is 3.8 with an average MCAT score of 515.

These distinguished and diverse students exemplify the future of healthcare in Georgia, and they are ready to face the upcoming challenges of medical school. The Class of 2023 has finished the first semester of medical school, and we at the Medical Partnership are excited to see what they will accomplish during their time in medical school at the Athens campus.

*Picture above: The ‘silly photo’ is an on-going tradition for first-year medical students at the Medical Partnership. First, the students gather for a ‘serious’ professional group photograph (seen at left) and then follow it up with one that is fun and showcases their personalities.*
Can a cat improve your grandma’s life?
Research indicates that having a cat decreases loneliness by 36%.

A collaborative study out of Athens is trying to determine if having a pet can improve the mental state of older adults. Foster cats are being placed with people 60 and older, and researchers are evaluating the impact of the companionship.

Research has shown that seniors with pets are 36% less likely to report loneliness than non-pet owners, experience reduced stress, have fewer doctor visits, have reduced blood pressure and risk for heart disease, and develop a sense of purpose that comes with helping a homeless cat.

"Much suffering among older people living alone is the result of boredom, and feelings of helplessness and loneliness," said Dr. Sherry Sanderson, an associate professor at the University of Georgia College of Veterinary Medicine, who is conducting the study. "Animal companionship is a known antidote to loneliness."

The Foster Cat Research Study is a collaboration between the College of Veterinary Medicine, the Augusta University/University of Georgia Medical Partnership, UGA College of Public Health, UGA's Institute of Gerontology, Athens Community Council on Aging, Athens Area Humane Society, and Campus Cats Rescue. This study is funded by the Human Animal Bond Research Institute, with supplemental support from Purina PetCare.

Researchers began recruiting volunteers in January 2018, and the study will continue into 2020. Data will be collected and analyzed for an additional 12 months after the study concludes. Each volunteer participates in the study for four months, and the adults can choose to adopt their foster cat or allow them to be adopted by someone else.

All cats come spayed/neutered, vaccinated, dewormed, treated for fleas and microchipped. Cat supplies, litter, and food are provided free of charge during the study.

Dr. Don Scott, site clerkship director of geriatrics and palliative care at the AU/UGA Medical Partnership, is the geriatrician on the study, and he hopes they see a transformation in the adults. "In my experience in working with older adults, and as an animal lover myself, the importance of their relationship with their animal companions, their pets, has always been extremely important," said Scott. "For many, especially those older adults who live alone, it is the key relationship in their lives, their source of love and caring, and their bond to allow their own expression of love and caring. Older adults’ pets are often the most important thing in their lives."

Sanderson said not only do the adults gain to see benefits from this study, the cats do as well.

"Fostering cats provides a much-needed service to the community as some shelters strive to become low kill/no kill shelters and are often in need of foster homes as a way to bridge the time from intake to adoption into a permanent home," she said.

If you are interested in volunteering in the study or would just like to know more, please contact Sherry Sanderson (sherrys@uga.edu) or Don Scott (donscott@uga.edu).
On October 7, students, residents, and guests gathered in recently renovated Russell Hall on UGA’s Health Sciences Campus for the Medical Partnership’s 9th annual Research Symposium.

The AU/UGA Medical Partnership research symposium is an opportunity for students to expand their scholarly experiences and learn how medical knowledge is derived. They learn how to frame a testable hypothesis, write a research proposal, carry out a project, evaluate scientific and medical data, and write up their results. It provides them with an opportunity to communicate their findings through presentations at local, regional, and sometimes national scientific meetings.

Both Medical Partnership students and residents from the AU/UGA Medical Partnership Internal Medicine Residency Program and Piedmont Athens Regional had the opportunity to showcase their research work. The majority of participants are second-year medical students who completed their research in the summer between first and second year. Thirty-one students and three residents presented their findings.

Second-year student Grace Kim tackled an issue that has gotten much attention in the public eye: the opioid crisis.

Kim did her research in Atlanta at Emory Hospital and Grady Memorial Hospital. She looked at how the opioid prescribing behavior of emergency room physicians could contribute to the epidemic.

“I am interested in orthopedic surgery and emergency medicine, and I thought this research was very interesting and relevant, especially in light of the growing opioid epidemic in the U.S.,” said Kim.

Kim found out that low intensity orthopedic residents involved in care of patients seen by high intensity emergency department providers significantly decreased quantity of opioids given, thus effectively mitigating the high intensity prescribing habits of the emergency department provider.

Kim enjoyed seeing everyone’s hard work showcased at the Research Symposium.

“I loved being able to see and hear about what my peers worked on over the summer,” she said. “There was definitely a huge diversity in the projects, making it even more interesting.”

For a full list of presentations and abstracts, please email the Office of Communications and External Affairs at mpmedia@uga.edu.
STUDENT RESEARCH PROFILE: 
Ty Frix

Prognostic Value of Fractionation Mapping During Pulmonary Vein Isolation Using the Advisor HD Grid Mapping Catheter

This summer, as part of the Medical Scholars Program, Jacob Lawing and I worked with Dr. Kent Nilsson, a local electrophysiologist. Dr. Nilsson sees and treats patients with many ailments, but one of the more prominent diagnoses is atrial fibrillation, AFib, a condition that affects 3 to 6 million people in the United States each year. 90-95% of atrial fibrillation cases are caused by erroneous electrical signals propagating from the pulmonary veins into the left atrium of the heart. Pulmonary vein isolation, therefore, is the cornerstone treatment of AFib as it creates scar tissue to physically separate conduction pathways from the pulmonary veins into the left atrium, electrically isolating the heart. Despite durable PVI, many patients have recurrences secondary to the combination of poor atrial substrate and non-pulmonary vein triggers. The current literature suggests that erratic and fibrotic cardiac-substrate could be the cause of these recurrences.

What question were you seeking to answer?
Jake and I were trying to determine if cardiac-substrate health could be mapped and scored during pulmonary vein isolation (PVI), and if such a scoring system could indicate possible patient recurrence risk and symptomatic outcomes.

Why did you choose this topic?
Cardiac anatomy and physiology were my favorite topics of first year, but I wasn’t quite sure that it was the area I wanted to do research in for the M1 summer… then we met Dr. Nilsson. He took the hardest part of cardiac physiology, electrophysiology, and made it approachable and interesting. I chose to work on this topic purely because of how awesome he and his team are. They did everything they could to make our experience worthwhile. From day one, Dr. Nilsson had us in the Cath-Lab observing procedures and asking questions of his team – the best way to learn in my opinion. He took time to explain things to us, going through all the fine details to ensure that we fully understood the presenting problem and treatment.

How did you study this question?
We conducted a retrospective chart review of 61 patients who had PVI done by Dr. Nilsson over the past year. We looked at recurrence prevalence, systematic improvement and termination of drug therapy to determine patient outcomes. We then plotted those outcomes against cardiac Fractionation Index, a score created by Dr. Nilsson and his team to quantify the health of cardiac substrate. We hypothesized that higher fractionation scores would lead to worse prognostic outcomes.

What did you learn through your research?
Our preliminary evaluation of the data supports that patients with higher fractionation indexes do have higher recurrence risks. More follow-up is needed to uncover long-term findings, but the initial data is very interesting.

Who stands to benefit from this research?
The hope is that future patients with atrial fibrillation will benefit from this research. If it can be shown that highly fibrotic areas of intra-atrial cardiac tissue support high recurrence risk, then these areas can be targeted for ablation during the initial PVI procedure, thus lowering the risk for recurrence. We believe that catheter and mapping system used by Dr. Nilsson and his team have that ability.

What are/what would be the next steps in your research?
The next steps are to increase duration of follow-up and size of the patient population. We need to continue to follow the 61 patients currently in this study while enrolling new patients as Dr. Nilsson performs more PVI procedures. Our median follow-up time is 111 days for our current patient population; we would like to increase that to 1 year to help with long term data validity.

Frix and Lawing presented their research findings at the Atrial Fibrillation Symposium in Washington D.C. in January.
1. From July 29–August 2, our incoming M1s took part in orientation before classes started on August 5. They had lunch with alumni, attended the annual Dean’s Reception, and ended the week with a cookout hosted by the M2s. The week of orientation allows students to not only hear from faculty and staff and get a feel for the campus, but also gives them time to bond with their classmates before the first day jitters set in.

2. Rachel Gerald and Lily Francis show off their pumpkin carving skills for Halloween. M1s carved the pumpkins and left them on display outside of Russell Hall.

3. As part of their weeklong orientation, the M1s got to tour the main UGA campus. A tour of UGA is not completed without a stop at Sanford Stadium.

4. University of Georgia Provost Jack Hu joined a faculty meeting in October where he conversed with faculty and discussed plans for the future. He was joined by Vice Provost for Academic Affairs Marisa Pagnattaro and Sam Fahmy, Director of Public Relations for Academic Affairs.
5. On December 3, a group of our M2s toured the Georgia Museum of Art. The tour was used as a way to heighten their observational skills and clinical reasoning.

6. Miya Oliver and Tobi Akindoju present a check to Mercy Clinic for almost $3000.00. The funds were raised by the annual SGO Wine and Cheese Fundraiser.

7. The White Coat Ceremony was held on Saturday, October 19 in Augusta. Our M1s were officially presented their white coats, and Ben Daniel presented a speech as acting M4 class president.
First-year student presents research to USG Board of Regents

Fist-year medical student Donya Jackson is a rare find. Before beginning her journey in medical school, the San Jose, California native already completed her PhD.

“I chose to become a future MD/PhD because I want to be a leader in the field of clinical trials, where I can ensure the introduction of new and innovative therapeutics and treatment strategies to improve the health of patients,” said Jackson. “I am passionate about discovering and/or developing new solutions to improve diseases.”

Jackson received her undergraduate degree from Utah State University, her master’s at Ohio University, and then made her way to the University of Georgia for her PhD. Her PhD is from the College of Pharmacy and is in clinical and experimental therapeutics with a focus on inflammation, particularly in stroke and dementia.

In April of 2019, Jackson entered her thesis, Re-balancing the Diabetic Brain to Prevent Dementia, into the UGA Three Minute Thesis competition.

“The thesis looked at the impact of comorbid diseases on stroke outcomes, specifically focusing on how diabetes worsens the development of post-stroke cognitive impairment,” said Jackson. “I also tested the re-purposing of a therapeutic currently in clinical trials to prevent this development.”

By the end of the competition, Jackson had been awarded second place.

For her second-place finish, Jackson not only won prize money, but she also got to present her thesis to the Board of Regents and presidents from the Universities of Georgia.

The presentation took place on October 16 at the University of Georgia Center for Continuing Education.

Jackson said giving her presentation to such an esteemed crowd was an honor that she truly enjoyed.

“It felt great! I enjoy giving talks, so I was excited and honored to share my science with them,” said Jackson.

Along with her presentation, Jackson got to attend the President’s Luncheon where she networked with the Regents, UGA President Jere Morehead, and former Atlanta mayor, Kasim Reed. She also spoke about the AU/UGA Medical Partnership to the group and expressed how excited she was to be at the Athens campus.

And Jackson’s work was not done yet—on February 21, she made the trip to the Regents’ Scholarship Gala at the St. Regis Hotel in Atlanta where she spoke about need-based scholarships in Georgia and also discussed the Medical Partnership in more detail.

“I’m excited to be here, and I hope I made the Medical Partnership proud,” said Jackson.
Nine members of the Augusta University/University of Georgia Medical Partnership family were honored at the Georgia Chapter of the American College of Physicians conference on October 25-27 at Chateau Elan.

Six members of the Medical Partnership Internal Medicine Residency Program were selected to give abstract presentations, and all presented posters focusing on a clinical vignette subject. Clinical vignettes tell a patient’s story and illustrate a rare disease, important teaching point, and/or uncommon presentation of a disease.

The Georgia ACP takes submissions each year for abstracts. Anyone who is currently a member of ACP, enrolled in a Georgia Internal Medicine program, or attending medical school in Georgia can submit an abstract based on one of three topics: clinical vignettes, research, and quality improvement. Once the abstracts are submitted, submissions are blinded and distributed to the judges. The ones with the highest scores are invited to present at the conference.

The posters of the attendees with the highest scores were invited to do an oral presentation. From the Internal Medicine Residency Program, residents Dr. Xaimarie Santiago and Dr. Jamila Pham were selected for this outstanding honor.

Dr. Pham received second place for her presentation.

The three additional attendees from the Medical Partnership were awarded for their outstanding excellence.

Matt Schwartz, a fourth-year student, won the 2019 Outstanding Medical Student in Volunteerism and Advocacy Award. The award is based on the recipient’s selfless contributions to others.

AU/UCA Medical Partnership Campus Dean, Dr. Shelley Nuss was awarded the 2019 Mark Silverman Award - an award given to someone who exemplifies devotion to his or her patients as well as students, residents, and young physicians.

Dr. Tom Wells also won the Community Faculty Award.

“To be given this award is truly an honor,” said Nuss. “With three winners from our campus, I’m grateful that our work at the Medical Partnership is not going unnoticed.”

Schwartz said he was surprised he received the award.

“My involvement in the Athens community is something I do out of personal enjoyment, so to be nominated for this award was something I hadn’t ever expected,” he said.

Georgia Chapter Winners from the Medical Partnership:
Matt Schwartz - 2019 Outstanding Medical Student in Volunteerism and Advocacy Award
Dr. Michelle Nuss - 2019 Mark Silverman Award
Dr. Tom Wells – 2019 Community Faculty Award

Residents who gave poster presentations:
Dr. Joshuam Ruiz Vega: “A Rare Case of Balint Syndrome”
Dr. Shabtab Khan: “Secondary Renal Amyloidosis Due to Chronic IV Drug Use”
Dr. Caridad Padron: “Unusual Presentation of Primary Hepatic Diffuse Large B-Cell Lymphoma”
Dr. Meet Shah: “Atypical cause of recurrent gastrointestinal bleeding”

Residents who gave oral presentations:
*Dr. Jamila Pham: “Likely Adrenocortical Carcinoma in a Patient Presenting with Hypogonadism” (Won second place)
Dr. Xaimarie Santiago: “Once upon a Prion”
by Krista Richmond

To Sarah Gibbs, practice makes perfect.

And as coordinator of the Augusta University/University of Georgia Medical Partnership’s simulation center, she’s helping medical students get the practice they need as they start their careers.

“It gives them the opportunity to practice in a low-pressure environment, and it allows them to make mistakes and learn from them,” she said.

Gibbs facilitates the logistics and operations of the simulation center. Students and faculty can participate in high-fidelity simulations, using simulation “manikins” such as Laerdal’s SimMan, to practice medical scenarios they might encounter. The center has adult, child and infant simulation manikins that can replicate a variety of emergency and nonemergency conditions. Gibbs helps plan the various scenarios and can control the simulation manikins remotely, even talking through them, to make it as realistic as possible.

On a given day, Gibbs assists faculty in running two simulations that last 30 minutes each, with a maximum of eight students (four students participating and four students observing, then reversing) in each session. The students and instructors debrief between the simulations. In January, up to 40 students participated in simulations on a given day, thanks to recent renovations of Russell Hall on the Health Sciences Campus.

“‘They also help the students improve their patient communication,’ Gibbs said.

In addition to communication skills, she said the simulations also serve to build their decision-making skills. The simulations also give the instructors a chance to provide much-needed feedback to the students.

Gibbs said the students are very eager to learn and are open to that feedback.

“You can tell that they want to present themselves professionally, from the way they dress to the way they speak to their general preparedness,” she said.

The students are presented with a new patient case at the beginning of their simulations, so they have little to no time to prepare and must think critically. They are meant to teach students how to respond during times of stress and answer questions accurately. It also helps them practice translating complex medical language to terms that patients, especially children, can easily understand.

Every simulation is different, and Gibbs also learns from each one. She takes notes so that she can troubleshoot before the next simulation. She likes working with the ever-changing technology of simulation and still finds medicine and science fascinating.

Gibbs received her bachelor’s degree from Kennesaw State University, where she majored in exercise science. She knew she wanted to go to graduate school and decided on UGA’s clinical exercise physiology program in the kinesiology department of the College of Education. She then did an internship at Piedmont Athens Regional that she said opened her eyes to the applications of her studies. Gibbs plans to work with patients in the future.

Gibbs is also a medical service officer in the Army Reserve. She got her start in UGA’s ROTC program.

“Being an officer in the Army has always been a goal of mine,” she said. “The leadership training and experiences that I get in the Army really allow me to be challenged.”

In her free time, Gibbs enjoys photography, particularly landscapes and architecture, and plans to compete in an Olympic-distance triathlon. It would be her fifth triathlon but her first at that distance.

For now, Gibbs is helping prepare students for the long haul of starting their medical careers.

“‘There’s a lot of work behind the scenes and preparation that goes into the simulations,’ she said.”
A Code Blue sounded in the hallways of the University of Georgia Student Health Center on Friday, August 9.

Doctors, nurses, nurse practitioners, pharmacists, physicians’ assistants, and other medical staff members rushed to the patient with equipment ready to go.

But this was not any normal Code Blue. This exercise was part of a "Code Blue Drill" where University Health Center staff members practiced medical emergency situations with simulation-based equipment.

The event was a collaboration between the University of Georgia Student Health Center, the Augusta University/University of Georgia Medical Partnership, and Athens Technical College and featured simulation manikins from the Medical Partnership campus.

Simulation manikins (including Laerdal’s SimMan, used in this drill) can perform human-like acts such as talking, blinking, and having a heartbeat. They can also be programmed to reenact ailments like a seizure and heart attack.

Once the Code Blue was sounded, University Health Center clinicians had to figure out what exactly was wrong and the best way to treat SimMan.

The drill featured three different medical emergencies: a cardiac arrhythmia in a 22-year-old, a seizure in a 20-year-old, and a severe systemic allergic response in a college-aged student.

The team had to assess each situation and figure out how to best work together to help the patient. The biggest goal of the exercise was to build teamwork and perfect individual roles before going into an actual emergency situation.

Once the scenarios were completed, Dr. Aimee Martin, Campus Director of Simulation at the Medical Partnership, led a discussion to go over what went well and what could be improved.

Finbar Woitalla, DO, Lead Physician at the Health Center, said the event was a huge success.

“The realism of the scenarios and the manikin helped infuse a true sense of urgency and tension that are needed to help us learn and grow from this kind of training,” said Woitalla.

Len DeRamus, MPAS, PA-C, Instructor of Emergency Medicine, said this event was the first of its kind at the Health Center.

“This opportunity allowed them to practice emergency drills and treatment of certain conditions that the simulator can mimic with a high degree of realism,” said DeRamus. “Additionally, we reviewed team roles and dynamics during these drills as that improves care delivery during a crisis.”

“Emergencies are chaotic by nature, and it is critical that the team function above the fray to optimize efficient, accurate care of the patient,” said Woitalla. “This session reminded us all of that important aspect of emergency care and how to quickly establish and maintain this vital team function.”

The staff members were so impressed with the practice that they expressed a desire to run the exercise at least twice per year.

“The universal sentiment was that we have more of these events as it can only strengthen us more,” said Woitalla.
The Augusta University/University of Georgia Medical Partnership is advancing plans to expand its class size from 40 students currently to 60 students by 2021 as part of a broader strategy to address Georgia’s critical shortage of physicians.

“As the state’s only public medical school, it is our duty to lead the way in addressing the state’s health care needs,” says Dr. David Hess, MCG dean. “Expanding the class size at the partnership campus in Athens and soon at the main campus in Augusta is one way we are working to ensure Georgia has not only enough doctors to face its growing shortage of physicians, but a healthy economy as well.”

To accommodate the larger class size in Athens, Russell Hall on UGA’s Health Sciences Campus underwent a $3 million renovation this past summer. The primary focus for the project was to enhance the student learning experience. The enhancements include a new state-of-the-art simulation suite and clinical skills lab, classroom improvements to allow for active learning, additional small group learning spaces, and various types of spaces for studying and collaboration.

“The growing Medical Partnership on the University of Georgia campus demonstrates the commitment of the state’s flagship public university to serving the people of Georgia,” said S. Jack Hu, UGA’s senior vice president for academic affairs and provost. “From agriculture and engineering to public health and physician education, the University of Georgia is committed to improving the lives of Georgians.”
Of the state’s 159 counties, 63 currently have no pediatrician, 75 have no obstetrician/gynecologist, and nine counties have no doctor at all, according to recent data from the Georgia Board of Healthcare Workforce. Georgia also faces a number of health challenges, including high infant mortality rates, high rates of obesity, heart disease and diabetes, and it is consistently ranked among the worst states for health outcomes.

“According to the latest data by the Association of American Medical Colleges, the projections of physician shortages in the United States are anywhere between 47,000 and 122,000 by the year 2032,” said Dr. Michelle Nuss, campus dean at the AU/UGA Medical Partnership. “Our nation’s population is continuing to grow, and we are living longer lives. With this comes an increased need for physicians of all specialties.”

There are currently 40 students per class in the Medical Partnership, and that number will grow to 50 students per class in 2020, then 60 in 2021 and every year thereafter, bringing the total enrollment in Athens to 240 medical students by 2024. In order to provide for the growth of students, the partnership campus plans to add 12 additional faculty members and six additional staff members over the next two years. In Augusta at MCG’s main campus, there are plans to grow the class size from 190 to 240 by 2028, bringing MCC’s total class size to 300 and total enrollment to 1,200.

The planned expansion to 60 students per class in Athens and 240 per class
in Augusta was part of the initial recommendation of the 2008 report by the nationally recognized consulting firm Tripp Umbach, which called for an expansion of medical education in Georgia and the establishment of the AU/UGA Medical Partnership campus.

In 2009, MCG and the University of Georgia partnered to create a four-year medical school campus in Athens to grow the number of physicians produced by the state’s only public medical school and help address physician shortages across the state and region. Georgia is already seeing results. Of the 70 Medical Partnership students who have completed their residency training, 25 are currently practicing in Georgia and many of those are practicing in rural parts of the state.

“I am grateful for the support and leadership from the Medical College of Georgia at Augusta University and the University of Georgia, along with our state leaders, to bring the student class expansion and construction project forward,” said Nuss. “I’m also extraordinarily grateful for our community partners in the northeast Georgia region.”

Open House

An open house to celebrate the renovations to Russell Hall and the AU/UGA Medical Partnership class expansion took place on October 14 on UGA’s Health Sciences Campus. This event was open to all community members in the Athens area to showcase the newly designed space and provide the opportunity to learn more about the Medical Partnership campus.

Both President Morehead from UGA, and President Keel from Augusta University gave remarks, as well as MCG Dean, Dr. David Hess and the Medical Partnership Dean, Dr. Shelley Nuss. Georgia State Representative Houston Gaines was also in attendance. (pictured on page 16)

New Simulation Center trains medical students and local professionals in simulation-based medical education and procedural skills

As part of the renovations to Russell Hall for the Medical Partnership class expansion, the Simulation Center more than tripled in square footage – going from 880 square feet to over 3300 square feet.

Along with an increase in square footage, a new Audio-Visual System was installed that is integrated into a simulation education management system. The highlights of this system include 360-degree cameras in all simulation rooms, microphones, and a central control room that each simulation room is connected to. This allows facilitators to run 5 simulation scenarios at one time therefore allowing up to 20 students participate in a single simulation at once. This was a huge increase from the 5 student per simulation number that the Medical Partnership offered previously.

This increase in space also allows the Medical Partnership faculty to hold ultrasound training workshops for the M1s and M2s. Each workshop consists of 20 students and 5 ultrasound instructors at one time.

The Simulation Center includes:

- 5 Simulation Bays
- 1 Skills Lab
- 1 Debriefing/Conference room
- 9 High-fidelity Patient simulators
- 35 task trainers
- 7 Ultrasounds
The simulation center more than tripled its space, allowing students to learn in individual bays that feel more like a hospital setting.

Above: Kathryn Harbin and Kyle Ulversoy practice on a SimMan in one of the new sim bays. Left: Shan Xue performs an ultrasound on SimMan.
For this preceptor highlight, we’d like to introduce you to Dr. Brian Maloney. Preceptors are licensed physicians who take in medical students during their third and fourth year rotations. Preceptors volunteer their time to mentor the students and give them personal instruction during the length of their rotation at the facility.

What’s your hometown? Tiffin, Ohio
Age: 57
Education:
- 1980 – 1986 Northeast Ohio University’s College of Medicine, Cum Laude (combined 6 years B.S./M.D.) & Kent State University Honors College—Bachelor of Science—Cum Laude
- 1986 – 1987 Internship General Surgery Internship Health Science Center, Syracuse, New York

A little about yourself:
I live on a small gentleman’s farm in Milton, GA with my wife of 32 years, Diane. We have three grown daughters, Tara, Meghan, and McKenzie, who were the catalyst for leaving the city life and moving to a farm. When they were in middle school and very serious about their equestrian sport, they wanted a horse. Having grown up in rural Ohio and being familiar with farm life, we decided that this would be a good way to teach them responsibility and the values of hard work and cooperation. On our farm we have horses, miniature horses, donkeys, sheep, chickens, and turkeys. Tara and McKenzie went on to ride for UGA’s Varsity Equestrian Team and Meghan is a physician assistant. Once the girls left home, I began riding lessons and have competed in show jumping. I have always been an avid runner and have run the Boston Marathon four times. My wife and I have a large garden and we enjoy cooking and canning together and sharing the fruits of our labor.

Why did you choose the plastic surgery route?
With my rural upbringing, I originally wanted to be a family practice doctor. They really got to know their patients, they delivered babies, they set bones—they were a priest and healer all in one! I attended a combined six-year BS/MD program Northeast Ohio College of Medicine. During my med school rotations, I saw that many of those procedures had been taken over by specialists. I knew that I really enjoyed doing procedures and was fortunate to have an amazing rotation in a private otolaryngology practice with Dr. Jack Devany, who was a great mentor. I was attracted to the diversity of the procedures; microscopic ear and skull base, vocal cord, neck, pediatric, and facial trauma. Upstate Medical Center was a regional referral center for trauma, and I gained so much valuable experience there. I then decided that I wanted to pursue this passion of rebuilding faces even further through a facial plastic fellowship.

How did you find your way to Georgia?
My one-year facial plastic fellowship was in Birmingham, AL and near the completion, the group asked me to join their practice. It was an honor, and I practiced there for five years until the practice was sold to a management company. At that point, we decided to make the move over to Atlanta in 1996.

Why get involved with the Medical Partnership?
I have always been involved in physician education at the residency or fellowship level and authored over 60 articles and book chapters. So many have given so much to me, that there is no question, but to pay it forward. When I learned about the Medical Partnership, I was very excited to get involved. After two years of studying books, most students benefit from a boost of excitement. That is what I hope I provide in my wound closure, suture class and rotation. I want the students to see and feel the excitement of someone who loves the practice of medicine and hopefully encourages them of the bright days of medicine ahead.

What is the most rewarding thing about your job?
Our true self-image is on the inside. Mother nature plays tricks on the outside appearance which can impact how others respond to us. My job is to match up the outside with the inside giving the patient their sense of oneness back. The smiles and genuine appreciation from the patients are rewards beyond imagine.

Why did you decide to be a preceptor?
We always told our children to find something that you love to do, work hard, and be the best that you can be at whatever you decide to do. I truly love what I do and feel blessed to be a physician. I feel a strong commitment to share with, advise, and teach our future doctors. I am where I am because many doctors gave back to the system. Being a
preceptor is a very rewarding way for me to give back. It is such an honor to have students spend two weeks of their medical education in my practice.

**What is the most rewarding thing about being a preceptor?**
The most rewarding thing for me about being a preceptor is having the opportunity to share the art of medicine with the students. Giving the students a good foundation of facial anatomy and surgical methods and procedures is important, but I hope to share more. I hope they learn by seeing patients at all of the different stages that medicine is an art, that physicians are teachers, that medicine is a process and that it takes a team to give the very best care to patients. I hope that I will be a good example and inspire the students to want to pay it forward themselves one day.

**Advice for anyone thinking of pursuing med school:**
I encourage everyone interested in going into medicine to get a job in the healthcare field. When I was 16, I told my father that I was interested in medicine, and he discouraged me at first. After all, no one in our family was in medicine, and I am sure he was worried about the long and expensive road that it would be. But he wanted me to get some experience with it, so, soon I began work as an orderly in the small hospital in our community. It was such a fantastic experience, and I knew after the first day, that medicine was for me. Medicine is the greatest field to pursue - having the ability to diagnose and to treat someone in need is an amazing gift!

**Advice for those in med school:**
Congratulations on choosing this path! When faced with making decisions for your patients, always treat them as family members. If you can use this as your standard, you will make great choices and your patients will love you! Demonstrating genuine compassion to our patients and their concerns is a two-way street, which is one of the greatest rewards in medicine. Try to take advantage of everything that the Medical College of Georgia has to offer throughout your education.

**Awards and Achievements:**
- 2016 MyFaceMyBody USA finalist for Plastic Surgery
- Named a 2014, 2015, and 2016 Top Health, Beauty & Fitness Expert by The Atlantan Magazine
- Best Plastic Surgeon Facial Liposuction 2014
- Best Self Magazine’s Best Plastic Surgeon
- Vitals Patients’ Choice Award
- Top 300 Injectors in the entire United States
- Great Injector on GreatInjectors.com
- Has appeared on the Discovery Channel, TLC, and Discovery Health

"So many have given so much to me, that there is no question, but to pay it forward."
Since its inception in July of 2010, the Simulated Patient Program has been helping students at the AU/UGA Medical Partnership get hands-on experience by working with real people in possible situations they may encounter in their career.

The patients started out as volunteers, giving their time freely to further the education of our medical students.

In 2019, it was decided that the program make the transition to a paid position and be renamed the Standardized Patient Program. On December 3, 2019, Standardized Patients (SPs) were officially hired as part-time University of Georgia staff members.

“We decided to upgrade to a ‘professional’ program in order to enhance the program to a level where students can trust that their training is among the best in the nation,” said Jo Albritton, Campus Director of Standardized Patient Program.

SPs are individuals from the community who portray patients for the purpose of teaching students and assisting them to improve on their bedside manner and other clinical skills. SPs can also give feedback to students to help them interact with future patients.

While at times SPs can present their own medical history during interactions, most often SPs are given a case and are scripted to give specific responses and behaviors necessary for realistic behaviors. All ranges of personalities and moods are presented during the interactions—sometimes the scenario calls for the SP to act unpleasant, sometimes their character must be argumentative, and sometimes the students have a case where they must practice giving the patient bad news.

“SPs give medical simulation in a controlled setting to provide the students with an environment where they can learn clinical skills that they need to learn in order to become good physicians,” said Albritton.

Anyone can apply to become an SP. All ages, races, genders, and physical types can become part of the program. After filling out an application, there is an interview round to see if applicants are suitable for the position. Background checks are also conducted to make sure the applicant is a good fit. Once a candidate is hired, they go through training to prepare for cases.

Albritton said a few things have changed since the program has moved to paid.

“The training is much more intense and much broader, including training on anatomy, physical exam techniques, and history taking techniques, as well as communication skills,” she said.

There has also been an uptick in interest in the program since the role now pays an hourly wage.

“We are getting people calling and emailing every week to apply,” said Albritton.

If you are interested in becoming a paid Standardized Patient, please contact Tina Powers, Standardized Patient Program Coordinator, at 706-713-2642 or email tepowers@uga.edu.
SPOTLIGHT ON STANDARDIZED PATIENT:

Terry Arthur

For this edition of the Partnership Pulse, our Standardized Patient spotlight is highlighting Terry Arthur. Terry has worked with the program since its inception in July of 2010.

The program (previously Simulated Patient Program) began as volunteer only. It recently transitioned into a paid program in 2019.

Standardized Patients (SPs) are individuals from the community who portray patients for the purpose of teaching medical students within an educational program. SPs allow students to develop excellent bedside manner, data-gathering skills, and other clinical skills such as physical examination.

Unlike a real patient, SPs have the opportunity to provide the medical student with valuable feedback to help improve their ability to interact with patients. Training with SPs has proven beneficial in helping medical students learn to become excellent physicians.

Standardized Patient Program Coordinator Tina Powers is thrilled Arthur agreed to stay on board and be part of the revitalized program.

“Terry always has the best attitude and sets a great example for others,” said Powers. “We love working with her, and she will continue to contribute to the education of medical students.”

Tell us a little about yourself:

I am 77 years young. I grew up in Erwin, Tennessee, a small town similar to Mayberry. My father died when I was five, and I lived with my mom, my sister, aunts, uncles, cousins, and grandparents. It was a simple and happy life. I graduated from high school at age 16 and went to visit my sister who taught Physical Education at West Georgia College in Carrollton, Georgia. I stayed on and went to two years of college and transferred to the University of Georgia where I also got a degree in physical education. I taught one year at Jefferson High School and coached basketball. I retired, got married, and started my family. I had two daughters and a son. I eventually started working again. I taught nursery school, middle school, adult education classes and went back to UGA to get a master’s and specialist degree in middle school and counseling. My husband died in 1987 and I was hired to be a counselor in middle school in Athens where I worked for another 20 years.

Fun Fact: I’ve traveled to all of the continents and every state in the US. If I am not traveling, I am watching UGA sports, especially basketball.

How did you hear about the Standardized Patient Program? I heard about the Simulated Patient program from a friend who highly recommended it.

Why did you want to be an SP? I started volunteering when I retired after working as a teacher and school counselor for 30 years. I had worked with children and decided that I would like to focus on adults but still use my counseling skills. I saw this experience as an opportunity to help medical students learn how to communicate with patients more effectively.

What have you enjoyed about being an SP? I really enjoy meeting the students and seeing how open they are to listening to you and sharing themselves with you.

Why do you continue to be an SP? My favorite thing about working with the students is seeing how they are so different and express themselves. I just love watching them improve their communication skills. I think some of my best memories are observing the feedback and interactions between the excellent instructors and students. It is obvious that this staff is committed to helping these students become all they can be. I feel confident that these young students will become excellent doctors, and I will feel proud to have been a small part of that process.
Medical Partnership receives Mobile Clinic Van grant from CVS
Since 2018, the Medical Partnership/Athens Free Mobile Clinic has been serving the underinsured and uninsured of Athens-Clarke county and surrounding areas.

The clinic, run by Augusta University/University of Georgia Medical Partnership physician faculty and assisted by medical students, delivers care to communities with barriers to access to health care.

The idea began in the minds of Zac Adams (pictured at right) and Hamzah Ali, both now students at the Medical Partnership who were getting their Master's degree in Public Health at the time. The two met Dr. Suzanne Lester (pictured at left), Family Medicine Site Clerkship Director, in 2017, and she helped the dream become reality.

"By bringing free healthcare to patients, we are able to meet a primary care need by evaluating and treating them," said Lester. "It also allows us to provide continuity of care as well."

They have seen over 500 patients since opening in March of 2018.

Once the clinic got underway, Adams said they quickly realized how difficult it was to transport all the equipment to the sites.

"We were storing all of our equipment inside the school, loading up someone's personal truck each time we went out, and then loading everything back into the school at the end of every clinic," said Adams.

The time spent doing all the loading and unloading would take so long that it would limit the time spent with patients. If they were short on volunteers, it made it even more difficult.

After attending a conference that highlighted mobile clinics, the team saw that several clinics had large vehicles where supplies could permanently be stored.

The clinic also joined the National Association for Free and Charitable Clinics (NAFC) and started applying for grants through the organization to fund a van.

After applying for other grants and getting denied, Adams soon took notice of a $20,000 NAFC/CVS grant.

Since 2015, the CVS Health Foundation has donated nearly $8 million to NAFC to increase access to quality care and support the management of chronic disease, and they awarded $3 million in grants to 130 free and charitable clinics in 2019.

Adams applied for the grant in the fall of 2018.

In December of that same year, Adams received word that the Medical Partnership clinic would be one of those lucky grant recipients.

"I immediately called Dr. Lester to inform her of the good news, and we quickly realized that we were getting ready to turn the dreams of having a van into reality," Adams said.

"I was overjoyed," said Lester. "I was also thankful that the work we had already been doing on the mobile clinic was seen as valuable enough by the CVS Foundation to warrant this generous grant."

After being custom built and outfitted for nine months, the new van arrived at the Medical Partnership in fall of 2019.

Even though it’s only been in use for two months, the van is already benefiting the clinic and the volunteers.

"By shortening our loading in and out and set up time by having all of our gear stored in the van, it gives us at least an hour to two hours of extra time seeing patients," said Lester.

The new van also allows the clinic to treat even more patients than before.

"In the past, we could often only fit enough materials for two exam rooms. Now we can carry enough equipment to fully operate four exam room tents," said Adams.

The van has also provided a controlled environment where volunteers can perform point of care tests and draw labs to deliver to the hospital. This allows patients to get their blood work done at the mobile clinic instead of finding their own transportation to get their labs completed.

"This will help us eliminate transportation as a barrier to care in not only the primary care aspect, but also in providing high quality care by using lab values to supplement our visits," said Adams.

For the future, the team is hoping to be able to convert the van into a mobile exam room. This would allow them to offer services such as gynecological exams—something that could not have been performed in the past due to privacy and terrain/weather issues.

"While we have operated in the rain before, it is difficult to work in muddy fields and still maintain the same quality of healthcare that you could receive in an office setting. By having a mobile exam room, we would be able to operate more efficiently in all weather conditions," said Adams.

With the new van, Adams is excited about the possibility of helping even more people in the area.

"There are so many chronic conditions that we could treat and lower the burden of disease for people in Athens. We all share a passion for helping the uninsured people in Athens and finding a way to bring healthcare to them," said Adams.
GHHS interview with Ronke Olowojesiku

The Gold Human Honor Society strives to recognize achievements from some of their fellow classmates, and they recently chose to highlight Ronke Olowojesiku. Olowojesiku is a fourth-year student who obtained her MPH degree from Harvard.

The following interview was conducted and written by M4 student Kyle Royalty.

Ronke, where are you from? Where did you go to school? What did you do there?
I was born in a small town in southwest Nigeria, and I then spent most of my life growing up in Acworth, Georgia. I graduated from UGA, class of 2014, and I majored in Genetics and Spanish. At UGA, I was very involved in the International Student Life office where I served as a student organization leader, interacting with exchange students and planning cultural events on campus.

What made you choose the Athens campus?
After being at UGA for four years, I initially thought I wanted to be in a different city for medical school. But after looking at the curriculum and taking a tour of the Athens campus, I realized from my experiences at UGA that I wanted something more intimate. I was interested in getting to know everyone and learning in a small group environment. Specifically, I liked how much of our learning was centered on patient care from the very first day of first year.

What made you choose to pursue an MPH degree?
I've had an interest in global health for a while, at least since high school. In undergrad, I worked with a professor at the UGA College of Veterinary Medicine, conducting research in Panama through CURO (Center for Undergraduate Research Opportunities), and my interest grew more with that experience. I knew that the combined MD/MPH was an option before medical school and as I grew in my medical knowledge, the idea of getting an MPH still lingered, confirming that it was still something important to me. I spoke with several faculty members and administrators who encouraged me in this path as well. Dr. Scott Richardson, Campus Associate Dean for Medical Education, especially helped me realize that I would not have the chance later to pursue this interest in this manner, having a full year dedicated to public health study without clinical or other obligations. What finally made me pull the trigger was the Global Health/Infectious Disease Interest Group trip to the CDC in March 2017. We got to meet officers in the Epidemic Intelligence Service (EIS) program and see how their background in public health was instrumental in their fields. Turns out that one of them had Dr. John Francis, Campus Associate Dean for Student and Multicultural Affairs, as their attending which was a fun surprise for the day! Small world.

Was it an easy process? How were the logistics of applying for an MPH degree?
It wasn't exactly easy to apply outside of your home institution, as only some programs will take outside MD candidates for their combined curriculum. And it was tough amidst third year rotations finding time to compile the application while studying for shelf exams. However, it was very helpful to go through the application process with a friend, Stephanie Hernandez, who was also applying to MPH programs. You apply through the Schools of Public Health Application Service (SOPHAS), and it's a form similar to AMCAS for medical school, only you have to write an individual and unique personal statement for each program you're applying to, so it takes more time. Like AMCAS, they have a verification service, so it's important to get your application in early. Almost all schools will accept your MCAT score if you are applying MD/MPH; however, some schools only give scholarships based on GRE scores, so I ended up taking it. But overall, because I was so interested in the MPH, the application process was worth it. I applied to four programs and was fortunate to get into all four.

Where did you go to get your MPH degree? How was it? Would you recommend it?
I went to the Harvard T. H. Chan School of Public Health in Boston, MA. I got my degree in Quantitative Methods (Epidemiology and Biostatistics). It was a 9-month program, which is a lot shorter than other accelerated MPH programs, which are typically 11 months. I really enjoyed my cohort—they are a group of individuals very passionate about public service and it was neat to see how everyone sort of inspired each other to aim high in what they hoped to accomplish with their work. There were around 50 students who were also MD students, and we had a great time exploring Boston together and trying not to worry about the transition back to fourth year. Additionally, Boston is a very academic city, so there are plenty of opportunities to do research at various institutions. Overall, I would highly recommend it.
What was your focus?
I sought out projects related to child health and infectious diseases, and I was fortunate to find a pediatrician doing work on neonatal sepsis in Ethiopia. I started working with a dataset from a prospective birth cohort and plan to finish analysis as a fourth year during a pediatric research elective. In addition to this project, I participated in a qualitative study looking at factors contributing to infant deaths in Zambia using narratives from verbal autopsies. In this study, we looked at various factors; for example, were danger signs like high fever or inconsolable behavior present prior to death, was there a delay in presenting to care, were parents waiting till morning to seek help etc., and why? I learned a lot from both experiences, and I will be sharing some of the results from the verbal autopsy analysis at the American Academy of Pediatrics Conference in October.

How will you use this as a physician? How will this impact your career? What is your declared specialty?
I am applying in pediatrics which is a field I feel lends itself well to the practice of public health. As most children aren't in a position to advocate for themselves, pediatricians serve as major advocates for their patient population. While I'm not exactly sure what my career will look like, my MPH experience did make me more cognizant of the fact that doing work for the public good will be an integral part of it. Being Nigerian-American, as well as speaking Spanish and having worked with Spanish-speaking patients have led me to consider future work in West Africa and/or Latin America. My ideal picture of my career would be to marry clinical practice with community work, and I am excited to see how that plays out.

What have you missed most about Athens?
I missed the food. The food scene is way better in Athens! And I missed the excitement of college football in the fall.

Thank you very much for your time, Ronke. ¡Fue un placer!
1. M2s take part in rock climbing with their GUNners interest group. The GUNners Health and Fitness Interest Group strives to promote physical and mental wellness with including fitness programming and talks about mental health.

2. Our residents and mobile clinic representatives hosted booths at the Cheers to Your Health fair. Visitors could have their blood pressure taken by our residents, learn about stroke warning signs, and even schedule a visit to the mobile clinic.

3. Our M2s once again took part in the annual IPE (interprofessional education) event held at the Classic Center. They were joined by the UCA College of Pharmacy, UCA College of Social Work, and the Augusta University College of Nursing. The event is a way to show multiple professions how to better work together in the healthcare field to serve patients and the community.
4. Three of our students, Peter Bodunrin, Megan Chesne, and Taylor Tabb, took part in an MCG panel at the Special Collections Library in September. The panel was organized to answer questions of UGA undergrads who have an interest in applying to medical school and are considering MCC. The afternoon was spent networking with Augusta campus students and staff and answering questions from the undergrad crowd.

5. Dean Shelley Nuss, faculty, staff, and students wave during the Athens campus shoutout as part of the Medical College of Georgia State of the College Address given by Dean David Hess on January 9.

6. Festive M1s pose on the steps of Carnegie Library. This photo was used on our annual holiday card.
FACULTY


W. Scott Richardson, MD, Campus Associate Dean for Medical Education, had the 5th addition of his book, Evidence-Based Medicine: How to Practice and Teach EBM, published into a Chinese translation. Richardson was also selected by the Gold Humanism Honor Society as the recipient of the Leonard Tow Humanism in Medicine Award. This award recognizes the faculty member who demonstrates both clinical excellence and outstanding compassion in the delivery of care, and who consistently shows respect for patients, their families, and healthcare colleagues. Richardson will be presented the award at the Hooding Ceremony in Augusta in May.

Ken S. Rosenthal, PhD, Professor of Immunology, will be releasing the 9th edition of Medical Microbiology on March 15. Dr. Rosenthal wrote 32 of the 79 chapters covering basic bacteriology, immunology, and virology. He has been a contributing author since the first edition. Previous editions have been translated into Greek, Spanish, Portuguese, Italian, Chinese, Korean, Romanian, and other languages. authored:

Ken Nilsson, MD, Associate Professor of Medicine, presented: Nilsson K. Contemporary workflows in pulmonary vein isolation. Poster presented at: The Atrial Fibrillation Symposium; January 23-25, 2020; Washington, DC.

W. Scott Richardson, MD, Campus Associate Dean for Medical Education, had the 5th addition of his book, Evidence-Based Medicine: How to Practice and Teach EBM, published into a Chinese translation. Richardson was also selected by the Gold Humanism Honor Society as the recipient of the Leonard Tow Humanism in Medicine Award. This award recognizes the faculty member who demonstrates both clinical excellence and outstanding compassion in the delivery of care, and who consistently shows respect for patients, their families, and healthcare colleagues. Richardson will be presented the award at the Hooding Ceremony in Augusta in May.

Julie K. Gaines, MLIS, Campus Director for AU/UGA Medical Partnership library, Thom Gaddy, PhD, Associate Professor of Cellular Biology, Eve Gallman, PhD, Associate Professor of Neurology, and Michael Russell, PhD, Associate Professor of Physiology, all received the Medical Library Association – Hospital Libraries Section Professional Recognition Award for Research recognizing the following paper:


Nathan Walter and Emily Morris published:


Ronke Olowojesiku presented:

Join us in welcoming our new Faculty & Staff

Kim Bosecker
Credentialing Coordinator
Office of Educational Enrichment

Miguel Jurado, MD
Site Clerkship Director of Palliative Care, Assistant Professor of Medicine
Office of Curriculum

Ken Rosenthal, PhD
Professor of Immunology
Office of Basic Sciences

Miguel Jurado, MD
Site Clerkship Director of Palliative Care, Assistant Professor of Medicine
Office of Curriculum

Missy Kinney
Senior Accountant
Office of Finance & Operations

Amit Shah, MD
Assistant Professor of Medicine
Office of Graduate Medical Education

Tim Brown, PharmD
Professor of Pharmacology
Office of Curriculum

Ariel VanLeuven, PhD
Assistant Professor of Cellular Biology
Office of Basic Sciences

Melissa Chiz
Administrative Associate II
Office of Curriculum

Brett Magnier, MD
Assistant Professor of Family Medicine
Office of Curriculum

Missy Kinney
Senior Accountant
Office of Finance & Operations

Adam Evans
IT Professional Associate
Office of Informational Technology Services

Michael Petzar, MD, MS
Associate Professor of Pathology
Office of Basic Sciences

Thomas Weiner, MD
Assistant Professor of Family Medicine
Office of Curriculum

Katrina Keefer, MPA
CEO of AU Health

Katrina Keefer was named executive vice president for health affairs at Augusta University and chief executive officer for Augusta University Health System, effective since July 15. She received her bachelor’s degree in business administration from Huntington College and her master’s in public administration from New York University.

Keefer previously served as senior vice president and chief financial officer for Baptist Health, an affiliate of the University of Alabama at Birmingham Health System. As the chief executive officer for AU Health, Keefer oversees the 478-bed Augusta University Medical Center, the 154-bed Children’s Hospital of Georgia, Roosevelt Warm Springs Rehabilitation and Specialty Hospitals, Georgia Correctional Healthcare, Georgia War Veterans Nursing Home and more than 80 outpatient clinics and ambulatory sites.

Xinyun Lu, MD, PhD
Chair of Department of Neuroscience and Regenerative Medicine

Dr. Xinyun Lu was named the chair of Department of Neuroscience and Regenerative Medicine. She began her new position on July 1. Lu is also a Georgia Research Alliance Eminent Scholar in Translational Neuroscience at MCG. She specializes in therapies for depression and PTSD and is pursuing innovative ways to understand the development and progression of Alzheimer’s. Lu has been consistently funded by the NIH for more than a decade and is corresponding or first author on nearly 40 peer-reviewed journal articles. She earned a medical degree from Binzhou Medical College in China; a doctorate in pharmacology from Washington State University and completed a postdoctoral fellowship at the Mental Health Research Institute of the University of Michigan Medical School in Ann Arbor.

www.medicalpartnership.usg.edu
In 2010, the White Coat Scholarship Initiative was launched with a goal of increasing access to public medical education in Georgia. The fundraising teams at Augusta University and the University of Georgia are working together on this critical program, and we need your help.

Among the first academic priorities of the White Coat Scholarship Initiative is to increase scholarships to attract talented students while also removing the burden of student debt, which can discourage students, especially those of limited financial means, from entering the medical profession. For those who do enter and complete medical school, high levels of student debt are a disincentive to serve in medically underserved areas or to choose specialties where the need is greatest, such as primary care. We need your help to ensure that financial obstacles don’t deter students from serving a state with an urgent need for more physicians.

Donations can be made online or with the enclosed envelope, and all donations are tax-deductible.

UPCOMING EVENTS

**Match Day 2020:**
Friday, March 20th
UGA Health Sciences Campus, George Hall

**Wine & Cheese Benefit:**
Friday, March 27th
6:30-8:30 PM
UGA Carnegie Library

**MCG Graduation Hooding:**
Friday, May 8th 2:00 PM
Bell Auditorium in Augusta

**AU Graduation Ceremony:**
Friday, May 8th at 2:00 PM
James Brown Arena in Augusta

**Medical Partnership Community Celebration:**
Sat., May 9th at 10:00 AM
UGA Hotel & Conference Center

Keep a look out for more upcoming events on our social media!