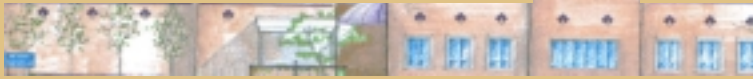


Department of Family Medicine



Fall 2004



Highland Family Medicine Center to relocate

The Highland Family Medicine Center has grown to serve more than 17,000 patients, many of whom are residents of the South Wedge. Hampered by an aging and inefficient building, when the old AAA building became available, we found the ideal solution to outgrowing our original site at 885 South Avenue.

On June 30th, Highland Family Medicine held a kick off celebration for the renovation phase at the 777 South Clinton Avenue site.

Strong Health leadership, members of the New York State legislature, donors, physicians, employees, community leaders, and the media gathered to celebrate with a chicken barbecue and live music reminiscent of the 1960's and 1970's.



Chair Tom Campbell, MD, (front center) and his staff celebrate the groundbreaking at the new home at 777 South Clinton Avenue.

The new Highland Family Medicine Center will be closer to many of its patients, have great parking, is located on a convenient bus route, and will remain near Highland Hospital. This renovated site will become a "state of the art" Family Medicine Center with electronic health records, advanced or open-access, community outreach, proactive chronic disease management and group visits. It will continue its nationally renowned work on doctor-patient relationships, family-oriented primary care, and the elimination of disparities in health care.

The Highland Family Medicine Center will be moving in January 2005 and will be called the Highland Family Health Center. Joining it will be the Highland Apothecary, Cornhill Internal Medicine, and a Strong Health Laboratories collection station.

Tom Campbell chairs Family Medicine

In March 2004, **Thomas L. Campbell, MD**, ('82) was appointed the William Rocktaschel Professor and Chair of the Department of Family Medicine of the University of Rochester School of Medicine and Dentistry, as well as Associate Director for the new University of Rochester Center for Primary Care.

Dr. Campbell is nationally recognized for his work on the family in medical practice and the influence of the family on health. His NIMH monograph, "Family's Impact on Health," has been an influential review of the research in this area.

He co-authored the textbook, *Family-Oriented Primary Care*, with Susan McDaniel and David Seaburn. The second edition will appear shortly, with additional co-authors Alan Lorenz

('91) and Jeri Hepworth. Campbell has also authored or co-authored more than 100 journal articles and book chapters. He and Susan McDaniel are co-editors of the periodical, *Families, Systems & Health: The Journal of Collaborative Family Healthcare*.

Tom graduated Summa Cum Laude from Harvard College, receiving his medical degree from Harvard Medical School. He first joined the Department of Family Medicine as a resident in 1979. After completing his residency in Family Medicine and a fellowship with George Engel, MD, Dr. Campbell joined the faculty of the Department of Family Medicine and rose through the academic ranks, achieving full Professor in 1998.

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Reflections from the Chair



This is an exciting time to become the chair of the Department of Family Medicine at the University of Rochester. This year marks my 25th year in the Department (I arrived as a resident in 1979), and I cannot think of a time when there were so many opportunities for Family Medicine at the University and in the community. It is a great honor to be able to serve the department.

This newsletter captures some of the exciting events and opportunities. Family Medicine and Primary Care are receiving tremendous support and recognition from the leadership of the Medical Center and Medical School. Our new Senior VP and Vice Provost of Health Affairs, C. McCollister (Mac) Evarts, MD, has been stressing the importance of primary care to academic health centers and has established the Center for Primary Care. Our department will play a critical role in the new Center.

After more than a decade of effort, we will be moving into our new “state of the art” practice in early 2005. We are developing an innovative new practice model and will implement an electronic health record (Touchworks) over the next two years. Under the leadership of Steve Schultz, MD, ('95) our residency is flourishing and, despite national declines in medical student interest in Family Medicine, the program successfully filled with ten superb interns in the 2004 Match. Part of our success has been due to a very successful International Health Program, lead by Doug Stockman, MD, ('89). We passed our RRC review with flying colors and received a full 5-year re-accreditation for our residency.

“Highland Hospital is flourishing as the community hospital in partnership with Strong Memorial Hospital and continues to be an ideal training site for our residents. We strive for excellence in all four missions of our department...clinical care, education, research, and community”.

Highland Hospital is flourishing as the community hospital in partnership with Strong Memorial Hospital and continues to be an ideal training site for our residents.

We strive for excellence in all the missions of our department. In our new practice site, we will offer the highest quality of care using innovations to primary care (advanced access, chronic care models, group visits) with a particular focus on providing care to vulnerable and underserved populations and on reducing health disparities.

Our residency will continue to be one of the top programs in the country, offering the best of a university program located at an excellent community hospital. We will strengthen the program with our new clinical site, expand our international health and community medicine programs, and build on our areas of longstanding strengths.

We will continue to grow our Rochester Center to Improve Communication in Health Care and our Reproductive Health Program. We will play a central role in the development of a new Primary Care Research Institute (within the Center for Primary Care) and expand our Practice Based Research Network.

With all the exciting developments in our department and at the Medical Center, the future of Family Medicine in Rochester looks very positive and exhilarating. We are pleased to share these developments with you in this newsletter.

Thomas L. Campbell, MD
William Rocktaschel Professor and Chair of Family Medicine

Susan H. McDaniel appointed Associate Chair of Family Medicine

Susan H. McDaniel, PhD, professor of Psychiatry, has been named Associate Chair of Family Medicine at the University of Rochester Medical Center. McDaniel will focus on faculty development and academic affairs.

McDaniel has served as interim associate chair of Family Medicine since 2002. She is an expert in behavioral and mental health problems in primary care and has taught family medicine residents and fellows to care for the psychosocial problems of their patients. McDaniel joined the Family Medicine faculty in 1982 and Psychiatry in 1984.

In addition, McDaniel serves as Director of Family Programs at the Wynne Center for Family Research at the UR. She trains and teaches mental health professionals about medical family therapy, an approach that concentrates on the reciprocal effect of illness or disability on family relationships.

McDaniel is an author of 72 peer-reviewed journal articles and 11 books, including the textbook, *Family-Oriented Primary*



Care. She and Campbell are co-editors of the periodical, *Families, Systems & Health: The Journal of Collaborative Family Healthcare*.

The recipient of many distinguished awards, in 1995 she was named the American Psychological Association Family Psychologist of the Year and won the 2000 American Family Therapy Academy's award for Innovative Contributions to Family Therapy. Susan received an award for Distinguished Achievement in Teaching from the Association of Medical School Psychologists this July.

McDaniel's educational background includes a BA, magna cum laude, in psychology and anthropology from Duke University, a PhD in clinical psychology from the University of North Carolina at Chapel Hill, and a post-doctoral fellowship in family therapy from the Texas Research Institute of Mental Sciences in Houston, Texas.

Family Medicine creates International Health Track (IHT)

The University of Rochester's Department of Family Medicine has always been an advocate for the poor and underserved. Many of our graduates work with the underserved both in the U.S. and overseas.

Several faculty, medical students, and residents have expressed a strong interest in meeting the health needs of the poor in less developed countries. To meet this need, the Department created an International Health Track (IHT). Two or more residents in each class can be in the IHT.

In addition to the residency training work, IHT members have a curriculum focusing on international health topics. Each resident spends two to four months overseas expanding skills in international health. The UR Department of Family Medicine has partnered with the University of Cincinnati's Department of Family Medicine to create a permanent project site in rural Honduras. Throughout their 12 years of work in Honduras, the University of Cincinnati group, known as Shoulder to Shoulder, has created a successful Honduran program and clinic. UR



Resident Steve Kim in clinic at Camasca, Honduras

residents and faculty have traveled to Honduras twice in the past year. In addition to caring for the underserved in Honduras, we will create a clinic and permanent presence there.

When not in Honduras, Department residents and faculty get a taste of international health by caring for newly arrived refugees. Rochester has an active refugee resettlement program and resettles up to 700 refugees a year. The Brown Square and South Avenue sites care for the largest number of refugee patients in Rochester, coming from at least 18 countries from around the world. It is very rewarding to ease the suffering of so many who have not been used to receiving health care. Working with refugees helps them start a productive life in a new home while protecting the U.S. population from unusual infectious diseases.

The Family Medicine Department is excited by these dual initiatives and anticipates expansion of these great ideas as resources and funding allow.

Residency Program fills for 2004 despite national trends



Intern Nao Sakurai during orientation

There was dancing in the halls of the Family Medicine Center on March 21, 2004, when we learned that we had filled our program with top-notch residents for our 2004 intern class!

Our Residency program continues to interview and recruit excellent candidates despite national trends showing that U.S. seniors' interest in Family Medicine has declined from 49% to 47.4% with the national fill rate at only 79%.

Word continues to spread about the University of Rochester and Highland Hospital Family Medicine Residency Program and all that it has to offer.

We are grateful to all alumni who, through word and practice, send interested students our way!

Laurie Donohue, MD ('94)
Associate Residency Director

"We filled our residency program...despite declining national trends...with the national fill rate at only 79%."

Highland Family Medicine conducts diversity training for staff

The Health Research Services Administration (HRSA) awarded the department of Family Medicine a three-year Title VII grant in July 2003. As part of the Department's commitment towards diversity awareness and education, as well as fulfilling the goals of the HRSA grant, the first of many diversity training workshops was held on June 10 – 11, 2004. Family Medicine faculty and first year residents attended, along with individuals from the University of Rochester School of Nursing and the Monroe Plan for Medical Care.

James Deary, EdD, and Deborah Perry, both faculty from the Institute for Urban Health in New York City, facilitated the workshop. Diversity education and awareness are so critical to their organization that they have mandated training for all faculty and staff who work for the Institute.

Concurrently they also have an active diversity committee

that educates, advises, and advocates for faculty and staff who are confronted with diversity issues in the workplace. It was a great opportunity to have them lead this workshop and to collaborate on initiatives in this area.

Family Medicine continues to incorporate its belief in eliminating disparities into its daily health care practices and greatly appreciates the participation and funding from the Area Health Education Center (AHEC), the University of Rochester Nursing Program, and the Monroe Plan for Medical Care that supported this diversity training initiative.



Interns Todd Webb & LeWanza Harris learn to work together

Huff Challenge kicks off Family Medicine Capital Campaign

During the new Highland Family Health Center “ground-breaking” and renovation celebration, Mary Lou and Jerry Huff, longtime benefactors to Highland Hospital and Family Medicine, generously offered to give \$1 to Family Medicine for every \$2 pledged to Family Medicine or Highland Hospital, up to a \$250,000 gift.

These efforts will help pay for the new building and the innovative programs that it will house. Faculty, staff, alumni, and the community will be engaged in this campaign, and our department is confident in its success.



(left to right) Jerry Huff, Dr. Tom Campbell, and Mary Lou Huff unveiling the sign announcing the Highland Family Health Center. The Huffs have been longtime financial supporters of Family Medicine.

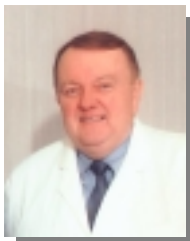
New Center for Primary Care established at Medical Center

Signaling its commitment to the practice of primary care, the University of Rochester Medical Center has created a new Center for Primary Care, a move that will unite the work of hundreds of community internists and family physicians affiliated with Strong Health.

Medical Center CEO, C. McCollister Evarts, MD, said that the new Center will strengthen the work of all faculty and staff by increasing the integration and coordination of primary care practices across the Medical Center.

“Primary care physicians are at the heart of any clinical enterprise. By creating the Center for Primary Care, we are uniting all of our different general and family medicine entities and providing them with opportunities and support to help them further their careers, improve their practices, and create a more seamless approach to patient care,” he said.

The Center for Primary Care comes at a critical juncture in the primary care field in Rochester and across the nation. Fewer and fewer medical students are opting to specialize in primary care, while a significant number of practicing physicians are expected to retire in the next decade, setting the stage for a shortage.



Raymond J. Mayewski, MD, heads up the new Center while continuing his role as vice president and chief medical officer for Strong Health. Over the next year, Mayewski will build the Center’s infrastructure, focusing on educational opportunities for medical students and residents, research programs for patients and staff, and improvements in the delivery of patient care.

“This new Center for Primary Care will help us to create an environment where primary care practitioners can work and thrive and find great personal satisfaction,” Mayewski said. “It will provide many of our physicians with great opportunities for teaching and mentoring and generate an energy and enthusiasm for

help our medical students become interested in the field of primary care practice.”

The new Center will have a dedicated research unit, partly in response to government and foundation funding sources placing emphasis on strong primary care networks to help fulfill pressing research and community outreach efforts.

Tom Campbell, MD, Chair of Family Medicine, and Wally Johnson, MD, Associate Chief of Medicine for Primary Care, will serve as Associate Directors of the Center.

Jay Dickinson named Medical Director for Rushville Health Center

Jay Dickinson, MD, recently returned to the Department following a nine-month academic leave, during which he acquired new skills in qualitative inquiry and completed initial qualitative analysis of encounters from Ron Epstein’s study of Patient Centered Care (PCC). Modeled upon complex interactive systems theory, he plans to use this analysis to understand better the diverse interactive styles of primary care clinicians and their effect upon clinical outcomes. While on leave, he also completed a six-year leadership assignment with a national project to study the future of the discipline of Family Medicine.

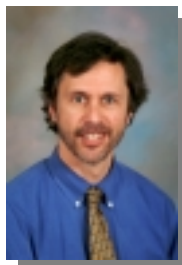


Services for the Rushville Health Center in Rushville, NY. With this appointment, he returns to a lifelong interest in the community and clinical challenges of rural primary care. As a federally designated Rural Health Center, the Center offers dental, medical, and chiropractic services to a population of diverse payor mix, ethnicity, and culture (i.e., farm workers, Amish, and others). He will help the Center to develop many of the principles and features of the future practice of Family Medicine as outlined in the recently published Future of Family Medicine Report. He also expects to build both teaching and practice-based research programs in cooperation with the University of Rochester Center for Primary Care. He will remain with the Department on a part-time basis.

The Rochester Center to Improve Communication in Health Care

Patient/physician communication can affect health and health care and has evolved over the years in response to societal needs. A major step in this evolution is the Rochester Center to Improve Communication in Health Care – whose research themes emphasize “Building Relationships and Eliminating Disparities” – under the direction of **Ronald Epstein, MD** ('87). Ten faculty and 20 research staff members form a multidisciplinary team. They work to improve communication in health care settings by implementing novel interventions, educating health care providers and consumers, and conducting research on health care communication, with special emphasis on underserved and vulnerable populations.

“Good communication is essential to health care at all levels – physicians to physicians, physicians to nurses, and physicians to other providers, as well as researchers and clinicians who work together to get communication issues translated into practice,” says Epstein. Effective communication can improve health outcomes of acute and chronic conditions, reduce the impact of racial, ethnic, disease-specific, and socioeconomic factors in care, and improve the effectiveness of prevention and health promotion. This center substantially expands the scope and magnitude of programmatic research by creating a vehicle for collaboration

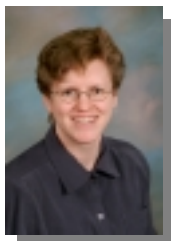


among various departments and centers at the University of Rochester to study communication and health.

The mission of the Center is to improve health and health care through improved communication. The scope of the Center includes communication among health care professionals, patients, family members, and diverse communities to optimize health and health care. As Epstein explains, the time is ripe for research in this area, given the critical mass of research on communication and health care and increased understanding among federal funding agencies and community groups. While communication gaps are evident in the general population, they are more pronounced among people with low literacy, limited English proficiency, disabilities, and low socioeconomic status in stigmatized groups, including people with HIV infection and in minority populations.

Grants already underway include a study assessing how white doctors speak differently with white and black adolescents, the influence of direct-to-consumer advertising of prescription medications, whether patient-centered care reduces health care costs, increasing patients' trust in their physicians, and the influence of HMOs on health disparities and costs. The Center, a 5,000 square foot building, is located at 1381 South Avenue in Rochester, NY.

Spotlight on faculty—Welcome home, Colleen



Colleen Fogarty, MD, ('95) returns to the University of Rochester Department of Family Medicine as residency faculty and Family Medicine physician at Brown Square Community Health Center after being away from Rochester for eight years.

Upon receiving her BA in Chemistry from Cornell University, Dr. Fogarty served one year as a Jesuit Volunteer, working as a counselor/advocate for low-income families in Venice, California. Her experience working with marginalized and impoverished families motivated her to pursue a career in medicine, enrolling at the University of Connecticut School of Medicine, whose excellent focus on primary care further confirmed her interest in working with underserved individuals. Her introduction to community health center work began with a summer AMSA Health Promotion/Disease Prevention project doing prenatal education and case management with migrant farm workers in Northwest Michigan.

As a resident at the University of Rochester Department of Family Medicine, she practiced at Brown Square Health Center with a focus on young women and their families. After residency, Colleen spent a fourth year here as Co-Chief Resident with Steve Schultz, MD, while practicing part-time at Rushville CHC and doing coursework in the Family Therapy Training Program.

She accepted a staff position with Oak Orchard Community Health Center at the Albion office working with Drs. Charles King and Alfred Daniels, working closely with the seasonal and migrant farm worker population while maintaining a busy maternity practice for nearly three years.

Colleen and her husband, Jeff Sciortino, relocated to Cambridge, MA, where she was recruited to design and direct the psychosocial medicine curriculum for the new Boston University Residency in Family Medicine. During her tenure, she also taught family concepts to the residents, coordinated resident Balint and support groups, and developed linkages with mental health clinicians to facilitate more collaborative care models. Dr. Fogarty also worked with other BU faculty to increase skills with psychosocial teaching didactics and in precepting.

Colleen received an AAFP Advanced Research Training Grant which allowed her to complete coursework for her MS in Epidemiology and Biostatistics at Boston University School of Public Health. She recently completed her MS degree with a thesis entitled, “Depression and Post-Traumatic Stress Symptoms Among Abused Women: Comparing Abuse Exposure During Childhood, Adulthood, and Both Childhood and Adulthood.” She has worked on practice-based research in mental health as well as qualitative projects dealing with resident well-being in a new residency program.

After receiving a recruiting call from Westside Health Services, and investigating opportunities within the Department of Family Medicine, Colleen and Jeff decided to move back to this area. Rochester's high quality of life, coupled with many existing personal and professional connections, called them back here. Colleen will be working with the residency as a regular preceptor as well as working on the cultural competency curriculum. She will continue to develop her academic and research interest in interpersonal violence and primary care mental health.

Nation's first Center for Deaf Health Research starts in Rochester

The University of Rochester Medical Center, working with many community partners, received an unprecedented \$3.5 million CDC grant to conduct the nation's first comprehensive health studies of deaf or hard-of-hearing individuals. To prevent disease and improve overall health in this population is the primary goal of the Rochester Prevention Research Center: National Center for Deaf Health Research (RPRC/NCDHR).

This five-year project, funded by the Centers for Disease Control, begins in September, 2004. Initially researchers will convene deaf community focus groups; plan the best research methods to survey men, women and children; raise awareness among deaf people of opportunities to get involved in voluntary health studies; and build programs that will train doctors and break down existing communication barriers.

Thomas A. Pearson, MD, PhD, MPH, (Senior Associate Dean for Clinical Research and Chair of the Department of Community & Preventive Medicine) is the project leader. The research relies on a vast collaboration. Deaf and hearing experts are included from the UR, such as co-investigators Robert Pollard, PhD, director of the university's Deaf Wellness Center, and **Steven Barnett, MD**, (fellowship 1994-96) whose career as a Family Medicine physician has focused on deaf health research. Also included are experts from the National Technical Institute for the Deaf (NTID), a college of Rochester Institute of Technology; Rochester School for the Deaf (RSD); Finger Lakes Health Systems Agency; The Health Association; and the Monroe County Department of Health. Other Rochester family physicians involved with the NCDHR include **Timothy Malia, MD**, (residency 1993-96, chief resident 1996-97), and Carolyn Stern, MD.



Steven Barnett, MD, Timothy Malia, MD, (Lifetime Health) and Spencer Phillips (attorney with the Public Interest Law Office of Rochester) converse during the press conference announcing the NCDHR.

An external advisory committee chaired by T. Alan Hurwitz, EdD, (Vice President of RIT and Dean for NTID) will have representatives from Gallaudet Research Institute and the International Federation of Hard of Hearing People. The full team consists of 25 funded individuals, plus a small army of support staff.

In winning this grant, the UR and its partners join an elite group of 28 other medical centers funded by the CDC to establish research centers for disease prevention.

Medical literature shows that, aside from hearing loss itself, little is known about the health status of the deaf and hard of



Kim Carden interprets as Steven Barnett, MD, discusses the research mission of the NCDHR during the press conference announcing the CDC grant.

hearing population. Even rudimentary data on health behaviors, risk factors, and diseases are unavailable, health experts say.

Communication barriers may contribute to the problem. Many deaf people communicate through American Sign Language (ASL), which has different grammar and syntax from English. Others communicate through speech-reading, writing, speaking, and other English-based methods. But few health care providers are proficient in ASL or understand how to communicate appropriately with deaf patients.

The two Co-Principal Investigators, Bob Pollard, PhD, and **Steve Barnett, MD**, have focused their careers on health care needs of the deaf. Steve became interested in working with deaf people while a resident at the University of Wisconsin. He took a sign-language course at a deaf club, where he learned much more than how to sign. "I couldn't communicate with anyone," he says. "For them, being deaf wasn't something that needed to be fixed. It was part of who they were."

Steve then helped set up health-education workshops led by fellow residents for the deaf community. He came to Rochester in 1994 for a Family Systems Medicine Fellowship. His goal was to learn about the unique family dynamics of people who use sign language, since the vast majority have hearing parents and give birth to hearing children. In 2002, Steve became an assistant professor in the Department of Family Medicine and, from his contacts, has helped to foster the community-based collaboration that will ensure that the new Center truly meets the needs of the deaf community.

Congratulations to Drs. Pearson, Barnett, and Pollard, and the entire Rochester community! We look forward to the work of the NCDHR. For more information, please email Steven Barnett <Steven_Barnett@URMC.Rochester.edu>.

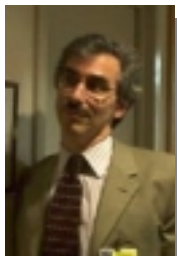
Rochester is a unique place for such an historic initiative. As home to NTID and RSD, the area has one of the highest concentrations of deaf people in the United States. Rochester has approximately three times the density of deaf people than other cities in New York State, with an estimated 10,000 - 15,000 Rochesterians who communicate in ASL. Nationally more than 4.9 million people cannot hear or understand speech, and approximately 28 million people have some degree of hearing loss.

Faculty Activity



Rick Botelho, MD, has published the second editions of his books, *Motivational Practice: Promoting Healthy Habits and Self-care of Chronic Diseases*, for health care practitioners, and *Motivate Healthy Habits: Stepping Stones to Lasting Change* for the general public. He has also written a low literacy version of this mutual aid and self-help guidebook called *My Healthy Habits Journal*. Visit www.MotivateHealthyHabits.com for more details and to experience a sample of an online learning program or to watch a video demonstration.

Ronald M. Epstein, MD, ('87) has been appointed as the new Associate Dean for Education Evaluation and Research. He will be evaluating some of the innovative curricular programs at the URSMD, mentoring the Dean's Teaching Fellows, and doing original research in medical education.



Kevin Fiscella, MD, MPH, (fellowship '92-'95) Associate Professor of Family Medicine and Community & Preventive Medicine, has been working hard to affect national policy regarding racial and ethnic disparities in health care. He served on the Institute of Medicine Committee for Guidance on the Design of a National Healthcare Disparities Report and has served on advisory committees for the American Medical Association, the Robert Wood Johnson Foundation, and Aetna. Most recently he served on an expert advisory panel for the National Committee for Quality Assurance regarding the development of performance measures for HMOs for racial and ethnic disparities in quality, cultural, and linguistic competency.

Stephen Lurie, MD, is a family physician who practiced about 30 minutes south of Rochester for several years before going to JAMA with a fellowship in journal editing. He served as Senior Editor, with responsibility for medical education. He also has a PhD in psychology with expertise in psychometrics (measurement in knowledge, attitudes, learning, competence, etc.). He is supremely qualified to initiate and organize substantive medical education research in his new role working with Ron Epstein and Tana Grady-Weliky, MD, Senior Associate Dean for Medical Education at the URSMD.

Eric Schaff, MD, is a professor of Family Medicine, Obstetrics and Gynecology, and Pediatrics in our Department. While his formal training was in pediatrics and adolescent medicine, he now specializes in women's reproductive health and vasectomy. He has been the principal investigator of mifepristone medical abortion trials from 1996 to the present and currently oversees a research clinic at Highland Hospital. Dr. Schaff also directs an academic fellowship and training program in abortion and family planning. There are currently four fellows. He consults on safe abortion practice internationally and has been working in Kenya, Vietnam, India, Albania, Macedonia, Kyrgyzstan, and the Philippines. He is currently on the board and past chair of the National Abortion Federation.

Family Medicine Residency interviews for the 2005 Match begin on November 15, 2004. Share our website address and contact information with your students and other potential candidates!

Department of Family Medicine — Program history and landmarks

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|--|--|
| 1968 Highland's Family Medicine Residency Program began—the 3rd in the country and 1st in New York State. | 2002 Department of Family Medicine endorses the development of the International Health Track (IHT). |
| 1975 Family Medicine Center opened at 885 South Avenue named in honor of Jacob W. Holler, MD, Director of Medical Education at Highland Hospital. | 2003 The Department of Family Medicine is nationally recognized and ranked 14th best in the nation by U.S. News & World Report. |
| 1986 Mental Health Services offered at South Avenue site. | 2004 Thomas L. Campbell, MD, named William G. Rocktaschel Professor and Chair of Family Medicine and Associate Director for the University of Rochester's Center for Primary Care. |
| 1988 William G. Rocktaschel, MD, Endowed Chair of Family Medicine established by the Highland Foundation through the generosity of Grace Kime. | 2005 Highland Family Medicine Center moves to 777 South Clinton Avenue (old AAA building) along with the Highland Apothecary, Cornhill Internal Medicine, and a Strong Health Laboratories collection station. |
| 1989 Department of Family Medicine established at the University of Rochester School of Medicine and Dentistry. John C. Dickinson, MD, is named inaugural chair. | |
| 2000 25th Anniversary celebration of the Family Medicine Center. During the year, clinicians provide 55,000 visits to over 17,000 patients served by the Center. | |

Newsletter Note

Editing and design services for the Department of Family Medicine newsletter were provided by:

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