

DEPARTMENT OF FAMILY MEDICINE

University of Rochester School of Medicine & Dentistry

Highland Hospital

Newsletter of One of the Premier Family Medicine Departments in the United States

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Introducing eRecord at Highland Family Medicine

One system, one patient, one record – that's what the new electronic medical record (eRecord) process means to the staff and patients of Highland Family Medicine.

Launched in May at HFM, the tool gives users improved ability to evaluate clinical and operational performance. Individual users are now able to see with a few clicks how well they are doing across a wide variety of clinical measures.

"We are extremely excited about launching eRecord at Highland Family Medicine," said Michael Mendoza, MD, Medical Director of Highland Family Medicine who is co-chairing the launch with Ingrid Watkins, MD, Director of Women's and Maternity Services. "Going live on eRecord now means that we will share more seamless communication with Highland Hospital and the other settings where our patients seek care. eRecord will also afford us new opportunities for health care innovation and quality improvement, to better achieve the aims of patient-centeredness as a PCMH." *(continued on page 4).*



Highland Family Medicine Super Users include: front row- Kelly Liberti, Medical Assistant, Holly Russell, MD; row 2- Ingrid Watkins, MD; Michael Mendoza, MD; David Holub, MD; Loren Oster, RN and Joan Gift, RN.

Global Health: Resident Reflections on Spring 2012 Honduras Trip

The Department of Family Medicine at the University of Rochester operates a year-round Global Health Program that offers training throughout the year. Groups embark twice a year for two weeks at a time to rural Honduras. Partnering with an NGO called Shoulder to Shoulder, the brigade helps address the needs of the rural community San Jose San Marcos de la Sierra in the Southwestern state of Intibuca, Honduras. *(continued on page 3).*



Members of the Spring Brigade 2012.



Thoughts
FROM THE CHAIR

Several years ago I became involved in the Association of Departments of Family Medicine (ADFM), a national organization composed of department chairs across the country. When I became department chair at URM, I attended their annual meeting and found it very helpful to learn from other chairs.

The organization holds special workshops for new chairs and has expanded their offerings over the years. I became a member at large on the board and was privileged to run the meeting for a year and get to know more about the organization. So when I was nominated to be president, I gladly accepted.

Being part of this organization helps me be a better chair for my own department and learn from chairs across the country who are facing similar issues that we face. The focus of my presidency is leadership development. We also help our members keep up-to-speed on health care reform and we have become an advocacy organization in academic family medicine. We advocate for key changes in graduate medical education funding and funding for research for family medicine.

Look around you. The best family medicine practitioners that you know are not only dedicated physicians, but they are concerned activists as well – fighting poverty, advocating health care reform, doing research and seeking opportunities to make the world a better place. I am proud to be president of ADFM and to be chair of a department where so many of our physicians and staff seize every opportunity to make a positive impact.

Best Wishes,

Tom Campbell, M.D. (1972)
William Rocktaschel Professor and Chair,
Department of Family Medicine

Dr. McDaniel Wins Award for Inspiring Dr. Farley to Create Community Program

Susan H. McDaniel, PhD, Associate Chair of the University of Rochester Medical Center Department of Family Medicine, Director of the Institute for Family in the Department of Psychiatry and the Dr. Laurie Sands Distinguished Professor of Families & Health at URM, is the recipient of a 2011 Elizabeth Hurlock Beckman Award.

The award of \$25,000 recognizes educators in psychology, medicine and law who have inspired a student or students to create an organization which has demonstrably benefited the community at large. Dr. McDaniel received the award at a ceremony at the Carter Center in Atlanta. Tillman Farley, MD ('90), Medical Director of the Salud Family Health Centers in Colorado, nominated her for the award. Dr. McDaniel was a mentor of Dr. Farley when he was a Family Medicine resident at URM 20 years ago.

In his nomination statement, Dr. Farley said he chose Rochester's Family Medicine residency program because of its emphasis on the biopsychosocial model of care and the idea that mental health and medical health are intimately interwoven and cannot be separated. He described Dr. McDaniel as the residency program's "most eloquent and passionate teacher" of integrated care.

Over the last 20 years, Dr. Farley said he applied what he learned from Dr. McDaniel and the Family Medicine residency as he developed integrated care programs for practices in Palmyra,



Dr. Susan McDaniel was nominated for the Elizabeth Hurlock Beckman Award by Dr. Tillman Farley, MD ('90).

NY, rural Van Horn, Texas, and currently in northern Colorado. In each case, he brought behavioral health professionals into the practices to routinely see patients.

Award to Support Psychosocial Medicine

Dr. McDaniel plans to give the \$25,000 award she received as a recipient of a 2011 Elizabeth Hurlock Beckman Award to the Department of Family Medicine to support annual awards for faculty development.

The funds will create The McDaniel-Farley Psychosocial Medicine Faculty Fund. "We are establishing this fund to provide support to Family Medicine faculty who wish to develop themselves through projects or other education in the area of Psychosocial Medicine," said Dr. McDaniel. The first faculty grant will be awarded after July 1, 2013.



In Memoriam

Jerry Huff

The staff of Highland Family Medicine mourns the passing of Jerome Lee Huff. Jerry and his wife, Mary Lou, have been great friends of the department over the years and are considered part of the department family. "Jerry was a wonderful man who was deeply committed to Family Medicine and our mission," said Dr. Tom Campbell. "We will miss him greatly."

Contributions in his memory can be made to Highland Family Medicine c/o University of Rochester Office of Gift and Donor Records, PO Box 270032, Rochester, NY 14627.

Global Health Program



(continued from page 1).

Faculty, residents, medical students, interpreters and a Shoulder to Shoulder representative visited the area in May and work side-by-side to care for, educate and improve the lives of countless members of the area. Here are reflections of first-year residents Jillian Moore, MD and Katherine Eisenberg, MD, PhD about their experiences on the trip.



Reflection – Jill

This was my first time in Honduras. I had heard about this trip back when I was a medical student completing a rotation at Rochester. It was one of the many great things I liked about this residency program, and something that I had anticipated all year. I really didn't know what to expect before getting there though. I had heard others' stories and descriptions, but also knew it was something I had to experience first-hand before truly understanding it.

While there, I appreciated it as a chance to practice medicine in a different setting with its unique obstacles and lack of certain resources I have grown accustomed to having in the U.S. Now that I'm back, I appreciate what it did for me in terms of my clinical skills, reasoning and creativity. We didn't have the bloodwork, imaging or other point-of-care tests I'm so used to ordering in the U.S. We also didn't have any follow-up. So this was a chance to fine-tune our differentials, physical exams, triaging and treatment plans.

In retrospect however, the best parts of the trip were while I was not acting as doctor. I had

the chance to be a teacher to the adolescent schoolchildren about puberty and sexuality, and to the local midwives about birth control options they could counsel their patients on. I had the chance to act as a pharmacist, a dentist, a loan officer and translator. It seemed that everyone else also took on this flexibility, and were constantly energetic and enthusiastic to do whatever was needed to help the team.

I remember a specific clinical case of someone else's in which a mother brought her four daughters in at the end of the morning session. Each of them had different illnesses, requiring different combinations of different medications. Initially there was the one pharmacist (myself) helping the resident who was acting as the doctor of the visit. We both saw this would be a very confusing task for the mother. As the clinic was closing for lunch, the other residents saw our obstacle, came to our aid, and each of us took responsibility for one individual child; gathering, separating and writing careful instructions for her medications. We soon found out that the mother and daughters were illiterate. We then had to draw instructions on how and when to take the medications. We came up with the idea of labeling each bag of medication with a different symbol, and telling each child her symbol. This shared the responsibility between mother and daughters. After all of this effort, we found out the mother did not have the ability to pay the rather hefty bill for her daughters' medications and visits. Throughout all of this, our translator had been present and helping with the medication teaching and answering questions the mother had. His final support was offering to pay her bill.

This was just one example of how certain obstacles presented themselves throughout the trip. We, the team of physicians, translators, patients, and community members came together and helped each other overcome these obstacles. I think that's what providing aid is all about, and this lesson can not only be applied abroad, but also back home. This trip taught me a lot about how I want to incorporate this flexibility, energy and creativity in everything I do, everywhere I may be.



Reflection – Kate

I wake up an hour before my alarm. Every word carries through the volunteer house. The terrain is relentless and spectacular. I work with Tom to finish setting up the pharmacy. Tom continues to rearrange for three more days. I have a strong sense that this has been done before, many times, but it still feels like we're inventing the whole thing.

I work in clinic in the afternoon. People are friendly. We're busy. The huge boxes of ibuprofen and multivitamins make more sense now. I still wonder about the anti-epileptics and the Zoloft and the huge boxes of surgical supplies. This building was empty the day before.

One man needs his leg immobilized to help a torn muscle heal. He leaves with ibuprofen and a soft ankle brace. He even has to take off the brace to fit in his shoe for the hour-long walk home.

I'm surprised how easy it is to dredge up my rudimentary Spanish. I understand a lot more than I can say. I know enough to understand when things don't get interpreted exactly.

The group is cheerful over dinner. We hear about the history of involvement in this community. I feel like a dot on a timeline. The timeline means healthcare and education for many people's children.

For more information on the Global Health Program and to view more photos visit www.urmc.rochester.edu/family-medicine/global-health/

Donations can be made on-line through the address above or contact the Highland Hospital Foundation at 585.341.0861.

Resident Spotlight

Zachary Borus, MD, MPH



"I'm committed to community and public health, and I plan to practice full-scope family medicine and do public health work. Rochester has given me a unique perspective into the way in which environment, psychology and social status impact health," says Zach Borus about his decision to go into Family Medicine.

The third-year resident has immersed himself in volunteer, service and advocacy activities as part of the Department of Family Medicine and has made a positive impact with his professors, colleagues and patients.

A graduate of Bowdoin College in Brunswick, Maine with a BA in history and biochemistry with a minor in Africana studies, Borus received his MD and MPH with distinction in community service in May 2009 from the University of Rochester School of Medicine and Dentistry.

He chose to stay in Rochester and do his residency in family medicine because he is a true devotee of the biopsychosocial model of medicine and respected the strength of the department in terms of faculty engagement, volunteerism, research and education.

"The program is one of the strongest all-around family medicine residencies in the country," says Borus. "It has many unique strengths: the concentrated four-month psychosocial medicine block in the second year; the political advocacy and leadership track (PALT) that exposes interested residents to organized medicine on a statewide and national level; the incredibly strong obstetrical training; and an established global health program in Honduras that focuses its efforts more on community development and public health than medical tourism."

Through his involvement with the PALT track, Borus worked with the NYSAFP for two years and was chosen to represent Family Medicine on the AAMC's Organization of Resident Representatives, and also served as the only resident on the AAMC's Advisory Panel on Health Care. He was one of 10 recipients nationally of the 2011 AAFP BMS Award for Excellence in Graduate Medical Education. He is grateful to his many mentors and the residency administration for all their support, and feels lucky to have had so many amazing opportunities. Borus will continue his training next year as one of the department's Maternal Child Health Fellows.

Highland Spin-Outs Team Raises \$18,000 in Tour de Cure

Department of Family Medicine members cycled away and helped raise \$18,000 as part of more than 80 members of the Highland Spin-Outs team in the recent Tour de Cure to benefit the American Diabetes Association.

Family Medicine Department members who participated included: Matt Devine, DO (and family); Tom Campbell, MD; Mike Mendoza, MD; Steve Lurie, MD; Nick Kilmer, MD; Steve Schultz, MD (and family); Dave Holub, MD; Tziporah Rosenberg, PhD; Carolyn Braddock, NP; Loron Oster, RN; Katie Lashway, RN; Carlene Lane; Kelly Liberti, MA and Lynn Essig, MA. Natercia Rodriguez, MD and Helena Hayes volunteered the day of the event.



Mike Serve (friend of Highland), Eric Howe (friend of Highland), Dr. Nick Kilmer (faculty HFM), Dr. Matt Devine (faculty HFM), and Dr. Tom Campbell (chair)



Steve Schultz and Nick Kilmer were among those who took part in the 2012 Polar Plunge. Dr. Schultz is looking forward to 2013 Polar Plunge when he will be celebrating 10 years of icy plunging! Alumni, faculty and students interested in participating next year should contact Dr. Schultz at Stephen_schultz@urmc.rochester.edu. He will keep you informed when the date is announced.

(Introducing eRecord at Highland Family Medicine, continued from page 1).

With the addition of eRecord, staff will no longer need to log in to multiple systems to access information about patients; that means less waiting time for old records and improved opportunities to avoid errors related to incomplete or illegible information. Patients will have access to individual health care information in MyChart, a medical chart they can access online to view portions of their electronic health record, including medications, immunizations, allergies and most lab results.

"Going live on eRecord is the culmination of almost two years of planning and preparation, but in many ways it is just the beginning," said Dr. Watkins. "We will be constantly optimizing how we work within eRecord with input from our staff and clinicians."

Reviews from staff are enthusiastic.

"Thanks for all of your efforts in getting the practice ready for this upcoming transition... I have been very impressed with all of the work the Super User group has been doing... Keep up the great work..."

-Matt Devine, DO, Assistant Medical Director at Highland Family Medicine

"Our team of Super Users is amazingly SUPER!! They are diligently troubleshooting every problem that comes up. It's really great to see everyone rally together like this."

-Gina Lamanna, MS, Program Manager, Highland Family Planning



Congratulations to The Family Medicine Residency Class of 2012 left to right: Edith Hui, Ann Corbett, Audra Laing, Elizabeth Helm, Melanie Gnazzo, Jennifer Frese, Erin Lineman, Lisa Downing, Rebecca Irvine, Zachary Borus

University Of Rochester/
Highland Hospital
DEPARTMENT OF FAMILY MEDICINE
CLASS OF 2015

Craig Betchart, MD
University of Rochester School of Medicine & Dentistry

Christine Cameron, MD
Medical University of South Carolina

Jessica Fergar, MD
SUNY Upstate Medical University

Laura Gift, DO
Lake Erie College of Osteopathic Medicine

Jean Hamlin, MD
Dartmouth Medical School

Matthew Heckman, MD, PhD
Penn State University Medical School

Gerrit Heetderks, MD
Case Western Reserve University School of Medicine

Yule Lee, MD, MPH
Drexel University College of Medicine

Karolina Lis, MD
Jagiellonian University (couples matched in pediatrics)

Rachel Long, DO
Kirksville College of Osteopathic Medicine

Colleen Loo-Gross, MD, MPH
University of Kansas School of Medicine

Nicole Vavrina, DO
New York College of Osteopathic Medicine

University of Rochester School of Medicine
and Dentistry Students Who Matched
in Family Medicine

Craig Betchart, MD
University of Rochester/ Highland Hospital
Family Medicine

William Bowen, MD
Tacoma Family Med Washington

Karen Boston, MD
Kaiser Permanente Los Angeles

Monique Castro, MD
Glendale Adventist Med Center California

Reija Rawle, MD
O'Connor Hospital California

Family Medicine
Alum Publishes
Book of Essays



Doug Kamerow, MD ('83), has published a book of short essays called "Dissecting American Health Care." The essays come from his health policy columns for the medical journal BMJ and his commentaries on NPR and npr.org. Doug, who spent 20 years in the US Public Health Service and retired in 2001 as an Assistant Surgeon General, is a chief scientist at the independent research institute RTI International in Washington, DC. He is also a professor of clinical family medicine at Georgetown, where he has precepted family medicine residents for 29 years. "Dissecting American Health Care" is available from amazon.

com as a paperback or a Kindle. It has received positive reviews from Family Medicine, Kirkus reviews, and the American Journal of Preventive Medicine. More information is available at <http://tinyurl.com/kamerowbook>.

Melanie Gnazzo, MD, a third-year resident in URM's Department of Family Medicine, was attracted to Rochester specifically for the opportunity to work in a clinical site with a refugee program that served the underserved.

Dr. Gnazzo recently chaperoned a group of high school juniors and seniors – all refugees and all young women – on a tour of Highland Hospital, and what Dr. Gnazzo discovered was that many of the underserved have a desire to serve others. All members of the Interact Club, a group sponsored by the Brown Square Health Center, have expressed interest in pursuing professions in the medical field.



Alumni
Spotlight



Deborah Richter, MD
('89)

"For me the Family Medicine Residency Program was more than just a residency. Of course I learned to care for patients, to practice medicine. But I also learned and was encouraged to see that more was needed. That the health care system itself needed improvement for the sake of our patients," said Deborah Richter, MD ('89) of the experiences she had in the program that propelled her to be a life-long activist for health care reform.

Dr. Richter began practicing medicine in inner-city Buffalo and joined Physicians for a National Health Program, a physician group that advocates for universal health care coverage provided by the government. She and her family moved to Vermont in 1999 where she soon became a physician activist, working part-time so she could devote time to lobbying for a single-payer system.

Despite roadblocks and setbacks, Dr. Richter and those who shared her passion kept working toward their goal and this May, Vermont became the first state in the country to pass a single-payer health care plan.

Dr. Richter recently shared her experiences with her colleagues at Highland Family Medicine when she came to her alma mater to speak at the Gene and Linda Farley Lectureship. The Farleys were also known for their passion for health care reform.

Dr. Richter is a graduate of the State University of New York at Buffalo School of Medicine and completed her internship and residency in Family Medicine at the University of Rochester School of Medicine and Dentistry. She currently practices Addiction Medicine in Vermont and serves as the President of Vermont Health Care for All as well as a member of Physicians for a National Health Program.



Welcome

Nora J. Fennessy joins Highland Family Medicine as Education Coordinator. She previously served as Coordinator, Finger Lakes Career Pathways Consortium and enjoys using the skills she developed there to support the education of medical students and fellows.

Regarding her work at Family Medicine, Fennessy stated, "This is an amazing organization and I truly enjoy being a part of it. We are not only a patient-focused Family Health practice, we are a family of employees who work with and support each other as well."

Fennessy holds a BS in Sociology from State University of New York at Brockport and an MS in Education from Buffalo State College. She is a Lean/Six Sigma Yellow Belt and is certified as a Hospice chaplain.



Congratulations

Elizabeth Brown, MD, Assistant Professor, Department of Family Medicine has been named Director of the Global Health Pathway for the University of Rochester School of Medicine and Dentistry. In this role she is responsible for curriculum development and implementation as well as evaluation of medical students and of the educational program itself.

When Doctor Becomes Patient, There's Much to Learn: Family Medicine Doctor Publishes Essay

Colleen Fogarty, MD, assistant professor in the Department of Family Medicine at the University of Rochester Medical Center, jokes that the process of being diagnosed with breast cancer a few years ago was a little too much like a trip to Jiffy Lube, in an essay in which she urges her colleagues to refocus on patient-centered care.



Published in the journal *Health Affairs*, Fogarty's personal story is titled, "Call it Jiffy Boob: What's Lacking When Care Has Assembly-Line Efficiency." She contrasts her own patient experience with the task of redesigning her family medicine practice at an inner-city, federally funded health center.

"Doctors are patients, too, on occasion, and there's much we can learn from both roles," Fogarty writes, suggesting that quality initiatives should take more than just efficiency into account. "After all, medicine is a profession of healing. And healing, we should never, ever forget, involves people who act and react, truly caring as they relate to one another."

Fogarty, who also serves as director of Faculty Development Fellowships, was treated for ductal carcinoma in situ, a very early stage of breast cancer, and is doing well. In reflection, however, she relates her feelings of fear and isolation during her time as a patient.



VOICE Study in Second Year

A \$2.9 million research project is testing a powerful new intervention to improve the quality of discussions among oncologists, patients and families in the context of incurable cancer, and to promote patient- and family-centered care.

Principle Investigators Ronald Epstein, MD (University of Rochester Department of Family Medicine) and Richard Kravitz, MD (UC-Davis, Sacramento) have designed the study to improve the care received by patients with advanced cancer by improving communication between oncologists, patients and their families (caregivers).

"The VOICE Study" (Values and Options in Cancer Care) is unique in that all of the interventions are individualized and tailored to the needs of the patients, caregivers and physicians. The interventions include audio-visual and written materials, but the majority of time is spent practicing how to communicate more effectively and efficiently. In addition, patient-oncologist office visits are audio-recorded to see whether the intervention improves the quality of conversations about issues important to patients facing serious illness.

After completing the interventions, patients and caregivers will be surveyed for up to three years to see if they experience better relationships with their physicians, have a better understanding of their illness and their treatments, experience better quality of care and quality of life and receive care that matches their wishes and values.

Up to 23 oncologists in 8 practices in Western New York will be participating, plus another 14 at UC Davis in Sacramento, California. Overall, the study will involve up to 450 patients and an equal number of family/caregivers. Oncologists and patients will be randomized into intervention and control groups. This study is funded by the National Cancer Institute.

Faculty Accomplishments

Selected Publications

Barnett S; Klein JD; Pollard Jr RQ; Samar V; Schlehofer D; Starr M; Sutter E; Yang H; Pearson TA. "Community participatory research with deaf sign language users to identify health inequities." American Journal of Public Health. 2011

Carroll, T; **Epstein R**; **Gramling R**. "What are strategies for eliminating survival prognoses in advanced non-cancer illness?" Evidence-Based Practice of Palliative Medicine. 2012

Fogarty CT "Call it 'jiffy boob': what's lacking when care has assembly-line efficiency." Health Affairs (Project Hope). 2011

Fogarty CT "What My Cancer Taught Me: Quit Smoking Before It's Too Late." American Family Physician. 2011

Gramling R; Carroll T; **Epstein R**. "Prognostication in advanced illness." Evidence-Based Practice of Palliative Medicine. 2012

Jerant A; **Fiscella K**; Franks P "Health characteristics associated with gaining and losing private and public health insurance: a national study." Medical Care. 2012.

Jerant A; Sohler N; **Fiscella K**; Franks B; Franks P "Tailored interactive multimedia computer programs to reduce health disparities: opportunities and challenges." Patient Education and Counseling. 2011

Makowski SK; **Epstein RM** "Turning toward dissonance: lessons from art, music, and literature." Journal of Pain and Symptom Management. 2012

McKee M, Hauser P. (2011). Deaf Epistemology: The Juggling of Two Worlds. Deaf Epistemologies. 2012

Moulton CA, **Epstein RM**. "Self-monitoring in surgical practice: slowing down when you should." Surgical Education: Theorizing an Emerging Domain. 2011

Sprod LK; Janelins MC; Palesh OG; **Carroll JK**; Heckler CE; Peppone LJ; Mohile SG; Morrow GR; Mustian KM "Health-related quality of life and biomarkers in breast cancer survivors participating in tai chi chuan." Journal of Cancer Survivorship: Research and Practice. 2011

Winters L.; **Winters P**. "African American Teenage Pregnancy: A Dynamic Social Problem." Sage Open. 2012



Family Medicine offices are expanding into 757 South Clinton Ave, next store to current site.

Highland Family Medicine Expands and Opens New Offices

The \$1.6 million expansion project of Highland Family Medicine/Corn Hill Internal Medicine is completed. Highland Family Medicine faculty now occupy offices at 757 S. Clinton Ave. and have conference space there that is frequently used for meetings and educational programs. Parking has been expanded by 60 spots, which more easily accommodates patient, staff, and provider parking needs, according to Diane S. Koretz, MBA, Administrator, Highland Family Medicine.

The final construction phase included construction of Suite 200 (located in the former Corn Hill Internal Medicine office space). The department's new faculty and residents have been hired to see patients in the new suite. "The department is recruiting for and training a nurse practitioner, nurses, MAs, and medical secretaries to support about 7,200 additional visits this next year," says Koretz. "Our objective is to better meet increasing patient demand for primary care services and to improve patient access."



Kevin Fiscella, MD On Vitamin D

Kevin Fiscella, MD, public health specialist and family physician recently served as a source for *New York Times* columnist Jane Brody in her blog about vitamin D.

Dr. Fiscella told Brody he takes 1,000 international units of vitamin D each day. He's made this decision based on data from his studies linking racial disparities in vitamin D levels to disease risk and his belief that "it can't hurt and it may help."

Dr. Fiscella told Brody that his findings strongly suggest, but do not prove, that vitamin D deficiencies cause or contribute to diseases like colorectal cancer, high blood pressure and kidney and heart disease, which affect black Americans at higher rates than whites. The findings are supported by known effects of vitamin D and the fact that blacks living in the Northern Hemisphere have widespread vitamin D deficiencies. The blog was posted March 12, 2012.

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Save the Date

Sischy Lecture

October 16, 2012

6 pm

Memorial Art Gallery

500 University Ave
Rochester, NY



Featuring Lisa Sanders, MD, author of the popular New York Times column, "*Diagnosis*," and the author of the book "*Every Patient Tells a Story: Medical Mysteries and the Art of Diagnosis*."

To register or for more information call **585.276.3803**.